THIS PAPER RELATES TO ITEM 8

ON THE AGENDA

CLACKMANNANSHIRE COUNCIL

Report to Clackmannanshire Council

Date of Meeting: 1 October 2026

Subject: **Clackmannanshire & Stirling HSCP – Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling Report – Approved at 24 June 2026 Integration Joint Board Meeting.**

Report by: **Dr Jennifer Borthwick, Interim Chief Officer, Clackmannanshire & Stirling HSCP, and Lyndsey Dunn, Head of Community Health & Care, Clackmannanshire & Stirling HSCP.**

1.0 Purpose

1.1. This report advises Clackmannanshire Council that on Wednesday 24 June 2026 the Clackmannanshire & Stirling Integration Joint Board (IJB) approved a report *Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling*. The report summarises the IJB decision and Directions, the implications for Clackmannanshire Council, and the current implementation position.

1.2. The report also identifies the principal matters requiring continuing assurance: support for affected employees, continuity and quality of respite provision, delivery of the planned financial benefits, and the future use of the Ludgate House estate.

2.0 Recommendations

2.1. Clackmannanshire Council is asked to:

2.1.1. **Note** the approval by the Clackmannanshire & Stirling IJB of the Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling report;

2.1.2. **Note** the Directions issued by the IJB to implement the approved model;

2.1.3. **Note** the implications of the decision for Ludgate House and affected employees; and

2.1.4. **Note** the progress being made in implementing the approved recommendations.

3.0 Considerations

3.1. On 24 June 2026, the Clackmannanshire & Stirling Integration Joint Board (IJB) approved the report Future Model of Planned Bed-Based Respite throughout Clackmannanshire & Stirling (Appendix 1) and subsequently issued Directions to the constituent authorities. The Council is therefore being asked to note the IJB decision and satisfy itself that the implications for Council functions, employees, assets and resources are being managed appropriately. This report does not invite Council to revisit the IJB decision.

3.2. The approved model aims to deliver a more carer-centred approach to short breaks and respite, providing greater choice and control for carers and supported people through self-directed support arrangements, while maintaining access to bed-based respite for those with assessed nursing care needs.

3.3. For Clackmannanshire residents, the approved model includes a significant increase in the Carers Short Breaks Budget, £65,000 to £200,000 in 2026/27, enabling access to a wider range of flexible short break opportunities alongside commissioned nursing care level respite beds within the independent care home sector.

3.4. The approved model has implications for Clackmannanshire Council arising from the decommissioning of all bed-based care provision at Ludgate House. These implications include the application of the Council's Organisational Change Protocol to affected employees and reduced utilisation of part of the Ludgate House estate. Reablement, Mobile Emergency Care Service (MECS), administration and training functions will continue to operate from the building.

3.5. The recommendations within the IJB report were as follows:

3.5.1. Note the work undertaken by the Future Model of Planned Bed Based Respite (FMPBBR) Working Group to develop options and consult thoroughly upon them.

3.5.2. Approve Option 3 as the Preferred Option.

3.5.3. Approve the decommissioning of the current approach to bed based respite throughout Clackmannanshire & Stirling including decommissioning the 4 residential respite beds and the 6 short stay assessment beds at Ludgate House.

3.5.4. Approve the commissioning of a total of 6 nursing care level respite beds from the local independent care home sector for year-round use (3 in Stirling and 3 in Clackmannanshire).

3.5.5. Approve the planned increase to the Carers Short Breaks Budget in Clackmannanshire by approximately £135k/year in 2026/27 (from £65k/year currently to £200k/year) funded by a share of the expected savings from commissioning changes in Clackmannanshire.

3.5.6. Note that the overall impact of all of the recommendations above is that all bed based care provided from Ludgate House will be decommissioned during 2026/27.

3.5.7. Note that the recommendation to decommission means that a total of 19 Ludgate House beds staff (14.5 FTE), who may be at risk of redundancy, will require to be supported through the Clackmannanshire Council Organisational Change Protocol and redeployment process.

3.5.8. Note that the financial effect of the recommendations above is expected to be cost neutral in Stirling, while in Clackmannanshire it is expected to lead to a significantly enhanced Carers Short Breaks Budget (£200k/yr) and substantial recurring annual HSCP savings (circa £795k/yr from 2027/28 onwards).

3.6. Preparation for the IJB's consideration of the attached report on 24 June 2026 included:

3.6.1. The delivery of a thorough community engagement process in the form of consultation with stakeholders throughout Clackmannanshire & Stirling, including Ludgate staff, carers and supported people during October and November 2025.

3.6.2. A Clackmannanshire Council Elected Member Briefing on 18 Dec 2025.

3.6.3. A further Clackmannanshire Council Elected Member Briefing on 4 June 2026.

3.6.4. A Stirling Council Elected Member Briefing on 9 June 2026.

3.6.5. Presentation at the Clackmannanshire & Stirling IJB Strategic Planning Group on 17 June 2026.

3.7. The IJB approval of the Future Model of Planned Bed Based Respite throughout Clackmannanshire and Stirling report has led to the IJB issuing the following Directions to both Clackmannanshire Council and Stirling Council:

3.7.1. Implement the recommended future model of planned bed based respite throughout Clackmannanshire & Stirling to deliver a carer centred approach to short breaks and respite that provides greater choice and control for carers and supported people, while maintaining access to bed based respite for those with assessed need.

3.7.1.1. Decommission the current approach to bed based respite throughout Clackmannanshire & Stirling including decommissioning the 4 residential respite beds and the 6 short stay assessment beds at Ludgate House.

3.7.1.2. Commission a total of 6 nursing care level respite beds from the local independent care home sector for year-round use (3 in Stirling and 3 in Clackmannanshire).

3.7.1.3. Increase the Carers Short Breaks Budget in Clackmannanshire from £65k/year to £200k/year in 2026/27 funded by a share of the expected savings from commissioning changes in Clackmannanshire.

3.7.1.4. Realise circa £795k/year of recurring annual savings from 2027/28 onwards from commissioning changes in Clackmannanshire.

3.8. Implementation has progressed since the IJB decision on 24 June 2026. Key items of note are as follows:

3.8.1. The nineteen Ludgate House beds staff (14.5 FTE) have received comprehensive support to navigate the implications of the IJB decision. Support has been provided by HSCP line managers, the HSCP Organisational Development lead, a Clackmannanshire Council HR Business Partner, and Trade Union representatives. Regular one to one and group meetings have been held between Ludgate beds staff and the colleagues noted above, as well as frequent informal and drop-in sessions.

3.8.2. In alignment with the Clackmannanshire Council Organisational Change Protocol an employee's formal 6-month redeployment period does not commence until the employee has received a full appraisal of the financial terms of any redundancy offer including pension implications. All affected employees attended individual meetings on 25th, 26th and 27th August 2026 and the 1st of September 2026, during which they were provided with their figures. In the meantime, the Ludgate House beds staff have been supported to undertake job shadowing of potential roles that they might wish to apply for within partner organisations in the near future. In addition, some staff have commenced 4-week trial periods in roles that they may be permanently redeployed to when they reach the correct stage of the application of the organisational change protocol.

3.8.3. While it would not be appropriate to provide specific examples of an individual's journey through the pre-redeployment and redeployment process, there is a range of views throughout the affected staff. The spectrum stretches from those who are keen to take a package and leave the organisation, to those who very much want to find an alternative role and continue to work for Clackmannanshire Council. All of the team supporting and managing this transition (noted in 3.6.1 above) are committed to supporting each member of staff in ways that help them achieve their own preferred outcome.

3.8.4. The IJB decision also means that there will be reduced usage of Ludgate House after September 2026, though the current Reablement & Mobile Emergency Care Service (MECS) teams, administration and training functions will continue to operate from Ludgate House. In relation to the Ludgate building itself, the Future Model of Planned Bed Based Respite Working Group has extended invitations to Clackmannanshire Council Estates colleagues so that any operational matters relating to the ongoing operation of the Ludgate building and future arrangements can be worked through collaboratively.

3.8.5. Procurement work proceeds at pace to establish contracts for the six year-round block booked beds in nursing care level care homes that will enable the long-term provision of planned bed based respite throughout Clackmannanshire and Stirling. Short term contract

solutions are in place to bridge the period between the closure of the Ludgate respite beds and the completion of the long-term contract work noted above.

4.0 Sustainability Implications

4.1. The approach explained in the attached IJB report proposes a long term approach to the future model of bed based respite throughout Clackmannanshire & Stirling that addresses a number of sustainability elements, including:

4.1.1. Changing the current model which doesn't work equally well for all carers.

4.1.2. Being based on a thorough consultation process.

4.1.3. Commissioning nursing care respite beds from local care homes.

4.1.4. Creating an enhanced short breaks budget in Clackmannanshire.

4.1.5. Providing more care than before & enabling further flexibility, choice, and control for all carers with assessed need.

4.1.6. Delivering substantial recurring annual savings from 2027/28.

5.0 Resource Implications

5.1. Financial Details

5.2. The full financial implications of the recommendations are set out in the report. This includes a reference to full life cycle costs where appropriate.

Yes ☒

The financial implications are set out in the IJB report at Appendix 1. These include increasing the Clackmannanshire Carers Short Breaks Budget from £65,000 to £200,000 in 2026/27 and forecast recurring annual HSCP savings of approximately £795,000 from 2027/28.

5.3. Finance have been consulted and have agreed the financial implications as set out in the report. Yes ☒

5.4. Staffing – is detailed within the report and within the IJB Report at Appendix 1.

6.0 Exempt Reports

6.1. Is this report exempt? Yes ☐ (please detail the reasons for exemption below) No ☒

7.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) **Our Priorities**

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all	☒
Our families; children and young people will have the best possible start in life	☐
Women and girls will be confident and aspirational, and achieve their full potential	☐
Our communities will be resilient and empowered so that they can thrive and flourish	☒

(2) **Council Policies**

Complies with relevant Council Policies	☒

8.0 Impact Assessments

8.1 Have you attached the combined equalities impact assessment to ensure compliance with the public sector equality duty and fairer Scotland duty? (All EFSIAs also require to be published on the Council's website)

8.2 If an impact assessment has not been undertaken you should explain why:

This Clackmannanshire Council Report is for noting and does not have a separate equalities assessment, while the attached IJB Report required decisions and the HSCP Equalities Impact Assessment (EQIA) was applied at that stage.

The Clackmannanshire Council combined equalities impact assessment has not been undertaken because the subject of this report – the 24 June 2026 IJB Report on the Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling - has had both the initial and full HSCP EQIA documents completed. These are attached to the IJB report in Appendix 1.

9.0 Legality

9.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes ☒

The IJB Paper (Appendix 1) and the associated Directions received legal review before being issued.

10.0 Appendices

10.1 Please list any appendices attached to this report. If there are no appendices, please state "none".

Appendix 1 – Clackmannanshire & Stirling HSCP IJB Report on the Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling – 24 June 2026.

11.0 Background Papers

11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes ☐ (please list the documents below) No ☒

Author(s)

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Approved by

NAME	DESIGNATION	SIGNATURE
Nikki Bridle	Chief Executive	[redacted]

Clackmannanshire & Stirling Integration Joint Board

24 June 2026

Agenda Item 7

Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling

For Approval

Paper Approved for Submission by:	Dr Jennifer Borthwick, Interim Chief Officer
Paper presented by	Lyndsey Dunn, Head of Community Health & Care
Author	David Niven, Adult Social Care Portfolio Lead, Stirling Council
Exempt Report	No

Directions	
No Direction Required	☐
Clackmannanshire Council	☒
Stirling Council	☒
NHS Forth Valley	☐

Purpose of Report:	This report seeks IJB approval for the recommended future model of planned bed-based respite throughout Clackmannanshire & Stirling. The recommendations support a carer-centred approach, providing greater choice and control for carers and supported people, while maintaining access to bed-based respite for those with assessed need. In Clackmannanshire, the proposed model will increase the Short Breaks Budget significantly, enabling a wider range of short break options through self-directed support, alongside commissioned nursing care level respite beds.
Recommendations:	The Integration Joint Board is asked to: 1) Note the work undertaken by the Future Model of Planned Bed Based Respite (FMPBBR) Working Group to develop options and consult thoroughly upon them. 2) Approve Option 3 as the Preferred Option. 3) Approve the decommissioning of the current approach to bed based respite throughout Clackmannanshire & Stirling including decommissioning the 4 residential respite beds and the 6 short stay assessment beds at Ludgate House. 4) Approve the commissioning of a total of 6 nursing care level respite beds from the local independent care home sector for year-round use (3 in Stirling and 3 in Clackmannanshire). 5) Approve the planned increase to the Carers Short Breaks Budget in Clackmannanshire by approximately £135k/year in 2026/27 (from £65k/year currently to £200k/year) funded by a share of the expected savings from commissioning changes in Clackmannanshire. 6) Note that the overall impact of all of the recommendations above is that all bed based care provided from Ludgate House will be decommissioned during 2026/27. 7) Note that the recommendation to decommission means that a total of 19 Ludgate House beds staff

	(14.5 FTE), who may be at risk of redundancy, will require to be supported through the Clackmannanshire Council Organisational Change Protocol and redeployment process. 8) Note that the financial effect of the recommendations above is expected to be cost neutral in Stirling, while in Clackmannanshire it is expected to lead to a significantly enhanced Carers Short Breaks Budget (£200k/yr) and substantial recurring annual HSCP savings (circa £795k/yr from 2027/28 onwards).

Key issues and risks:	*Current respite arrangements do not consistently meet Self-directed Support and Carers legislation requirements, including Adult Carer Assessments, Direct Payments and review processes. The recommendations will significantly reduce this risk.* *There is also a financial risk in maintaining the current bed-based model, given cost pressures and the IJB's responsibility to secure best value as commissioner of care.*

Clackmannanshire & Stirling HSCP Professional Advisory Group view, which will provide professional advice and expertise on key aspects within this report.	Following discussion, the Professional Advisory Group agreed: The paper should more clearly state that a total of six nursing care respite beds will be commissioned from the local independent care home sector for year-round use, with three beds allocated to Stirling and three to Clackmannanshire.

1. Background

1.1. On 26 March 2025 the Integration Joint Board (IJB) approved the Clackmannanshire & Stirling Health & Social Care Partnership Short Breaks Services Statement (Appendix 1).

1.2. In line with the Self-directed Support legislation and the Carers' Short Breaks Services Statement agreed on 26 March 2025, there is a need to review and consider how residential respite is currently provided throughout Clackmannanshire & Stirling.

1.3. The 26 March 2025 IJB report section 3.11 noted that "Implementing the short breaks policy [services statement] will require disinvestment from traditional respite models in order to establish a short breaks fund to be appointed within localities… To enable this shift this would mean the current respite beds within Ludgate would be surplus to requirement,".

1.4. Within the 24 September 2025 IJB report section 2.4.3 it was also noted, referring to the quote in 1.3 above, that "the ten beds at the Ludgate Centre (4 Respite and 6 Short Stay Assessment) are staffed as a single unit, and it

cannot be assumed that 40% of the budget can be saved with the removal of 4 of the 10 beds. It is recognised that the significant level of savings expected and the need to establish a sufficient short breaks budget in Clackmannanshire mean that options considered will need to include the closure of all 10 beds at Ludgate House."

1.5. This report builds on previous IJB reports and the detailed work completed during late 2025, including:

1.5.1. 26 March 2025 – Model of Care Respite and Short Breaks

1.5.2. 18 June 2025 – Modernising the Approach to Residential Respite Provision

1.5.3. 24 September 2025 – Commissioning Change to the Model of Bed Based Respite in Clackmannanshire & Stirling

1.5.4. 26 November 2025 – Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling

1.6. Since the September 2025 report, HSCP colleagues and partners have completed a stakeholder engagement process in the form of consultation to inform the future model of bed-based respite across Clackmannanshire and Stirling.

2. Stakeholder Engagement Process in the form of Consultation

2.1. The FMPBBR Working Group consulted stakeholders over six weeks, from 1 October to 12 November 2025, on options for the future model. The work recognised that respite provision is inconsistent across Clackmannanshire and Stirling and does not always provide the level of carer focus, choice and certainty required.

2.2. The current model presents different challenges in each area. Stirling has a short breaks budget but limited ability to book respite in advance, creating uncertainty for carers. Clackmannanshire has four respite beds at Ludgate House but only a limited short breaks budget, restricting choice and control.

2.3. A total of eight consultation events attended by 48 people were conducted with a variety of groups including key stakeholder groups and 'open to all' events across a number of locations/media. This included five in person meetings, three online events, and self-service online via the HSCP Citizen Space portal (where all documents shared at meetings were also available). A brief consultation 'process' report has been produced and is attached as Appendices 2.1 to 2.4.

2.4. Consultation focused on four potential future options, set out in the Future Options Grid at Appendix 3. These options were discussed at events and made available online and in hard copy.

2.5. Feedback from the events and 20 online survey responses from 16 sources (2 of which were groups of Ludgate staff) have been analysed and summarised in the consultation responses report at Appendices 4.1 and 4.2.

2.6. Responses to the survey and points made at the events did include some challenges to changing the current model of planned bed based respite in Clackmannanshire. However, participant concerns eased following clarification and discussion with HSCP colleagues, and the results of the consultation do not require any significant change to the options presented for consideration or the recommended way forward. Leaders of the community petition submitted to the HSCP have also seen their concerns reduce following discussion with HSCP colleagues. Please see a brief report which recognises the receipt of the community petition by the Chair of the IJB and Interim Chief Officer on 2 December 2025, at Appendix 4.3.

2.7. This stakeholder engagement in the form of consultation was separate from any formal employment consultation required under organisational change policies. Staff were engaged early as a key stakeholder group and remain supported through the appropriate employment processes.

3. Short Stay Assessment Beds at Ludgate House and Home First

3.1. The 10 beds at Ludgate House comprise 4 respite beds and 6 Short Stay Assessment (SSA) beds, staffed as one unit. While consultation focused mainly on respite, further work considered the use of SSA beds to ensure any recommendations were deliverable.

3.2. In 2024/25, occupancy of the 6 SSA beds averaged 4.3 beds per year. Further analysis indicated that genuine SSA use was between 1.7 and 3.1 beds per year, with some people likely able to be supported in more homely settings or closer to home.

3.3. Alongside the relatively low demand for the SSA beds at Ludgate there has been an increasing awareness of, and momentum around, the Scottish Government Home First and Discharge to Assess agendas which are both evidence led approaches. This work includes efforts to ensure appropriate levels of flow from acute hospital settings, and in recognition that supported people's longer-term health and care needs are best assessed in their usual environment rather than within controlled institutional settings such as hospital wards or SSA beds.

3.4. Given the Home First and Discharge to Assess agendas, demand for SSA beds at Ludgate is expected to reduce over time. Current demand can be met within existing Bellfield Centre capacity, which provides a modern assessment environment with regular AHP (Allied Health Professional) and ANP (Advanced Nurse Practitioner) input. In 2024/25, 13.5 Bellfield Centre SSA beds per year were used by Clackmannanshire residents. The small expected increase in the use of Bellfield Centre beds resulting from this proposal (1.7-3.1 beds/year) will remain within current Bellfield Centre capacity, so there will be no additional Bellfield Centre costs. Recent Clackmannanshire users of the

Bellfield Centre report good levels of satisfaction and while it might require family to travel a little further from home during the brief period of short stay assessment, the quality of care and support is recognised to be worth it.

3.5. HSCP Senior management are satisfied that the data supports decommissioning the 6 SSA beds at Ludgate. If the IJB approves decommissioning the current planned bed-based respite model, all 10 Ludgate beds should therefore be decommissioned together.

4. Recommended Way Forward

4.1. The four options considered throughout the consultation process are summarised below and set out more fully (including descriptions, likely service outcomes, cost factors and estimates, benefits, risks, and time to deliver), at Appendix 3:

4.1.1. Option 1 – No change/ business as usual within Clackmannanshire and Stirling bed based respite assets and services – each continuing to be managed separately as they currently are.

4.1.2. Option 2 - A single managed approach to existing bed based respite assets and services across Clackmannanshire & Stirling – no change to assets or services, but managed as a single service with cross payments rather than two separate services.

4.1.3. Option 3 - Update the model of bed based respite across Clackmannanshire & Stirling – including decommissioning the current approach in each area and commissioning 3 year round care home respite beds in each of Clackmannanshire and Stirling (6 in total), with enhanced Short Breaks Budget in Clackmannanshire and recurring annual savings.

4.1.4. Option 3 plus – As per Option 3 with additional investment in Intermediate Care Services at CCHC (Clackmannanshire Community Health Centre).

4.2. Options 3 and Option 3 Plus generated most discussion because they involved the greatest change and potential benefit. The main benefits identified were:

4.2.1. The reliable availability of 3 nursing care level planned bed-based respite beds within care homes in each of Clackmannanshire & Stirling year-round, with the ability to book well in advance. In Clackmannanshire current usage at Ludgate is 3.0 beds/year. In Stirling there is 5.7 beds/year usage but only one commissioned bed.

4.2.2. The creation of a significantly improved Carers' Short Breaks Budget in Clackmannanshire (from £65k/yr to £200k/yr) offering those people with social work assessed need greater independence, choice and control, to secure the short break that works best for them.

4.2.3. The ability to secure significant savings on behalf of the HSCP.

4.2.4. HSCP Commissioning colleagues expect that:

4.2.4.1. There will be an appetite from local care homes to enter into annual contracts to provide year-round respite beds at the national care home contract rate in both Clackmannanshire and Stirling.

4.2.4.2. There will be a significant reduction in the ongoing admin required in Stirling where colleagues are currently spending a considerable amount of time contacting care homes to see if they will accept individual respite cases within two weeks.

4.2.4.3. Carers in Stirling will gain a significant benefit by knowing that they have greater choice and a much better chance of being able to book their bed based respite with longer more appropriate notice periods.

4.2.4.4. Carers in Clackmannanshire and Stirling will also be able to benefit from the centralised bed based respite booking system that the commissioning team will use to manage the new respite arrangements.

4.3. Following consideration during and since the consultation process the following conclusions were identified. Options 1 and 2 do not provide sufficiently increased levels of choice and control, or sufficiently increased short breaks budgets, for carers with assessed need. In addition, Options 1 and 2 do not address the high cost per night of bed based respite at Ludgate, or the lack of nursing level care provision, and have therefore been discounted as possible ways forward. Given the HSCP financial position and the savings requirement for 2026/27, Option 3 Plus is no longer feasible because it requires additional investment. Option 3 remains deliverable and offers:

4.3.1. The continued provision of planned bed based respite for those with social work assessed need in both Clackmannanshire and Stirling either within commissioned care home beds or via self-directed support.

4.3.2. The creation of a meaningful Short Breaks Budget in Clackmannanshire.

4.3.3. Substantial recurring annual savings.

4.3.4. Delivery of the previous commitments of the IJB in relation to carers' short breaks including bed based respite, and choice and control via self-directed support for those carers and supported people that wish to use it.

4.4. A brief summary of the financial implications of the preferred way forward (Option 3) is as follows:

Indicative information for 2026/27	**Clackmannanshire**
Current Ludgate House 10 Beds Model	

Annual Ludgate Beds Budget	£1,100,340
Existing Short Breaks Budget	£ 65,000
Total Budget	**£1,165,340**
Alternative – Option 3 – Projection	
Cost of 3x Commissioned Respite Beds	£ 168,015
Existing Short Breaks Budget	£ 65,000
Additional Short Breaks Budget created (total SBB for 26/27 = £200k in Clacks)	£ 135,000
Total Cost	**£ 368,015**
Potential Recurring Annual Saving from 2027/28 onwards	**£ 797,325**
Savings in 2026/27 are likely to be considerably lower due to staffing costs being incurred for more than half of the 2026/27 financial year, and the likelihood that some redundancy costs will also need to be covered.	£TBC Detailed cost modelling to be completed.

It should be noted that while every effort will be made to find alternative employment for the 19 Ludgate House beds staff (14.52 FTE) who may be at risk of redundancy, through the application of the Clackmannanshire Council Organisational Change Protocol and redeployment procedures, staff may elect to take voluntary redundancy as part of this process. Any associated costs are difficult to quantify at this stage, as they are dependent on a number of factors, including age, length of service, and eligibility for pension benefits. However, these costs will be met by offsetting against savings during Year 1.

4.5. In Stirling the impact of the switch to Option 3 is likely to be cost neutral due to bed based respite already being purchased from local care homes at the national care home contract rate from within the existing Stirling Short Term Care & Respite (Short Breaks) Budget. Quality, in terms of being able to book in advance, will increase in Stirling under Option 3 with an increase in the number of block booked beds from one to three, but cost is expected to remain the same as before.

4.6. With Option 3 being recommended as the preferred way forward, further management consideration during the early months of 2026 has concluded that it is not helpful to include the overall closure of Ludgate House at this time. This is because alongside some Training and Admin functions, the 24/7 - year-round workforce for the MECS (Mobile Emergency Care Service) and the Clackmannanshire Reablement Service are both based at Ludgate. Both services rely on regular vehicular access to their offices day and night, and at this stage there is no clear alternative location for these services. If the complete closure of Ludgate House becomes a priority in the future, then a separate project can be established to identify alternative locations and ensure that the options being considered meet the needs of the service.

5. Key Questions & Responses from Engagement in the Form of Consultation

5.1. Appendix 4.1 contains summaries of the questions or concerns voiced at the 8 stakeholder engagement events, and the HSCP responses provided during the meetings. Appendix 4.2 contains a summary report on the responses received to the online survey as well as presenting a record of all of the responses received. Our thanks go to the Stirling Council Data Team for their assistance in analysing the online survey responses and producing the Appendix 4.2 report.

5.2. Key questions received at events and the HSCP responses that may help to give the IJB confidence to support the recommendations within this report are noted below:

5.2.1. With respect to questions about whether there would be differences in quality of care between Ludgate and commissioned respite beds in local nursing level care homes the following points were made at each meeting:

5.2.1.1. Commissioned respite would be at nursing level care homes (with nurses on staff) while Ludgate is registered as a residential care home (without nurses on staff).
5.2.1.2. Commissioned nursing level care homes are all registered with the Care Inspectorate and inspected regularly with results published and widely available.
5.2.1.3. Carers and supported people will have the choice and control to decide at which of the commissioned nursing care homes they wish to receive their respite, or if they wish they can exercise further levels of choice and control via their right to self-directed support (SDS).
5.2.1.4. HSCP Care Home Review Team regularly visit all of the local care homes to undertake annual reviews with supported people which provides another regular route that the HSCP uses to keep track of quality and consistency throughout the area.
5.2.1.5. The HSCP commissioning team can where necessary act rapidly to respond to any concerns over any care home and arrange alternatives at pace.

5.2.2. Queries around location of care homes and concerns for what that would mean for arranging transport if respite no longer provided at Ludgate:

5.2.2.1. Options 3 and 3 plus both involve commissioning three beds across Clackmannanshire and three beds across Stirling. It is expected that these beds will be across a number of care homes which will mean that there will be more local respite options closer to more people than is currently the case, which would in turn mean reductions in travel required.

5.2.3. There were positive responses about the service provided at Ludgate but it was mentioned that it wasn't always available when required and some shared experience of challenges with booking respite care and not receiving confirmation of respite slots at Ludgate until late on (and the confirmation coming in inconsistent formats), resulting in challenges with planning and changes to existing plans:

5.2.3.1. The HSCP Commissioning team have been developing a booking system to help manage respite provision. Once a decision has been made about the future model of planned bed based respite, then the appropriate finalisation will be applied to enable a better more flexible and responsive respite booking service to be provided throughout Clackmannanshire & Stirling.

5.2.4. Several queries around reason for the differences in cost of respite at Ludgate versus care homes:

5.2.4.1. The difference in costs per bed per week at Ludgate versus nursing level care homes is largely due to economies of scale. There are required staffing levels for care home services during the day and at night and meeting these standards with a total of only 10 beds at Ludgate means that Ludgate costs are significantly higher. Many of the fixed costs in independent sector care homes are spread across many more beds and staff and result in significantly lower costs per bed per week. There are also higher costs at Ludgate relating to standard public sector terms and conditions.

5.2.5. Limited interest in most groups about the more flexible options for carers outside of bed-based respite that could be enabled by options 2-3+ (although at times there seemed to be a slight misunderstanding that the intention was to replace bed-based respite with these):

5.2.5.1. At the consultation events HSCP colleagues hosting the events helped attendees to understand that none of the options being considered involved stopping the provision of planned bed based respite. Options 2 to 3 plus would all release some budget in Clackmannanshire which would increase the Clackmannanshire Short Breaks Budget while also continuing to provide bed based respite for those with assessed need. HSCP colleagues were keen to help those attending appreciate that there are carers and supported people across the HSCP for whom the current approach to respite provision does not currently work well. Providing improved levels of choice and control via short breaks budgets would mean that more people can receive the respite they need while not stopping those who want bed based respite continuing to be able to access that kind of care too.

5.2.6. Support for the idea of making improvements to the service while also reducing costs to the HSCP (although some had concerns that a

decision has already been taken, with the main priority of work being to cut costs and not to also increase options to carers):

5.2.6.1. HSCP colleagues confirmed that improving the respite service in its widest sense (including planned bed based respite) across the HSCP was the driver for this consultation process. Colleagues and attendees also acknowledged that throughout the public sector there are financial challenges and that opportunities such as this, that offer the opportunity to improve service provision while also improving financial efficiency, should be welcomed and supported. Attendees were reassured that no decisions had already been taken and that IJB approval would be sought for the recommendations resulting from this consultation process.

5.3. It may also be helpful at this stage to note a few further items:

5.3.1. In any situation, whether it is to do with transport or a preference for one commissioned nursing care level respite bed over another, there will be choice and control available to carers and the people they support. No one will be obliged to receive care in any location that they are not content with. While potentially a less obvious outcome of this work, the establishment of a significantly enhanced short breaks budget in Clackmannanshire will have a large impact. This is because it will enable those with social work assessed need for bed based respite or other types of short break to have the option to use self-directed support to ensure that they have the levels of choice and control over their care/services that they feel meets their needs.

5.3.2. As part of the process of organising bed based respite within a commissioned nursing care level respite bed, both the carer and the supported person will be enabled to visit the care home beforehand should they wish to do so.

5.3.3. The commissioning of the block booked nursing care level respite beds, if approved by the IJB, would be undertaken in a way that enables flexibility and variation over time. Should more or fewer block booked respite beds be required over time, then the commissioning process and the resulting contracts with providers will enable this to occur.

6. Preferred Option - Recommendations to IJB

6.1. Taking all of the information shared above into consideration, the preferred option for the Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling is Option 3.

6.2. Option 3 will:

6.2.1. Update the model of bed based respite across Clackmannanshire & Stirling – including decommissioning the current approach in each area

and commissioning 3 year round nursing level care home respite beds in each of Clackmannanshire and Stirling (6 beds in total).

6.2.2. Establish a significantly enhanced Short Breaks Budget in Clackmannanshire (from £65k to £200k).

6.2.3. Deliver significant ongoing annual savings (circa £795k/yr from 27/28 onwards), and

6.2.4. Deliver on the previous commitments of the IJB in relation to carers' short breaks including bed based respite, and choice and control via self-directed support for those carers and supported people who wish to use it.

6.3. If Option 3 is approved, implementation will follow the draft timeline presented below. The timeline strikes a balance between the need to progress change in challenging financial context and the need to look after the health and wellbeing of staff by ensuring that all due employment process is adhered to. Regular (fortnightly) meetings between HSCP Senior Management, Human Resources, Organisational Development colleagues, and Ludgate House staff have been reestablished since early April 2026. Ludgate House staff continue to be briefed regularly and the timeline noted below was shared with staff at a meeting on 21 Apr 2026 on the basis that 'no decisions have been made' but that the likely recommendation to the IJB would be Option 3.

6.4. Ludgate House staff have also been advised that any vacancies that arise within either the Clackmannanshire MECS or Reablement services will be held back and ring fenced as redeployment options for Ludgate beds staff should the IJB approve Option 3 at the 24 June 2026 IJB meeting.

Task / Action	**Timeline**
Preparation for IJB Meeting on 24 Jun 2026	
Ludgate Staff Engagement Session	Tues 21 Apr 2026
Fortnightly Working Group Meetings – Chaired by Lyndsey Dunn	Tues 28 Apr 2026
Fortnightly HR & OD Wellbeing Check-in meetings with Ludgate Staff	w/c 4 May 2026
IJB report to be submitted (to enable access to FAP, PAG, SPG, & IJB)	Weds 27 May 2026
Clackmannanshire Council & Stirling Council Elected Member Briefings	Early June 2026
IJB meeting – present report and request approval	Weds 24 June 2026
Following 24 Jun 2026 IJB Meeting – Assuming Report & Recommendations Approved by IJB	
Meet Ludgate Beds staff to update on IJB decision and explain process from here on	w/c 29 Jun 2026
Apply the Clackmannanshire Council Organisational Change Protocol for Ludgate House Beds staff	w/c 29 Jun 2026
Commence communications with people and carers supported at Ludgate House to advise of IJB decision and options for future respite	w/c 29 Jun 2026
The Clackmannanshire Council formal 6-month Redeployment Process can only commence once an employee is in possession of all financial information re package/pension etc. Some staff can commence	w/c 29 Jun 2026 or up to w/c 21 Sept 2026 for Redeployment Process to commence for some

redeployment straight away; others will be required to wait until figures are ready. Total likely period for confirmed figures is up to 12 weeks.	
During the pre-Redeployment stage HSCP OD will offer weekly drop ins for wellbeing support and consideration of options.	w/c 6 Jul 2026
Ludgate House Beds Staff and HR one to one meetings - First Formal meeting & start of up to 6-month Redeployment Process. HR respond to each member of staff by arranging and providing appropriate information about training, redeployment, matching, and pensions/packages.	w/c 29 Jun 2026 to w/c 21 Sept 2026
Ludgate House Beds Staff - Fortnightly one to one Redeployment meetings with manager for each staff member.	Recurring fortnightly after meeting above
Formal 4-month Redeployment Meeting	From w/c 2 Nov 2026
End of 6-month Redeployment Process – dependent on when process commenced	From w/c 5 Jan 2027 up to w/c 29 Mar 2027
Management of Ludgate Bed Demand	
New Short Stay Assessment (SSA) bed demand at Ludgate to be reviewed for 'Home First' potential and, only if a bed is required, redirect to Bellfield Centre or Clackmannanshire Community Health Centre (CCHC) bed.	w/c 29 Jun 2026
Phase out use of Ludgate SSA Beds (leaving 4-week contingency before the end of Sept 2026)	By end of Aug 2026
New Bed Based Respite demand/bookings at Ludgate to be reviewed and alternatives offered.	w/c 29 Jun 2026
No bookings taken for respite at Ludgate to be scheduled for delivery after start of Sept 2026. *Already Actioned.	from 30 Mar 2026
Phase out use of Ludgate Respite Beds (leaving 4-week contingency before the end of Sept 2026)	By end of Aug 2026
Alternative Respite Beds	
Commence and complete commissioning of Respite Beds from Independent sector.	Jun 2026 to Sept 2026

6.5. **Recommendations** - The Integration Joint Board is asked to:

6.5.1. Note the work undertaken by the Future Model of Planned Bed Based Respite (FMPBBR) Working Group to develop options and consult thoroughly upon them.

6.5.2. Approve Option 3 as the Preferred Option.

6.5.3. Approve the decommissioning of the current approach to bed based respite throughout Clackmannanshire & Stirling including decommissioning the 4 residential respite beds and the 6 Short Stay Assessment beds at Ludgate House.

6.5.4. Approve the commissioning of a total of 6 nursing care level respite beds from the local independent care home sector for year-round use (3 in Stirling and 3 in Clackmannanshire).

6.5.5. Approve the planned increase to the Carers Short Breaks Budget in Clackmannanshire by approximately £135k/year in 2026/27 (from £65k/year currently to £200k/year) funded by a share of the expected savings from commissioning changes in Clackmannanshire.

6.5.6. Note that the overall impact of all of the recommendations above is that all bed based care provided from Ludgate House will be decommissioned during 2026/27.

6.5.7. Note that the recommendation to decommission means that a total of 19 Ludgate House beds staff (14.5 FTE), who may be at risk of redundancy, will require to be supported through the Clackmannanshire Council Organisational Change Protocol and redeployment process.

6.5.8. Note that the financial effect of the recommendations above is expected to be cost neutral in Stirling, while in Clackmannanshire it is expected to lead to a significantly enhanced Carers Short Breaks Budget (£200k/yr) and substantial recurring annual HSCP savings (circa £795k/yr from 2027/28 onwards).

6.6. In summary, IJB approval will enable a more flexible, carer-centred short breaks model across Clackmannanshire and Stirling. It will increase choice and control, maintain access to bed-based respite for those with assessed need, and align delivery with the HSCP Carers Short Breaks Services Statement.

7. Conclusions

7.1. The FMPBBR Working Group has completed a thorough stakeholder consultation on the future model of planned bed-based respite throughout Clackmannanshire and Stirling. This, alongside senior management review, has informed the recommendations in this report.

7.2. IJB approval is sought to enable commissioning to commence for 6 nursing care level respite beds from the independent care home sector throughout Clackmannanshire & Stirling, and to support the planned decommissioning of all ten Ludgate House beds.

8. Appendices

Appendix 1: Short Breaks Services Statement
Appendix 2.1: FMPBBR Consultation Comms One Pager
Appendix 2.2: FMPBBR Engagement Slides
Appendix 2.3: FMPBBR Consultation Questions
Appendix 2.4: FMPBBR Summary of Participation
Appendix 3: FMPBBR Working Group Future Options Grid
Appendix 4.1: Part 1 – Summary of Responses – FMPBBR Events
Appendix 4.2: Part 2 – Summary of Responses – FMPBBR Online Survey
Appendix 4.3: Community Petition Submission Meeting Note
Appendix 5: EQIA
Appendix 6: EQIA Standard
Appendix 7: Direction

Fit with Strategic Priorities:

Prevention and Early Intervention	☒
Independent Living through Choice and Control	☒
Achieve Care Closer to Home	☒
Supporting People and Empowering Communities	☒
Reducing Loneliness and Isolation	☐
Enabling Activities	
Medium Term Financial Plan	☒
Workforce Plan	☐
Commissioning Consortium	☐
Transforming Care	☐
Data and Performance	☐
Communication and Engagement	☐
Implications	
Finance:	Annual recurring savings estimated at £797,325. Savings in 2026/27 are dependent on more detailed costing work – it is anticipated there will be approximately 6 months of savings however there are costs associated with change which will reduce this amount.
Other Resources:	This report does not affect other resources
Legal:	This will aid compliance with relevant requirements within the Carers Act.
Risk & mitigation:	There is a risk that without significant further service change the requirements of the Carers Act cannot be met within resources available. Furthermore, there is significant evidence current service models do not secure Best Value for public money. Risk and mitigation will be monitored and overseen by the FMPBBR Working Group.
Equality and Human Rights:	The content of this report **does** require a EQIA
Data Protection:	The content of this report **does not** require a DPIA
Fairer Duty Scotland	Fairer Scotland Duty places a legal responsibility on public bodies in Scotland to actively consider ('pay due regard' to) how they can reduce inequalities of outcome caused by socio-economic disadvantage, when making strategic decisions. The Guidance for public bodies can be found at: Fairer Scotland Duty: guidance for public bodies - gov.scot (www.gov.scot) **Please select the appropriate statement below:** This paper **does not** require a Fairer Duty assessment.

Clackmannanshire & Stirling
Health & Social Care Partnership

Carers Short Breaks Services Statement

Updated March 2025

Why do we have a Short Breaks Services Statement?

The Carers (Scotland) Act 2016 requires local authorities to prepare and publish a short breaks services statement that sets out short breaks available for carers and their loved ones that they care for.

The caring journey is unique to each carer due to their individual circumstances, some may care for short periods of time, some may care more intensively, and many may have fluctuating demands. Carers generally begin their caring role due to the relationship with the person they care for, the relationship dynamics with their family member or friends may contribute to the type of break they would prefer to take from their caring role. Carers will not necessarily live with the person they care for and may be caring for more than one person at any one time.

With this in mind, the Short Breaks Services Statement is designed to provide information to carers to enable choice and control to be exercised when making a decision on the short break that is right for them. Clackmannanshire and Stirling Health and Social Care Partnership want carers to know:

- What short breaks are
- Who can access them
- The types of short breaks available
- How carers can access short breaks and find further information

What is a short break?

Shared Care Scotland describes a Short Breaks as:

"Any form of service or assistance which enables carers to have sufficient and regular periods away from their caring routines or responsibilities. It is designed to support the caring relationship and promote the health and wellbeing of the carer, the supported person, and other family members affected by the caring situation."

A short break provides the opportunity for carers to take a break from their caring role either;

- with those they care for,
- care/support for the cared for person away from home overnight
- care/support for the cared for person in their own home by a care provider

Short breaks can have a positive impact on both the carer and those they care for, therefore Clackmannanshire and Stirling Health and Social Care Partnership want carers to know that:

- Short breaks are available
- They can take place in a range of ways, for short or extended periods
- Carers have a choice of breaks that can meet their needs
- Short breaks can be a positive experience benefiting both the carer and those they care for
- Carers can be supported to identify the right break for them

Who can access short breaks from caring?

Unpaid carers are people who care and support their loved ones who are often family members or friends who may be affected by disability, poor physical or mental health, frailty, or substance use.

Clackmannanshire and Stirling Health and Social Care Partnership's Carer Support Framework outlines the levels of access to support for carers, referred to as eligibility, this was co-produced with carers and carer support organisations, and can be found here.

However proposals currently progressing through parliament will see a change in how short breaks are provided, with due consideration to regular sufficient breaks from caring forming part of an Adult Carer Support Plan/Young Carers Statement. This will therefore apply a right to a break from caring for unpaid carers where eligibility criteria will not apply, this Short Breaks Service Statement will be reviewed to reflect such developments when further detail is known.

How to access a short break from caring

Carers can contact the local Carers Centre or local Short Breaks Service for information to support them caring for their loved one. The Carers Centre and local Social Work teams will provide the opportunity for carers to complete an Adult Carer Support Plan or Young Carers Statement to help carers explore options to meet their needs so they have a life alongside their caring role.

Clackmannanshire Area	Stirling Area
Clackmannanshire Social Services Tel: 01259 452498 / 450000 Email: adultcare@clacks.gov.uk Or use the online Contact Us form	**Stirling Social Services** Telephone: 01786 404040 website: Social care and health | Stirling Council
Falkirk & Clackmannanshire Carers Centre Telephone: 01324 611510 email: centre@centralcarers.co.uk Website https://centralcarers.org	**Stirling Carers Centre** Telephone: 01786 447003 email: info@stirlingcarers.co.uk Website https://www.stirlingcarers.co.uk/
Short Breaks Service Telephone: 01786 237886 email: sbs@stirling.gov.uk Website https://clacksandstirlinghscp.org/find-a-service/carers/	

What does a good break look like?

A short break from caring is personal to each individual carer, this is highlighted below in the comments from carers caring for a loved one in Clackmannanshire and Stirling:

"Quality time away from the person I look after, and having time to relax and do something I enjoy"

"Something to help improve my health and wellbeing, like overnight respite or day care for the person I look after"

"A few hours, twice a week to give me time with my family and time for myself"

"Head space, breaks are essential for me and my husband to keep the calmness and our joy of life, as well as our love for each other"

Clackmannanshire and Stirling Health and Social Care Partnership will ensure carers are supported to identify the need for a short break, as well as ensuring the short break meets their outcomes in relation to their caring role. The outcomes of a short break will be personal to each carer and those they care for, but may include:

- Carers having more opportunities to enjoy a life outside of/ alongside their caring role
- Carers feeling better supported
- Improved confidence as a carer
- Reduced social isolation and loneliness
- Increased ability to support the caring relationship
- Improved health and wellbeing
- Improved quality of life

Types of Short Breaks

Universal (Community) Services

These are services which, among other things, are available to assist carers within the local community. These types of services may allow a carer to get out the house and enjoy an activity away from their caring role. The Carer Support Pack lists many of these local opportunities here

Carer Support Groups

Local carer support groups provide an opportunity for carers to meet up, share information and have a short break from caring. There is a range of regular support groups and one-off

activities for carers in the Clackmannanshire and Stirling area, in both urban and rural locations. Many are facilitated by our local Carers Centres, and can be found at the links below:
Clackmannanshire Support Groups
Stirling Support Groups

Online Carer Support Groups

Online cuppas for carers to talk about the things that are important to them, a small group of carers joining a video call for peer support. To join, carers need a device with access to the internet, a microphone and speakers. A camera is useful but not essential. Most smartphones will work fine. Please see link below:
Fancy a Cuppa with other unpaid carers?

Time to Live (TTL) Grants

'Time to Live' is part of the Creative Breaks funding facilitated by Shared Care Scotland on behalf of the Scottish Government. The project enables local Carers Centre to provide carers with grants up to £400 for a 12 month period to fund a short break that meets their needs.
Time to Live | Shared Care Scotland

Respitality

Respitality (Respite + Hospitality) is a unique way for Carers Centre's to work with the hospitality sector to provide short breaks for carers. See here for more information or contact your local Carers Centre.

Replacement Care to enable the carer a break

When a carer is taking a short break, there is often need for 'replacement care' to be provided for the cared-for person. This 'replacement care to enable the carer a break' can take many different forms, and may include family or friends providing assistance to enable the carer to have some time off. This could be anything from a few hours of support to 24 hour care home support, at agreed times throughout the year.

To view current residential replacement care providers locally or out with area please refer to the Care Inspectorate website here and search within the chosen location.

Short breaks are supportive in sustaining the caring relationship and are therefore mutually beneficial to the cared-for person as well. Increasingly, carers are finding creative ways to take a break that don't necessarily involve external services. For example, they might use leisure equipment, computers, gardens, or something else that provides a break from routine.

More information on what the types of short break someone can access can be found at the following link, https://www.sharedcarescotland.org.uk/directory.

Will I have to pay for my short break?

Charges will not apply to carers when short breaks are arranged to give them a break from caring. In some circumstances, charges may apply to support for the cared-for person when

funding is provided for the carer and cared-for person to take a break together. This will be explained and agreed before the break takes place.

Feedback, monitoring & review

Clackmannanshire & Stirling Health and Social Care Partnership (Social Work Adult Services) and Children's Services associated with both Clackmannanshire and Stirling Council are responsible for the Short Breaks Service Statement. If you have any queries regarding this statement, please contact:

CSHSCP Short Breaks Service
Tel: 01786 237886
Email: sbs@stirling.gov.uk

National short break websites

Shared Care Scotland www.sharedcarescotland.org.uk This website also provides information on 'Time to Live (TTL) here, Creative Breaks here, or Better Breaks here, funds provided by the Scottish Government's voluntary sector Short Breaks Fund for easy access breaks, available to carers in each Local Authority area in Scotland. Details of funded projects for short breaks can be found here.	**Take a Break** https://takeabreakscotland.org.uk/ Funded by the Scottish Governments voluntary sector Short Breaks Fund for easy access breaks, Take a Break provides short breaks funding for carers of disabled children, young people and their families. Take a Break grants can be used for a break away, towards leisure activities or outings; sports equipment and more.
Euan's Guide www.euansguide.com Euan's Guide is the disabled access review website that includes many reviews sharing disabled access information. Breaking down barriers of exclusion, this site gives everyone the freedom to explore and try new places.	**Alzheimer Scotland** www.alzscot.org Alzheimer Scotland are a Scottish charity focusing on supporting and informing those who suffer from dementia and dementia-related illnesses, as well as family and friends looking for support.
ALISS www.aliss.org ALISS (A Local Information System for Scotland) provides information on health and wellbeing resources, services, groups, and support within local areas, enabling people and professionals to find and share the right information, at the right time. Helping people to live well and stay connected to their community.	**Scotland's Service Directory** www.nhsinform.scot Scotland's Service Directory provides details of health and wellbeing services in Scotland. This includes GP practices, dental services and support groups.

Appendix 2.1

Clackmannanshire & Stirling Health & Social Care Partnership

Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling

Engagement – Weds 1 Oct '25 to Weds 12 Nov '25

The Clackmannanshire & Stirling Health & Social Care Partnership (HSCP) have established an officer working group to explore and make recommendations to the Senior Leadership Team and the Integration Joint Board (IJB) on the Future Model of Planned Bed Based Respite throughout the HSCP area.

In March 2025 the IJB approved the Clackmannanshire & Stirling Carers Short Breaks Services Statement. This document recognises carers' entitlement to an assessment of their needs. In some cases carer needs will include overnight respite care for the cared for person to give the carer a break. The Clackmannanshire & Stirling HSCP recognise that there is an inconsistent respite landscape across the HSCP area which is not always as carer focused as it should be.

The Short Breaks Services Statement can be accessed on the HSCP website at the following link HSCP Short Breaks Statement.

The Future Model of Planned Bed based Respite Working Group (the working group) seeks to understand the current provision of bed based respite and to consider what future options might be. Following initial enquiries and data analysis the working group have produced a set of draft future options.

The working group are now keen to conduct a period of engagement in the form of consultation on the draft future options over the six week period from Weds 1 Oct '25 to Weds 12 Nov '25.

A series of in person and online meetings have been arranged and throughout the consultation period all of the information is also available on the HSCP Citizen Space webpage. Also, within Citizen Space any interested party can record their answers to the consultation questions and everyone is encouraged to do so.

Planned Meetings, Dates, Times, Locations – and target audience

Weds 1 Oct 25 – 2pm-4pm Ludgate Centre – Ludgate Staff Meeting **(staff only)**

Thurs 2 Oct 25 – 10am-noon Ludgate Centre – Ludgate Staff Meeting **(staff only)**

Tues 7 Oct 25 – 1:30pm-3pm Alloa Town Hall, Alloa, FK10 1AB – Ludgate Service Users & Carers Meeting **(by invitation to current service users and carers only)**

Weds 8 Oct 25 – 1.30pm-3pm Carseview House, Stirling, FK9 4SW – **In Person** Carers Meeting **(Open to all)**

Thurs 9 Oct 25 – 1.30pm-3pm Alloa Town Hall, Alloa, FK10 1AB – **In Person** Carers Meeting **(Open to all)**

Tues 21 Oct 25 – 7pm-8:30pm **Online** – Carers Meeting **(Open to all)** **Link to join the meeting**. Meeting ID: 316 381 298 019 2 Passcode: BQ6X49iE

Mon 27 Oct 25 – 7pm-8:30pm **Online** – Carers Meeting **(Open to all)** **Link to join the meeting**. Meeting ID: 383 664 213 568 Passcode: e9Zm2v45

Thurs 30 Oct 25 – 3-4pm – **Online** Wider HSCP **Staff Online Meeting –** diary invite will be circulated directly to staff

W/c 27 Oct and w/c 3 Nov 25 – Any further meetings identified as necessary during process.

Following the consultation process the results of the analysis of the responses received will be incorporated into a recommendations report that will go to the HSCP Senior Leadership Team for their consideration and recommendation on to the Integration Joint Board for decision.

The Clackmannanshire & Stirling HSCP encourage all interested parties to take part in the Future Model of Bed Based Respite consultation by attending either an in person or online meeting and submitting your thoughts and views via the online questionnaire available on Citizen Space.

Citizen Space URL: https://cshscp.citizenspace.com/planning/bed-based-respite-consultation/

Appendix 2.2

Clackmannanshire & Stirling
Health & Social Care Partnership

Future Model of Planned Bed Based Respite in Clackmannanshire & Stirling

Weds 1 October ’25 to Weds 12 November ‘25

All Stakeholder Engagement Events

Web: clacksandstirlinghscp.org

Stakeholder Event Meetings:

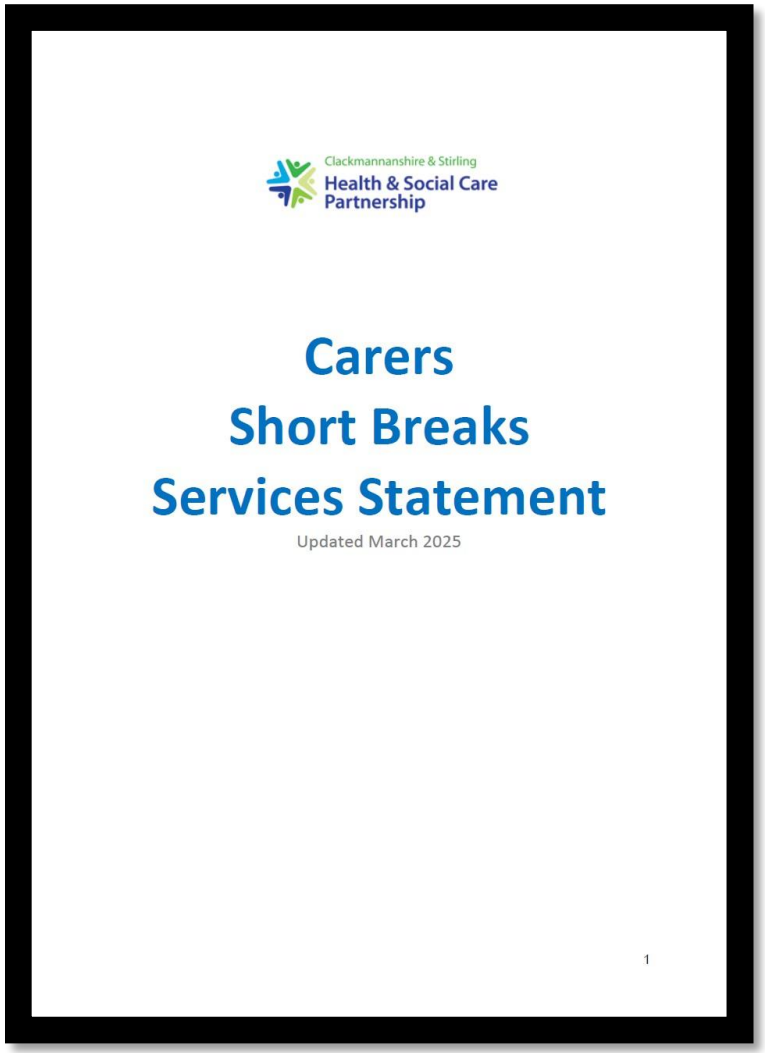
Agenda:

- **Welcome & Introductions** – J Stein/R Sinclair/J Baird
- **Context to Engagement** – J Stein/R Sinclair/J Baird
- **Carers & Respite/Short Breaks** – J Stein/R Sinclair/J Baird
- **Key Points of this Engagement** – J Stein/R Sinclair/J Baird
- **Ludgate House Respite Options** – D Niven
- **Engagement Timescales** – D Niven
- **Overall Timescales** – D Niven
- **Feedback & Consultation Questions** – All

Context to Engagement.

- The Future Model of Planned Bed Based Respite Working Group was established during the summer of 2025 at the request of the HSCP Senior Leadership Team (SLT). It is chaired by Judy Stein, Interim Head of Community Health & Care.
- The working group have been tasked with looking into Planned Bed Based Respite Provision across Clackmannanshire & Stirling and identifying options for improving the service.
- Decisions have not yet been made about the future of the service
- Any decisions will be made via the SLT and Integration Joint Board (IJB)
- A 6 week consultation process is now underway – requesting feedback on the options identified
- A report with recommendations will be taken to the 26 Nov 25 IJB meeting

Carers & Respite/Short Breaks.



- Short Breaks Services Statement approved by IJB in March ‘25
- Respite/short breaks provision is based on social work assessed need
- Short Breaks Budget can be used to fund both traditional bed based respite and alternatives e.g.
  - Overnight Care at Home
  - Shared Lives (infrastructure is in development)
  - Holidays/trips/breaks where both the Carer and the Cared for Person can enjoy a break together
  - Overnight short breaks for the carer where the cared for person stays within a care home near to where the carer is, so that regular contact can be maintained

Key Points of this Engagement:

- **The focus is on the Future Model of Planned Bed Based Respite**
- **Respite/Short Breaks for carers is supported through Carers Act**
- **Carers with assessed need are entitled to choice and control through Self-directed Support Act**
- **Current Bed Based Respite provision is very different in Clackmannanshire and Stirling and a more consistent carer centred approach is required**
- **This engagement process is not about Emergency Care, Short Term Assessment, or Intermediate care beds.**

Planned Bed Based Respite Options:

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
Description of Option:	• Continue current 4 bed residential care level bed based respite service at Ludgate House Centre while undertaking required periodic upgrades and rolling maintenance. • There is only a £65k Clackmannanshire respite/short breaks budget while in Stirling there is £603k (25/26 figures). • Continue with single block booked nursing care level respite bed at Annfield House in Stirling. • Continue to use the Stirling respite budget to: 1) Fund flexible short breaks of all varieties that provide those carers with assessed needs, the choice and control to meet their respite outcomes, and 2) Purchase short notice (only 2 weeks in advance) nursing care level bed based respite within local care homes that have the capacity and chose to accept the commission on a case by case basis.	• As with Option 1 but the 4 bed residential care level bed based respite service at Ludgate House Centre would be actively open to be booked by Stirling residents for respite as well as Clackmannanshire residents. • When Stirling residents book respite at Ludgate the Stirling respite/short breaks budget would pay into the Clackmannanshire respite/short breaks budget. • The Clackmannanshire respite budget would in turn be used to offer a greater diversity of short breaks to carers with assessed needs in Clackmannanshire. • The existing Annfield House nursing care level bed based respite would also be open to Clackmannanshire carers that have appropriate assessed needs. Reciprocal payments, similar to those noted for Stirling residents' use of Ludgate above, would be payable into the Stirling respite budget.	• Decommission the 4 bed residential care level bed based respite service at Ludgate House Centre and use the funding released to: • 1) Commission nursing care level bed based respite from the local care home market. • 2)Establish the necessary Clackmannanshire respite/short breaks budget to offer a greater diversity of short breaks to carers in Clackmannanshire. • 3)Contribute to the required 2025/26 HSCP savings targets.	• As per Option 3 plus: • 1) the decommissioning of the residential care provided at Ludgate House Centre, and • 2) work with the HSCP Senior Leadership Team to continue to develop the Intermediate Care model that focusses on optimising independence, personal outcomes for carers & cared for people, and equality of access based upon assessed need and demand. Delivered from CCHC. • This Option will be developed further in collaboration with the staff, supported people, carers and HSCP SLT during October '25. Both the engagement responses and the developing Option 3+ proposals will inform the report and recommendations to the IJB in Nov '25.

Engagement Timescales:

Bed Based Respite Options Consultation Timeline: 1st October – 12 November

Meetings	Week 1 1st – 3rd Oct	Week 2 6th – 10th Oct	Week 3 13th-17th	Week 4 20th-24th Oct	Week 5 27th– 31st Oct	Week 6 3rd – 7th Nov	Analysis 10th – 14th Nov
Workforce Meeting 1	Wed 1st 2-4pm Ludgate Resource Centre – JS						Analysis and reporting from responses
Workforce Meeting 2	Thurs 2nd 10am-12pm Ludgate Resource Centre – JS						
In person Ludgate service users meeting		Tues 7th 1.30-3pm Alloa Town Hall - RS					
In Person Carers Meeting (Stirling)		Wed 8th 1.30-3pm Carseview House - RS					
In Person Carers Meeting (Clacks)		Thurs 9th 1.30-3pm Alloa Tow Hall-WF					
Online Carers Meeting 1				Tuesday 21st 7pm - JS			
Online Carers Meeting 2					Monday 27th 7pm – JS		
Online Consultation	Consultation questions open on Citizen Space 1 Oct – 12 Nov						

Overall Timescales:

Draft Outline Project Milestones	Timeline
Working Group complete the specification of Options for the Future Model of Bed Based Respite.	Mon 29 Sept '25
HSCP Senior Leadership Team review options and consider request to commence stakeholder engagement in form of consultation.	Weds 1 Oct '25
6-week stakeholder consultation process.	Weds 1 Oct '25 to Weds 12 Nov '25
Complete consultation response analysis.	Mon 17 Nov '25
Submit IJB report for deadline.	Weds 19 Nov '25
IJB meeting – present report and request approval of recommendations and directions.	Weds 26 Nov '25
Commence implementation phase	Mon 1 Dec '25
Implementation phase duration dependant on option approved	tbc

Stakeholder Feedback:

- Open Discussion
- Consultation Questions on Citizen Space – link to follow
  - What matters to you about Planned Bed Based Respite in Clackmannanshire & Stirling?
  - What do you think about the proposed options for the Future Model of Planned Bed Based Respite in Clackmannanshire & Stirling?
  - Is there anything else that you would like to say about Planned Bed Based Respite?
- Next Steps

And Finally…

Thank-you for you time and input today.

Appendix 2.3

Clackmannanshire & Stirling Health & Social Care Partnership

Future Model of Planned Bed Based Respite - Working Group

Tuesday 30 September 2025, 12:30 to 13:30pm

Via MS Teams

Draft Questions for use during 'Engagement in the form of consultation' and within associated Citizens Space.

Question 1 – What matters to you about Planned Bed Based Respite in Clackmannanshire & Stirling?

Question 2 – What do you think about the proposed options for the Future Model of Planned Bed Based Respite in Clackmannanshire & Stirling?

Question 3 – Is there anything else that you would like to say about Planned Bed Based Respite?

End.

Summary of consultation participation on the Future Model of Planned Bed Based Respite in C&S HSCP – Consultation period 1st October – 12th November 2025

V0.3 16Nov25

Meetings held and attendance:

1st October Ludgate workforce meeting held at Ludgate Resource Centre – **8 staff**, 3 service TL/Managers, 1 HR Rep, 1 Unison rep, 1 GMB rep & 4 Consultation Staff (JS, RS, AH, DN).

2nd October Ludgate workforce meeting held at Ludgate Resource Centre – **4 staff**, 2 service TL/Managers, 1 HR Rep, 2 Unison reps, 1 GMB rep & 4 Consultation Staff (JS, RS, AH, DN).

7th October Ludgate service users meeting held at Alloa Town Hall – **7 service users**, 2 service TL/Managers, 1 Carers Lead, & 4 Consultation Staff (RS, JB, AH, DN).

8th October Stirling Carers in person meeting held at Carseview House – **no attendees**, 1 service TL/Managers, 1 Carers Lead, & 4 Consultation Staff (RS, JB, AH, DN).

9th October Alloa Carers in person meeting held at Alloa Town Hall – **6 attendees** (including 2 carers centre representatives), 2 service TL/Managers, 1 Carers Lead, & 3 Consultation Staff (JB, AH, DN).

21st October 7-8.30pm Online carers meeting – **2 attendees** & 4 Consultation Staff (JS, RS, AH, DN).

27th October 7-8.30pm Online carers meeting – **2 attendees** & 3 Consultation Staff (RS, AH, DN).

30th October wider online HSCP staff meeting – **19 attendees**, & 4 Consultation Staff (RS, JB, AH, DN).

Total of 48 consultees attended across 8 events.

Citizen Space – Online Survey Responses:

- **16 full responses completed (20 received)** - from 16 sources - 2 of which were groups of Ludgate staff.
- Survey was open until midnight on 12th November – link to Citizen Space is: Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling - Clackmannanshire & Stirling HSCP - Citizen Space

Clackmannanshire & Stirling Health & Social Care Partnership

Future Model of Planned Bed Based Respite - Working Group

Options for the Future Model of Planned Bed Based Respite Throughout Clackmannanshire & Stirling

V0.7 - 1 Oct 25

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
Description of Option:	• Continue current 4 bed residential care level bed based respite service at Ludgate House Centre while undertaking required periodic upgrades and rolling maintenance. • There is only a £65k Clackmannanshire respite/short breaks budget while in Stirling there is £603k (25/26 figures).	• As with Option 1 but the 4 bed residential care level bed based respite service at Ludgate House Centre would be actively open to be booked by Stirling residents for respite as well as Clackmannanshire residents. • When Stirling residents book respite at Ludgate the Stirling respite/short breaks	• Decommission the 4 bed residential care level bed based respite service at Ludgate House Centre and use the funding released to: 1) Commission nursing care level bed based respite from the local care home market. 2) Establish the necessary Clackmannanshire respite/short	• As per Option 3 plus: • 1) the decommissioning of the residential care provided at Ludgate House Centre, and • 2) work with the HSCP Senior Leadership Team to continue to develop the Intermediate Care model that

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
	• Continue with single block booked nursing care level respite bed at Annfield House in Stirling. • Continue to use the Stirling respite budget to: 1) Fund flexible short breaks of all varieties that provide those carers with assessed needs, the choice and control to meet their respite outcomes, and 2) Purchase short notice (only 2 weeks in advance) nursing care level bed based respite within local care homes that have the capacity and chose to accept the commission on a case by case basis.	budget would pay into the Clackmannanshire respite/short breaks budget. • The Clackmannanshire respite budget would in turn be used to offer a greater diversity of short breaks to carers with assessed needs in Clackmannanshire. • The existing Annfield House nursing care level bed based respite would also be open to Clackmannanshire carers that have appropriate assessed needs. Reciprocal payments, similar to those noted for Stirling residents' use of Ludgate above, would be payable into the Stirling respite budget.	breaks budget to offer a greater diversity of short breaks to carers in Clackmannanshire. 3) Contribute to the required 2025/26 HSCP savings targets.	focusses on optimising independence, personal outcomes for carers & cared for people, and equality of access based upon assessed need and demand. Delivered from CCHC. • This Option will be developed further in collaboration with the staff, supported people, carers and HSCP SLT during October '25. Both the engagement responses and the developing Option 3+ proposals will inform the report and

Name of Option:	**Option 1** **No Change / Business as Usual**	**Option 2** **A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling**	**Option 3** **Update the Model of Bed Based Respite Across Clackmannanshire & Stirling**	**Option 3+** **Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.**
				recommendations to the IJB in Nov '25.
Remaining Beds at Ludgate House Centre	Continue with the 6 x Short Term Assessment (STA) beds at Ludgate House Centre pending HSCP management decision on the Rationalisation of Beds Across the Clackmannanshire and Stirling System.			
Likely Service Outcome	Maintenance of current quality and distribution of bed based respite. This means that many carers in Stirling will be unable to book respite more than two weeks in advance, while there will remain a healthy respite/short breaks budget with which to fund a diversity of alternative short breaks and greater levels of choice and control for carers and supported people throughout Stirling. In Clackmannanshire, bed based respite will be limited to the four Ludgate residential care level respite	Maintenance of current quality and distribution of bed based respite but in this option carers can access bed based respite wherever they chose across Clackmannanshire & Stirling within the existing provision and commissioning arrangements (4 beds at Ludgate, the Annfield bed and whatever short notice bookings can be secured from the local care home market). The Clackmannanshire respite/short breaks budget is likely to be enhanced as a result of	Bed based respite will undergo new commissioning arrangements. This is likely to lead to 3 nursing care level bed based respite beds being contracted from the local care home market in Clackmannanshire along with 3 in Stirling. This capacity is based on analysis of current demand. There would be open access to all nursing care level bed based respite for carers with assed needs resident in Clackmannanshire & Stirling. This would	As per Option 3 plus the intermediate care model delivered from a much better environment at CCHC which optimises independence and the use of personal and community assets, is outcomes focused, and enables choice and control for carers and cared for people.

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
	beds with a very small budget available to provide a diversity of alternative short breaks and greater levels of choice and control for carers and supported people.	payments received for Stirling residents use of Ludgate residential care level bed based respite. The Stirling respite/short breaks budget is likely to reduce as a result of payments made for residential care level bed based respite at Ludgate.	enable the current usage of bed based respite at Ludgate to be covered and increase the ability to book bed based respite more than two weeks in advance in Stirling from 1 bed to 3. In addition, there would also be an enhanced respite/short breaks budget in Clackmannanshire. The existing budget in Stirling would remain available (less the cost of the additional nursing level care beds commissioned in Stirling), to fund a diversity of alternative short breaks and greater levels of choice and control for carers and supported people.	

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
Short Breaks Budget	Sufficient short breaks budget is in place in both Clackmannanshire & Stirling. Budget can be used to fund alternatives to traditional bed based respite when enabling carers with an assessed need to have a break. Some examples of the types of alternatives to bed based respite are: • Overnight Care at Home (for the cared for person) enabling the carer to be away • Shared Lives (requires commissioning and infrastructure which is being established) where the cared for person builds a relationship with approved carers who are happy to have them to stay within their home, and share their lives, while the carer has a break • Holidays/trips/breaks where both the Carer and the Cared for Person can enjoy a break together • Overnight short breaks for the carer whereby the cared for person stays within a care home near to where the carer is so that regular contact can be maintained			
Cost Factors.	Clackmannanshire - current Ludgate residential care level bed based respite costs are much higher than the national care home contract (NCHC) rate. Ludgate costs currently run at approximately 2 times NCHC rates. Stirling – Nursing care level bed based respite is commissioned at the NCHC rate.	Clackmannanshire - current Ludgate residential care level bed based respite costs are much higher than the national care home contract (NCHC) rate. Ludgate costs currently run at approximately 2 times NCHC rates. Stirling – Nursing care level bed based respite is commissioned at the NCHC rate.	Clackmannanshire - significant reduction in costs due to nursing care level bed based respite commissioned under this option expected to be at national care home contract (NCHC) rate. The NCHC is currently approximately half that of the Ludgate costs. Within the cost reduction noted above there is likely to be a significant	Option 3 plus further work is required to specify the risk implications of the additional elements of this option which will be updated as the development work progresses.

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
	This option would not incur any additional running costs though there may be ongoing upgrade and maintenance costs for the Ludgate building and equipment within.	This option would not incur any additional running costs though there may be ongoing upgrade and maintenance costs for the Ludgate building and equipment within. **Please note that likely charges for Ludgate residential care level bed based respite are approximately double those currently paid by Stirling for nursing care level bed based respite. This option would reduce the overall quantity of care that could be provided by the Stirling respite/short breaks budget while increasing the Clackmannanshire respite/short breaks budget.	reduction in workforce costs due to leavers, moving to new posts under different budgets, redeployment. Work is ongoing with constituent bodies to establish how any Voluntary Severance (VS) and/or any Targeted Voluntary Redundancy (TVR) would be treated as costs – where would they sit? There is also likely to be cost savings/avoidance for capital/maintenance costs at Ludgate House Centre. This option is likely to be cost neutral in Stirling because nursing care level bed based respite is	

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
			already purchased at the NCHC rate.	
Practical Cost Estimates for Respite Component (4 beds) at Ludgate House Centre & Stirling Respite/Short Breaks Budget. **Based on Whole Year Effects**	Ludgate House actual HSCP costs for 25/26 forecast (excluding senior management and non HSCP costs) = £2,129/respite bed/week. **Annual cost to HSCP 25/26 forecast 4 x Ludgate Respite Beds = £442,857** **Annual cost to HSCP 25/26 forecast Clacks Short Breaks Budget = £65,000** Stirling Nursing Care Level Bed Based Respite costs for 25/26 actual (at NCHC Rate) = £1013.05/respite bed/week. **Annual cost to HSCP 25/26 forecast Stirling Short Breaks Budget (including Annfield Bed) = £603,000**	Ludgate House actual HSCP costs for 25/26 forecast (excluding senior management and non HSCP costs) = £2,129/respite bed/week. **Annual cost to HSCP 25/26 forecast 4 x Ludgate Respite Beds = £442,857** **Annual cost to HSCP 25/26 forecast Clacks Short Breaks Budget = £65,000** Stirling Nursing Care Level Bed Based Respite costs for 25/26 actual (at NCHC Rate) = £1013.05/respite bed/week. **Annual cost to HSCP 25/26 forecast Stirling Short Breaks Budget**	**Clackmannanshire** 3 x Commissioned Nursing Care Level Bed Based Respite beds at NCHC rate of £1,013.05/bed/week **Annual NCHC cost to HSCP for 3 Clacks Nursing Care Level Respite Beds = £158,036** **Annual cost to HSCP 25/26 forecast Existing Clacks Short Breaks Budget = £65,000** **Annual cost to HSCP 25/26 forecast Increase (released from decommissioning 4 x Ludgate Respite Beds) to Clacks Short Breaks Budget = £136,821**	Option 3 plus tbc

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
	Total Currently Identified Annual Costs to HSCP = £1,110,857 Further year costs to HSCP £1,110,857 + uplifts	**(including Annfield Bed) = £603,000** **Total Currently Identified Annual Costs to HSCP = £1,110,857** However, higher costs of care at Ludgate will result in a transfer of budget and purchasing power from Stirling to Clackmannanshire. Further year costs to HSCP £1,110,857 + uplifts	**25/26 Savings (also released from decommissioning 4 x Ludgate Respite Beds) as per HSCP Delivery Plan = £148,000** **Stirling** 3 x Commissioned Nursing Care Level Bed Based Respite beds at NCHC rate of £1,013.05/bed/week – this will be met from Stirling respite/short breaks budget **Annual NCHC cost to HSCP for 3 Stirling Nursing Care Level Respite Beds = £158,036** **Remainder Annual cost to HSCP 25/26 forecast**	

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
			Stirling Short Breaks Budget = £444,964 **Total Currently Identified Annual Costs to HSCP = £962,857** The figure above includes a £136,821 increase to the existing Clacks Respite/Short Breaks Budget of £65k so many more carer centred and varied short breaks can be funded in addition to access to 3 commissioned nursing care level respite beds for residents of Clackmannanshire. **Total 25/26 HSCP Delivery Plan Saving of £148,000**	

Name of Option:	**Option 1** **No Change / Business as Usual**	**Option 2** **A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling**	**Option 3** **Update the Model of Bed Based Respite Across Clackmannanshire & Stirling**	**Option 3+** **Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.**
Benefits	Local service retained. No work to implement change required.	A 'once for Clackmannanshire & Stirling approach' and suite of options is available to everyone, and existing assets (human, physical, and financial) are maximised across Clackmannanshire & Stirling.	Cost effective approach. Much more respite and short breaks can be provided, savings target can be realised, and much more carer choice and control can be enabled. Nursing care level needs can be easily met.	Option 3 plus Local service improved with long-term future.
Risks	Lack of Clackmannanshire respite/short breaks budget to enable a variety of short breaks options to be offered and therefore no choice and control for carers and supported people. High cost of bed based respite per night at Ludgate. Lack of nursing level bed based respite care in Clackmannanshire.	Providing bed based respite via Ludgate House Centre is still a high cost/ financially inefficient service and it does not meet nursing care level needs.	Ludgate bed based respite workforce may become subject to Clackmannanshire Council Organisational Change Protocol which may result in unwanted redundancies and additional short term costs.	As per Option 3 plus further risk analysis based on development work during October 25.

Appendix 3

Name of Option:	Option 1 No Change / Business as Usual	Option 2 A Single Approach to Existing Bed Based Respite Assets Across Clackmannanshire & Stirling	Option 3 Update the Model of Bed Based Respite Across Clackmannanshire & Stirling	Option 3+ Option 3 plus decommission care from Ludgate and seek to develop an integrated care model to be delivered from CCHC.
Time to Deliver	Ongoing	3 months from 1 Dec 25	6 months from 1 Dec 25	6 months from 1 Dec 25
Post engagement summary notes on options from Residents/Families/Carers				
Post engagement summary notes on options from TU's & Workforce				
Recommendation – (choose from Possible, Preferred, or Discounted)				

Appendix 4.1

FMPBBR Events - Summary of Responses on the Future Model of Planned Bed Based Respite in C&S HSCP – Consultation period 1st October – 12th November 2025

Total of 48 consultees attended across 8 events.

Summary of key points raised by attendees at events with some of the commonly made HSCP responses noted in blue:

Carers/service users:

- Concern for cared for person's acceptance of changes to bed based respite location and for the quality and consistency (including existing relationships and routines) of respite provided in care homes. When looking at option 3 and option 3 plus for those people currently supported by the Ludgate respite service, there may be some short-term disruption to relationships and routines as a result of moving to planned bed based respite provided in local nursing care homes rather than Ludgate. However, options 3 and 3 plus would also enable a wider group of carers and supported people (beyond those currently using Ludgate) to have more choice and control over the nature of their respite through the availability of a significantly improved short breaks budget in Clackmannanshire. With respect to questions about whether there would be differences in quality of care between Ludgate and commissioned respite beds in local nursing level care homes the following points were made at each meeting:
    - Commissioned respite would be at nursing level care homes (with nurses on staff) while Ludgate is registered as a residential care home (without nurses on staff).
    - Commissioned nursing level care homes are all registered with the Care Inspectorate and inspected regularly with results published and widely available.
    - Carers and supported people will have the choice and control to decide at which of the commissioned nursing care homes they wish to receive their respite, or if they wish they can exercise further levels of choice and control via their right to self-directed support (SDS).
    - HSCP Care Home Review Team are regularly visiting all of the local care homes to undertake annual reviews with supported people which provides another regular route that the HSCP uses to keeping track of quality and consistency throughout the area.
    - The HSCP commissioning team can where necessary act rapidly to respond to any concerns over any care home and arrange alternatives at pace.
- Queries around location of care homes and concerns for what that would mean for arranging transport if respite no longer provided at Ludgate. Options 3 and 3 plus both involve commissioning three beds across Clackmannanshire and three beds across Stirling. It is expected that these beds will be across a number of care homes which will mean that there are more local respite options closer to more people than is currently the case which would in turn mean reductions in travel required.
- Positive about service provided at Ludgate but has been mentioned it wasn't always available when required and some shared experience of challenges with booking respite care and not receiving confirmation of respite slots at Ludgate until late on (and the confirmation coming in inconsistent formats), resulting in challenges with planning and changes to existing plans. The HSCP Commissioning team have been developing a booking system to help manage respite provision. Once a decision has been made about the future model of planned bed based respite then the appropriate finishing touches will be applied to enable a better more flexible and responsive respite booking service to be provided throughout Clackmannanshire & Stirling.

- Several queries around reason for the differences in cost of respite at Ludgate versus care homes. The difference in costs per bed per week at Ludgate versus nursing level care homes is largely due to economies of scale. There are required staffing levels for care home services during the day and at night and meeting these standards with a total of only 10 beds at Ludgate means that Ludgate costs are significantly higher. Many of the fixed costs in independent sector care homes are spread across many more beds and staff and result in significantly lower costs per bed per week. There are also higher costs at Ludgate relating to standard public sector terms and conditions.
- Limited interest in most groups about the more flexible options for carers outside of bed-based respite that could be enabled by options 2-3+ (although at times there seemed to be slight misunderstanding that the intention was to replace bed-based respite with these). At the consultation events HSCP colleagues hosting the events helped attendees to understand that none of the options being considered involved stopping the provision of planned bed based respite. Options 2 to 3 plus would all release some budget in Clackmannanshire which would increase the Clackmannanshire Short Breaks Budget while also continuing to provide bed based respite for those with assessed need that wish to receive it. HSCP colleagues were keen to help those attending appreciate that there are carers and supported people across the HSCP for whom the current approach to respite provision does not currently work well. Providing improved levels of choice and control via short breaks budgets would mean that more people can receive the respite they need while not stopping those who want bed based respite continuing to be able to access that kind of care too.
- Support for the idea of making improvements to the service while also reducing costs to the HSCP (although some had concerns that a decision has already been taken with the main priority of work being to cut costs and not to also increase options to carers). HSCP colleagues confirmed that improving the respite service in its widest sense (including planned bed based respite) across the HSCP was the driver for this consultation process. Colleagues and attendees also acknowledged that throughout the public sector there are financial challenges and that opportunities such as this that offer the opportunity to improve service provision while also improving financial efficiency should be welcomed and supported. Attendees were reassured that no decisions had already been taken and that IJB approval would be sought for the recommendations resulting from this consultation process.

HSCP staff:

- Wanted to know what would happen if there was a crisis in the community under Option 3/3+. Colleagues supporting the consultation events advised that the future model of planned bed based respite was focussed on planned care needs so would not impact on crisis responses. At Ludgate the 4 respite beds do not normally form part of a crisis response either due to places being pre-booked. When it comes to the 6 short stay assessment (SSA) beds at Ludgate there have been some occasions when these have been used to support a crisis response if they had capacity but with relatively low flow through these beds that wasn't always possible. Under options 3 and 3 plus any response to crisis would be supported via the Bellfield Centre if it is a step up from the community crisis situation for the cared for person or via a temporary nursing care home bed if the crisis is due to the carer being unwell or unable to provide their usual support.
- Wanted to understand if/how this relates to the charging policy work. Colleagues supporting the consultation events advised that respite for the carer is not a chargeable service.

- Raised that there could be potential issues with parking at CCHC for staff and for MECS cars under Option 3+. HSCP colleagues will work to minimise any potential parking issues at CCHC resulting from option 3plus should it be approved by the IJB.
- Wanted to understand whether there has been comms with care homes to ensure they're open to providing commissioned respite care and raised that they may have to undergo a variation from care inspectorate (this has come up throughout most of the consultation events). HSCP Commissioning Manager provided comfort that Care Inspectorate requirements for variations to nursing care home registrations were understood and that there were good levels of confidence around the willingness of care homes to supply respite. Formal commissioning processes wouldn't commence until after an IJB decision but there is an appetite amongst care homes.
- Wanted to understand whether it would be easier to book people into respite and to give them more notice of confirmed respite as there are challenges with this at present especially in Stirling. As noted previously above, the HSCP Commissioning team have been developing a booking system to help manage respite provision.
- Raised queries around the potential quality of care provided at care homes and were keen to understand any quality management process by the HSCP. As noted in the first bullet point at the top of this document colleagues supporting the consultation events advised that:
    - Commissioned respite would be at nursing level care homes (with nurses on staff) while Ludgate is registered as a residential care home (without nurses on staff).
    - Commissioned nursing level care homes are all registered with the Care Inspectorate and inspected regularly with results published and widely available.
    - Carers and supported people will have the choice and control to decide at which of the commissioned nursing care homes they wish to receive their respite, or if they wish they can exercise further levels of choice and control via their right to self-directed support (SDS).
    - HSCP Care Home Review Team are regularly visiting all of the local care homes to undertake annual reviews with supported people which provides another regular route that the HSCP uses to keeping track of quality and consistency throughout the area.
    - The HSCP commissioning team can where necessary act rapidly to respond to any concerns over any care home and arrange alternatives at pace.

Citizen Space – Online Survey Responses:

- **16 full responses completed (20 received)** - from 16 sources - 2 of which were groups of Ludgate staff.
- Survey was open until midnight on 12th November – link to Citizen Space is: Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling - Clackmannanshire & Stirling HSCP - Citizen Space

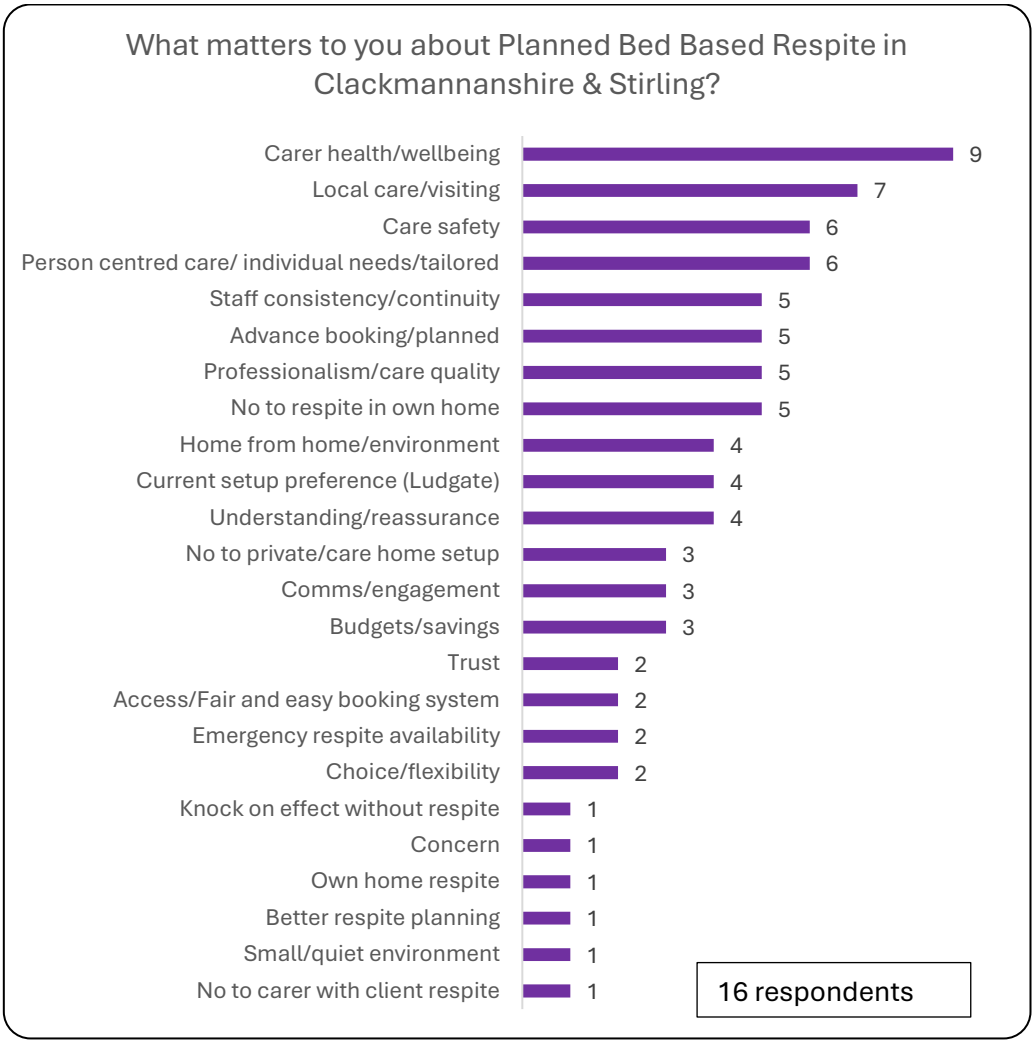
Summary of Responses from Citizen Space Online Consultation Survey on the Future Model of Planned Bed Based Respite

Engagement with stakeholders took place in the form of consultation over a six-week period from Wednesday 1 October 25 to Wednesday 12 November 25. An online Citizen Space survey received 20 responses from 16 sources. Some of these responses were a culmination of a number of individual responses.

Feedback

Q1. What matters to you about Planned Bed Based Respite in Clackmannanshire & Stirling?

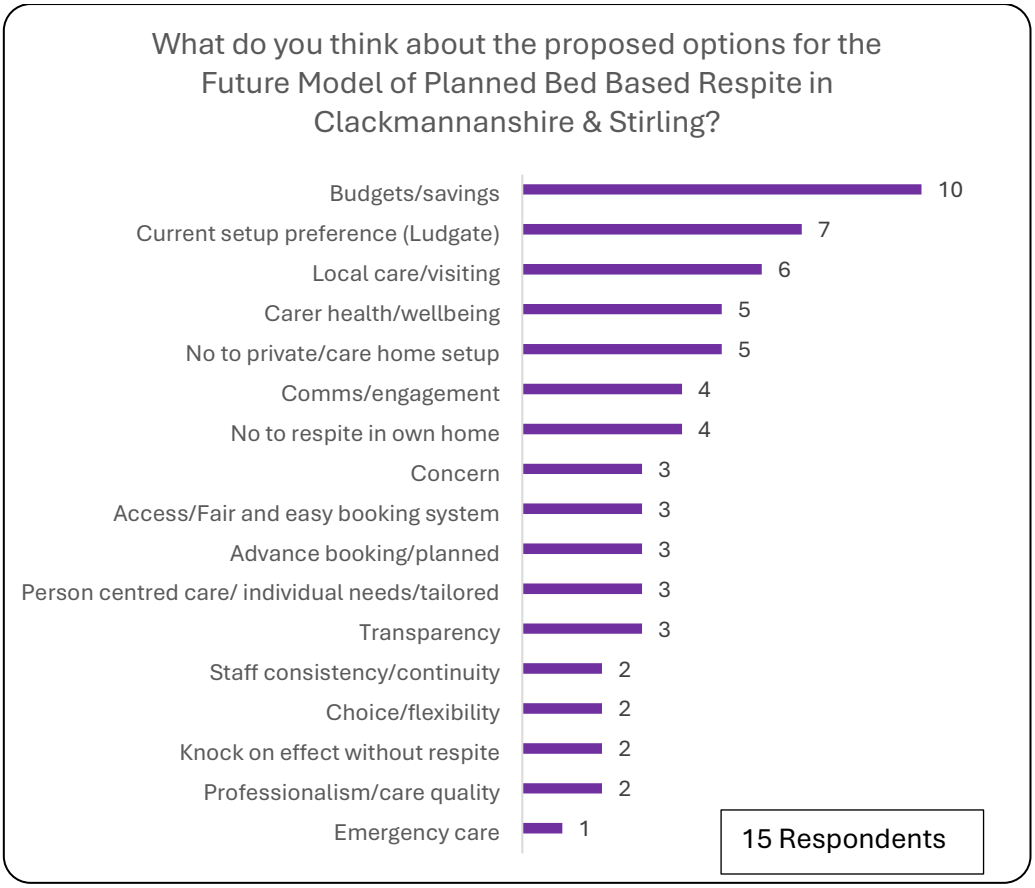
There were 16 responses to question 1. The graphic below shows the topics that were mentioned.



What matters most to carers is that they are able to provide continued care to their cared for person whilst maintaining their own health and wellbeing. Respite care away from their own home is seen as vital. Carers want local respite that provides a safe home from home environment where their family member is receiving person centred care that is tailored to their needs by reliable, professional staff. Respondent advised that more respite care is needed than is currently available and those that used Ludgate were happy with the care provided.

Q2. What do you think about the proposed options for the Future Model of Planned Bed Based Respite in Clackmannanshire & Stirling?

There were 15 responses to question 2. The graphic below shows the topics that were mentioned.



In general, carers would like more transparency and communications on proposals for future care options and the budget implications. Carers currently using Ludgate would prefer to continue with the current setup at Ludgate as they have concerns about accessing respite care when they need it and worry about respite care being provided in a care home under options 3 and 3 plus.

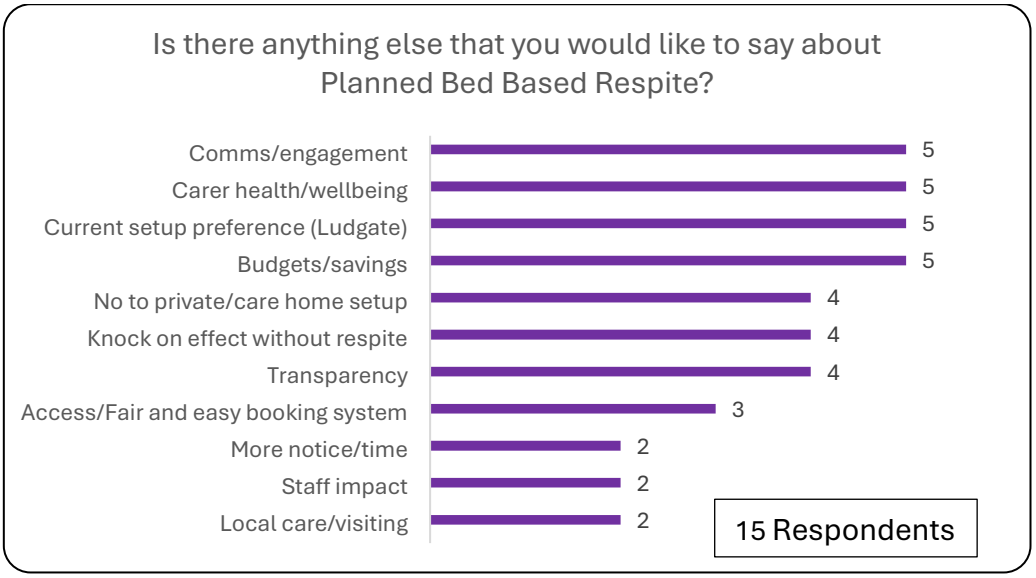
Respondents to the survey are generally keen on option 1 and open to option 2 but some have concerns around the availability of the Ludgate respite service to Clackmannanshire residents if it is also made available to Stirling residents.

For option 3 & option 3+ some respondents have concerns around the quality of care provided at care homes versus the current care provided at Ludgate and also concerns that these options are financially focussed rather than carer centred.

Some respondents mentioned that they didn't understand what option 3+ offers for carers.

Q3. Is there anything else that you would like to say about Planned Bed Based Respite

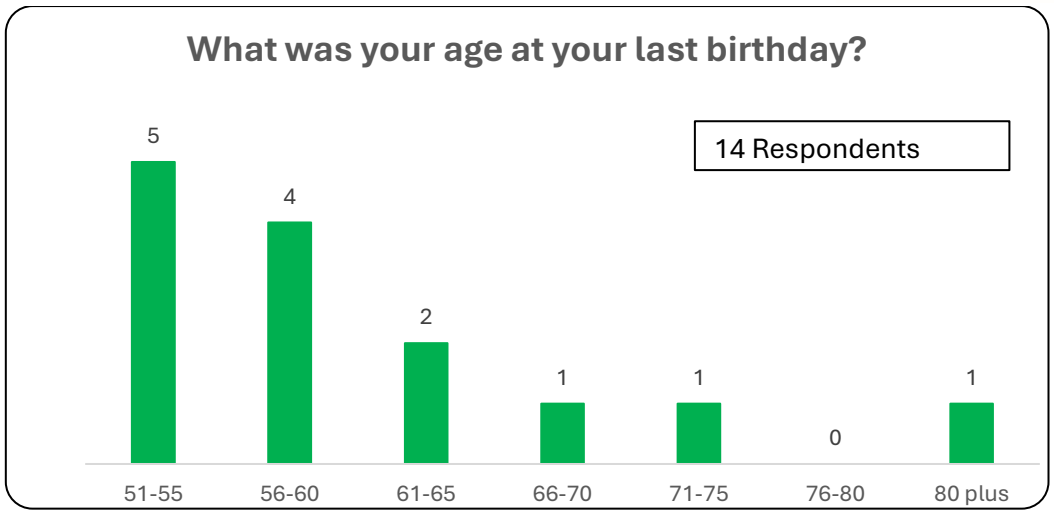
There were 15 responses to question 3. The graphic below shows the topics that were mentioned.



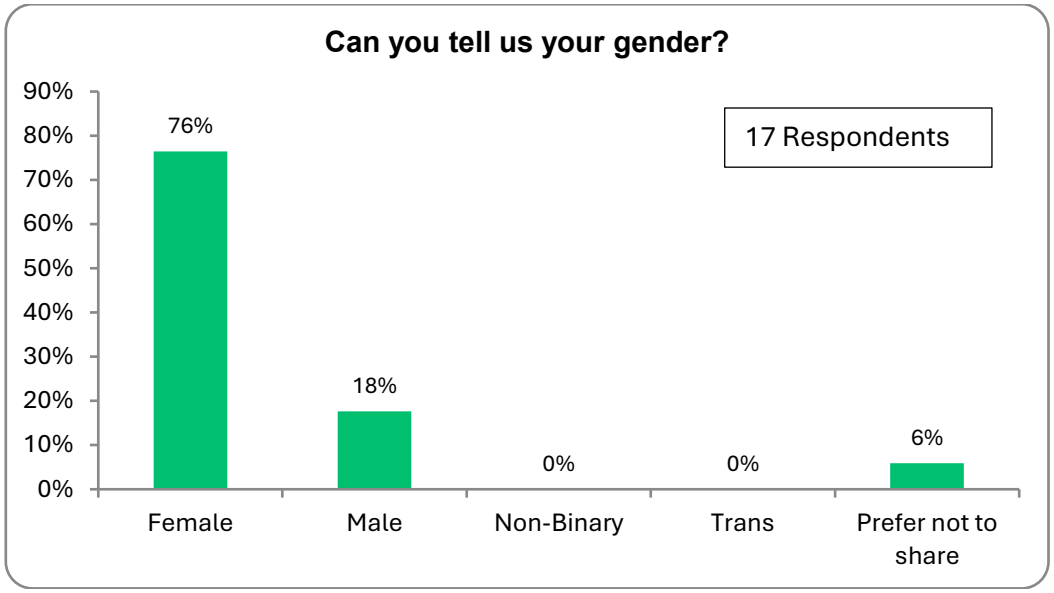
Some carers feel that they have not had enough consultation to make informed choices and feel that engagement has been rushed. Most carers see the proposals as a cost saving exercise and feel that there will be a move away from person centred care and an impact on local care jobs. They consider the current setup at Ludgate house as vital and fear the knock on effects of having a different or reduced respite service will impact on their wellbeing and the option to be able to provide ongoing care.

Respondents also shared that it can be challenging to book respite through Adult Services, with confirmation of their booking for Ludgate often received at short notice, causing carers to change or cancel plans.

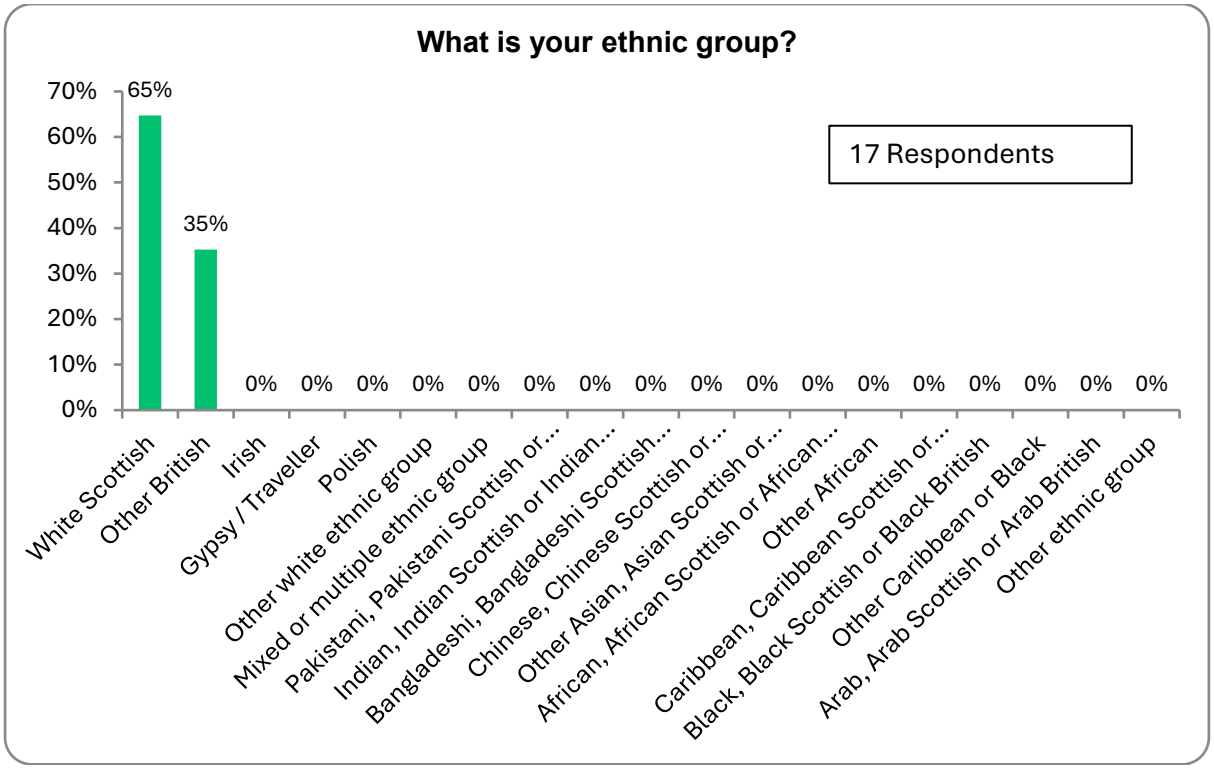
Q4. What was your age at your last birthday?



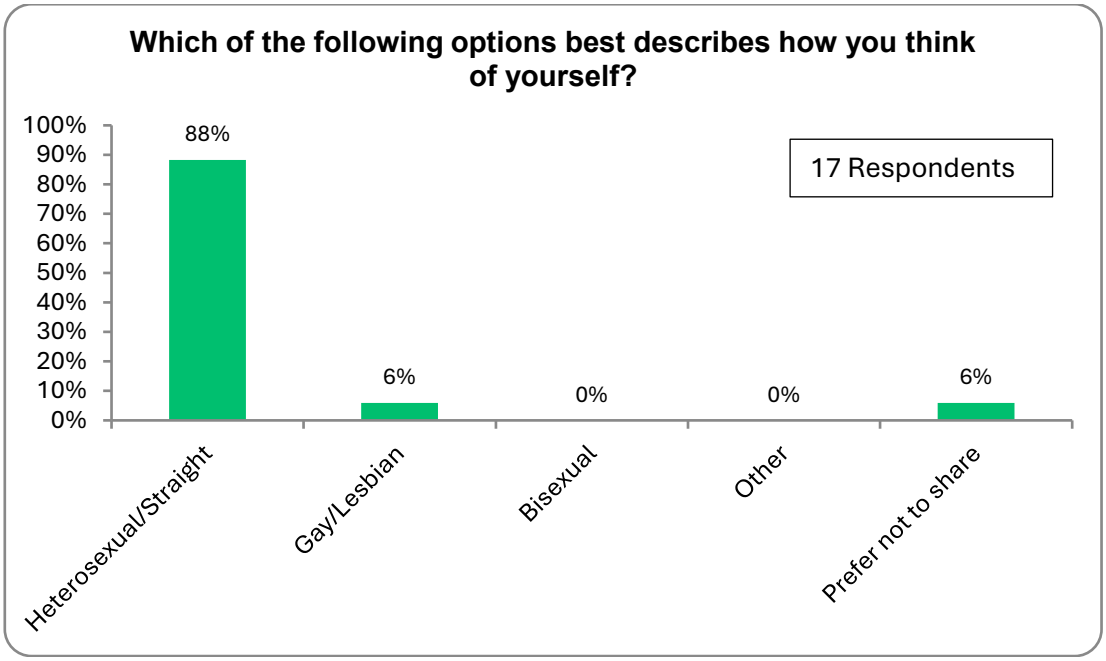
Q5. Can you tell us your gender?



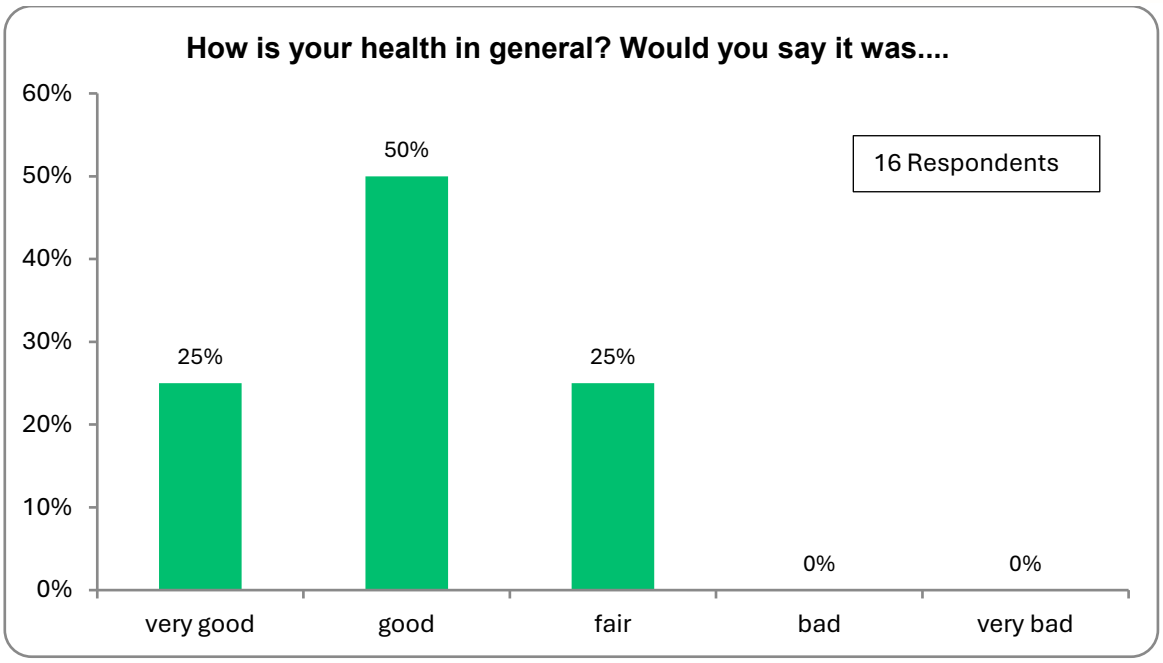
Q6. What is your ethnic group?



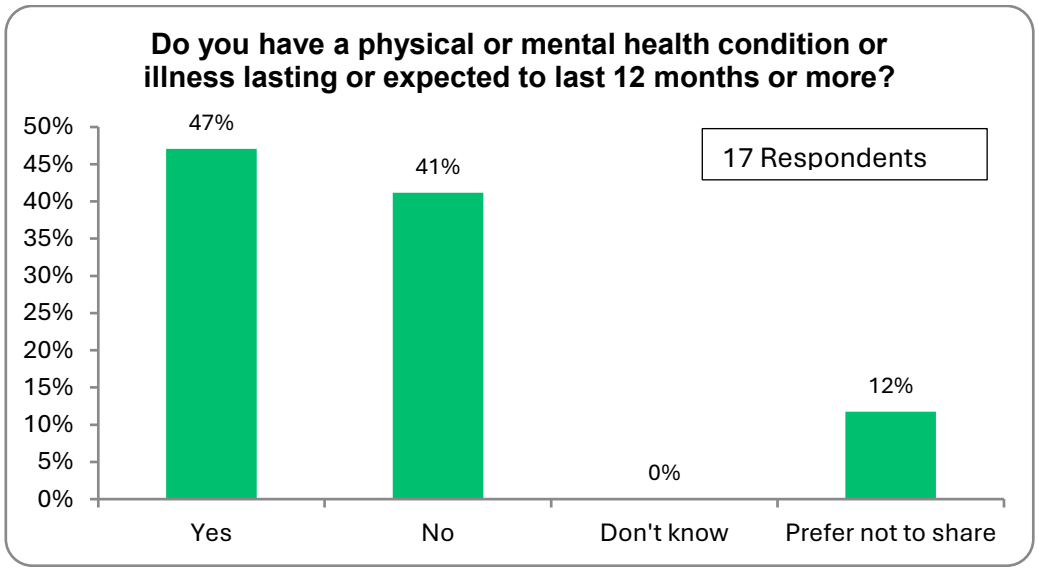
Q7. Which of the following options best describes how you think of yourself?



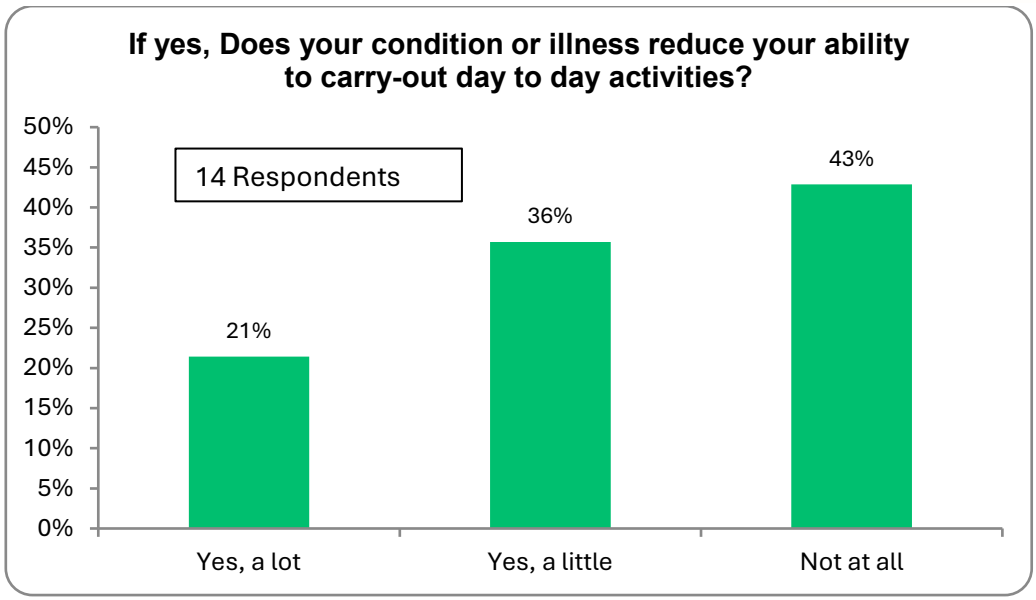
Q8. How is your health in general? Would you say it was....



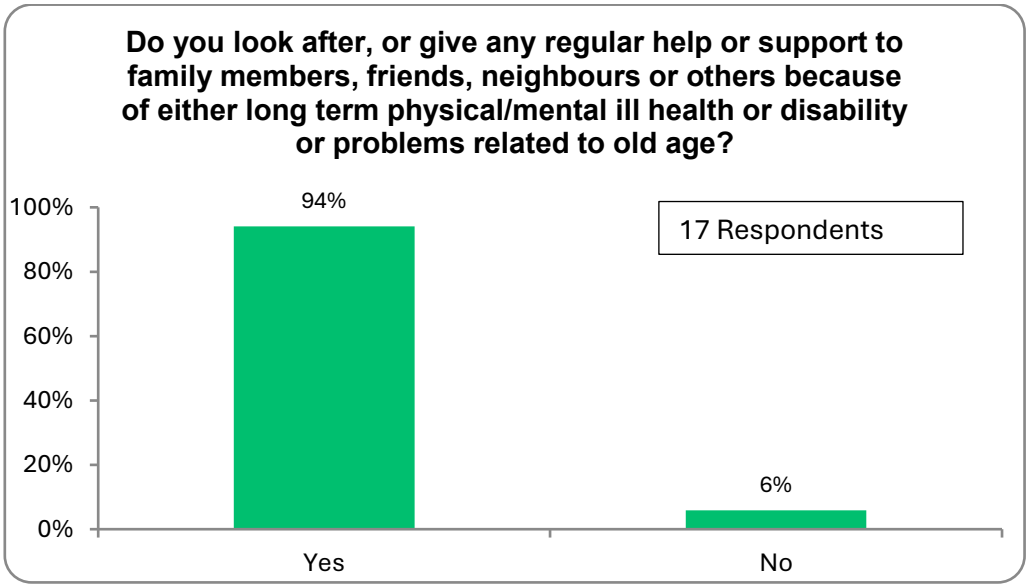
Q9a. Do you have a physical or mental health condition or illness lasting or expected to last 12 months or more?



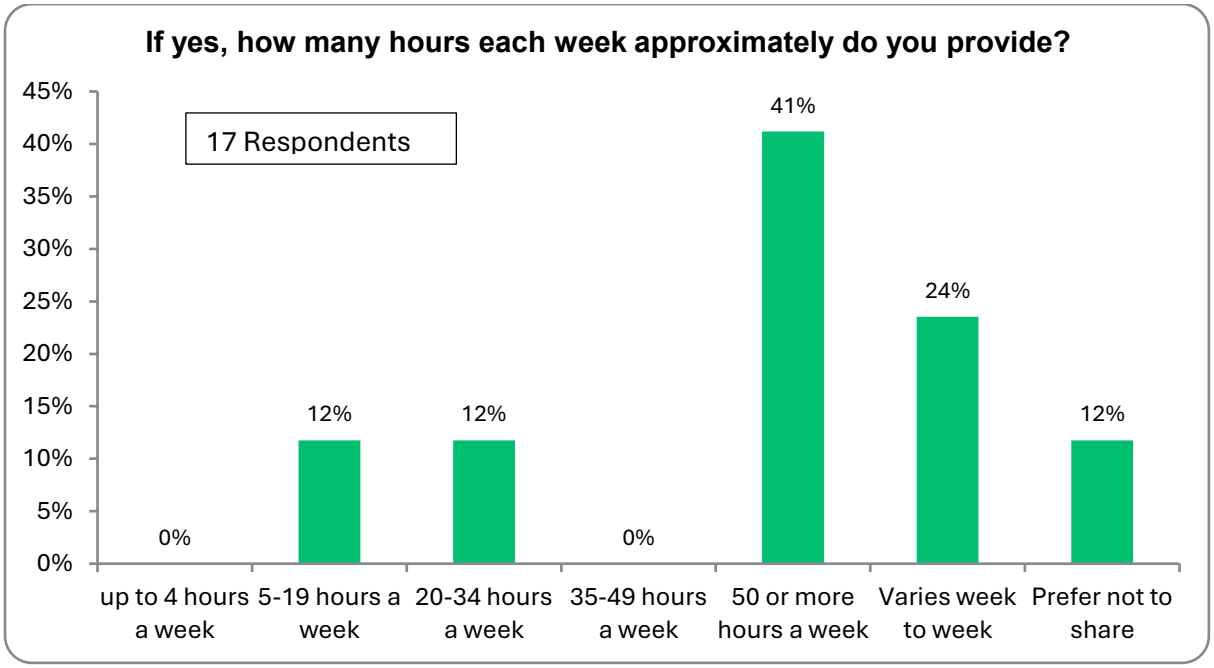
Q9b. If yes, Does your condition or illness reduce your ability to carry-out day to day activities?



Q10a. Do you look after, or give any regular help or support to family members, friends, neighbours or others because of either long term physical/mental ill health or disability or problems related to old age?



Q10b. If yes, how many hours each week approximately do you provide?



Appendix A – Responses

Q1 Responses
Individual comments from the Ludgate Respite staff: "Having a service that's specific/tailored for Respite provision. There is a service for families to have Respite from their caring duties, allowing support to continue. Caring for people in their own homes." "Families have trust in the service and are confident the service user will be well cared for. Not getting 'lost' within a busy care home." "The service is vital to some families. It provides them with a much needed break and the reassurance that their loved one is getting the best care provided. Trust has been built between us/families/service users. Closing the service is going to put an increase on carer stress. A lot of families do not wish to have Respite at home as this is not a break for them." "Families rely on the service and the concern around these changes are what they will do if and when this new model of care fails. Respite gives them peace of mind knowing their loved ones are safe and well looked after. Respite for these service users has played an integral part in reducing carer stress and maintaining good family relationships which in itself has enabled the service user to remain in their own homes." It has to be flexible to meet the demands of the carers and cared for person. It has to be easy booked and as far in advance as possible. It must provide positive experience by providing high level quality of care. It needs to be aware of the persons individual needs - "not just treated as a resident in the care home" It should be local to the carers / clients home so family contacts can be maintained. STAFF COMMENTS Option 2 allows the community to keep the facility that respite provides for both Clackmannanshire and Stirling. It allows making savings being used by both councils as well as

keep employment for people working in Ludgate.

Carer stress in the community is widespread. Respite allows the carer/ partners to have a well earned break from living with their partner/ family member

Without respite there is a huge risk to carer breakdown which will lead to long term care or emergency.

Respite beds are critical for allowing carer breaks.

We currently have a case where putting respite breaks in place is stopping the need for Long term care .

Planned respite keeps people from having significant carers stress when trying to care for their relative at home. Taking a break away from this is a well deserved break.

There is a lot of overnight needs in the community. If there is no bed based respite what will happen to service users and their carers?

Not all respite at home is appropriate.
The individual has their care needs met

The individual is in a safe environment

The carer cannot look after an individual 24 hours a day 7 days a week 365 days a year without a break

The carer can 'catch up' on the house, repair any damage that the individual does and see immediate family as in adult children and grandchildren, try and make friends, get a job and without sounding selfish enjoy themselves, some individuals need more than respite, carers don't live, they exist and while they have to look after someone with dementia they can only dream, their life has actually stopped

The staff at Ludgate support the individuals AND the carers, this is gold and being local means in the event of a serious emergency, carers can be there within minutes not hours. The staff at ludgate listen to the carers, talk to them NOT at them, the one to one, will be gone and the individual and carer will be lost in the system,
That services are not local and therefore families cannot visit. Lack of beds means more stress on carers and impact on carer's mental health. Private care homes will not keep beds free just in case there is emergency respite.
As a carer who has accessed planned bed respite at Ludgate on several occasions for my mum who has moderate stage Alzheimers the following matter to me.

Being able to plan in advance and have an efficient, straightforward and fair system in place to enable ease of booking a respite bed.

Knowledge and peace of mind that whilst in respite my mum will feel safe, cared for and be well looked after.

The current Ludgate set up is ideal for someone with my mum's condition - it is small, secure and has consistent, long-serving staff who foster a home from home environment. She has received high-quality, person-centred care there.

Having experienced a care home set up with another family member unfortunately the opposite was true in that scenario - a lot of transient staff, high staff turnover, large scale set up, lack of familiarity, institutional feel and high person/staff ratio
Choice is im portant as different people will see respite in different ways. For example someone caring for a spouse would possibly want a holiday together but with someone else to assist with the caring role so they can spend time together without pressure on the carer. Someone caring for a parent might want a complete break to have a holiday or visit other friends or family but

knowing that the person they care for is safe and looked after in a familiar environment. It is important to be able to plan ahead so that the carer has something to look forward to and knows when things will take place. When your role is 24 hours a day/7 days a week it is vital to know that you will get time off.
Having local, accessible, and reliable respite care that allows us to take planned breaks without the stress or expense of travelling far.

Ensuring continuity of care — familiar staff, routines, and surroundings make a huge difference for my mother-in-law's comfort and confidence.

The ability to book in advance is essential — we plan our work, medical appointments, and rest periods months ahead around respite availability.

It's vital that respite takes place in a dedicated, safe, and welcoming environment, not just wherever there happens to be a spare care home bed.

Ludgate House offers trust, stability, and understanding — these are built over time and cannot be easily replaced.
General environment –

That my mum is cared for in a professional/safe/friendly/informal/homely environment with a similar routine to the one she has at home. The small size of Ludgate is ideal as she benefits from the company of a few others - being in a larger noisy facility won't suit her.

Due to her mobility issues, it needs to be close to home. Without reliable wheelchair taxi provision in Alloa, two people are required to transfer her in/out of the car - anything other than a short journey would be uncomfortable for her. On a practical level, close to home is crucial because we need to transport a lot of kit: Along with the usual stuff is her wheelchair, bumper pads for her bed & her stand aid. We take two cars, otherwise I do two trips.

Eating -

At Ludgate, she eats in a small dining area where staff are present during mealtimes which is important. She has problems swallowing + weakness on her right side/hand, so eats slowly & often needs help to cut up her food. She did go through a period of not being able to use a knife & fork at all or chew food. She has periods on meal replacement drinks.

My mum has had many hospital stays in recent years & I have seen some very concerning things while visiting which I believe could just as easily occur in a care home. Lack of staff training & communication & my mums own poor communication is a worry if she is in any large-scale residential facility. It's easy to see how some people get overlooked.

Maintaining mobility -

It's important that care staff encourage her to keep moving & assist her to do things for herself as they do at Ludgate, rather than do everything for her.

My mum has had good & bad hospital stays, but every stay has led to a period of rehabilitation when she returned home. Last year she fell, causing a knee sprain & swelling (no fracture). The nurses got her up, dressed & sitting in a chair everyday despite being in great pain. They even got her walking to the bathroom using her walking frame, albeit with a lot of assistance & encouragement. She was then moved to another ward where for some reason she spent the next three days in bed. Nurses didn't even get her up to go to the toilet. Her diagnosis hadn't changed so there seemed no reason for this.

Those three days of inactivity was all it took for her to lose the ability to walk. Back at home, my mum went from requiring one carer (at her two care visits a day) to two carers.

If she had remained on the first ward, I see no reason why she wouldn't have walked again. (She was in the same situation once before after a fall & she walked again with the right treatment.)

Two wards, two teams of staff with very different attitudes and approaches. One ward actively promoting independence & the importance of getting the patient up and about. Another ward not taking any involvement in a patient's progression & rehabilitation. My worry is what happens if she ends up staying in care home that doesn't have the same ethos as Ludgate.

Care staff using assigned mobility aids -

She can't walk anymore & needs to be encouraged to maintain what mobility she has for as long as she can which the staff at Ludgate fully understand.

She is able to stand using a stand aid which was supplied on her last hospital discharge. This devise requires her to stretch her arms out, grip the bars on the stand & pull herself up. It is the only weight bearing/exercise/movement she does.

There was a lot of resistance to this stand aid at first from three carers who were very vocal about their dislike of it (albeit a minority - she usually has over 20 different carers at any one time.) They caused such a lot of stress at a difficult time when my partner & I were adapting to my mum's additional needs which put a lot of pressure on us. Despite being assessed by the occupational therapist, one carer kept urging me to get a different standing aid because she hadn't been trained to use my mum's & didn't feel comfortable with it. Two other carers kept insisting that my mum required a hoist!?

My mum needs step by step direction, encouragement & reassurance. I understand that some carers don't like that interaction & think a hoist might be far easier (for them). This is why it is a major concern that when she goes into any residential care setting for even a short time, the carers might take it upon themselves to use an alternative standing aid. I understand that mechanical aids might be more widely used in care home settings but I know my mum will rapidly lose mobility if she doesn't put some effort into moving herself. This would make life challenging for us when she returns home. Pointless coming back refreshed from a respite break, if I then have to spend weeks trying to "re-train" her to use her stand aid, assuming that is even possible.

The consequence of not being able to use her stand aid is even less quality of life for her & more cost to social care. If an alternative mobility aid is required that's too large to transport between rooms (we live in a small house) or something that my partner & I cannot use, then it's going to be very limiting for my mum & potentially going from two carers twice a day to two carers four times a day.

An understanding of unpaid care & what life is like for an unpaid carer would be good -

I never knew about the respite unit at Ludgate House until the Carers Centre told me. When I phoned Adult Services to find out how I could access it, I was asked why I would require respite at all - it was pointed out that not only was my mum living on her own at the time (albeit with multiple visits from me throughout the day) she was also receiving home care visits (at that time from Mears).

Unfortunately a carer visiting for three times a day for between five and 20 minutes wasn't going to enable me to confidently or safely leave her for a week. It was then suggested that another family member step in. The assumption being made that there was other family! I assumed Adult Services understood that the home care service model only really works, in a lot of cases, when a family member is around to support it. The way the potential closure of Ludgate House has been presented also shows such lack of understanding about how unpaid caring works.

Easier access to respite -

It's important to me that the process of requesting respite is straightforward & something I can book months (not weeks) in advance. Once booking is secured, communication with Ludgate is excellent - very clear & straightforward. They are actively keen to understand my mum's requirements prior to admission, noting any changes or dietary issues.

Better communication with Adult Services would be appreciated -

We first accessed Ludgate in 2023 but it wasn't until towards the end of 2024 that a social worker happened to mention that I was allocated 28 days respite per year which I hadn't been informed of before. It would have been nice to know sooner so I could have used all my allowance – 2025 is the first year I used all 28 days!
It must provide excellent local residential care services in a friendly resident-oriented environment, in which resident care, not cost reduction, is the primary driver for service delivery.

It is near me, that is in the Wee County, accessable with good public transport. Access for a Respite break is required to give unpaid Carers the opportunity to refresh their mental & emotional wellbeing. Reassurance knowing their cared for, is in a safe, secure place close to where they live is crucial.

Reference www.sharedcarescotlandd.org.uk survey 2024
The option of time away secure in the knowledge that my mother's many needs are fully provided for. I have become more and more aware that our quality of life has become so intertwined that we are almost co - dependent. My mother could not function in any qualitative way without me, and thus my self preservation is quintessential!
Option 1 is the only one that works for me. The reason is that my partner leaves the property and allows me to have downtime in our own home. I am able to schedule important property maintenance whilst my parnter is in respite. A classic example was when we had interior of the house painted. There is no way on earth this could have taken place had my partner been at home.

Ludgate house staff look after residents/ patients so well. It is reassuring to cares like myself that he is well cared for and that I do not need to worry.

I want to share a true story with you:-

A couple of years ago, I had to go abroad at short notice because my father was very unwell. Ludgate respite could not accommodate respite at such short notice (no beds available). So social services organised for my partner to have respite in "The Orchard care home" in Tullibody. On returning to the country, I went to pick up my partner he was in a dreadful state. He said he was neglected. He has parkinsons disease and sleeps alot. He missed out on some meals because the carers did not came to call him and take him to the diningroom. When they came around with the tea trolley he would say to them he did not have his meal because he had been sleeping, so the carers would make him a sandwich instead. They only showered him 1 x whilst he was there and it was on the day he was been discharged. He stayed in dirty clothes for 3 days because they had taken his dirty laundry and never bothered to return his clean laundry. He eventually asked to speak to the manager and he told her what the issues were and she implimented a roll-call system at meals, that way ensuring he went to dining room for his meals. In addition, the manager also ensured his clean laundry was returned to him that day. That negative experience has left him traumatised regarding care homes. We only trust Ludgate respite to provide care for my partner
At the moment our family are in crisis dealing with dementia and issues with SW, to be properly heard to be assessed for respite .
I have been told by the HSCP that there is no respite in Clackmannanshire suitable for my cared for person. I think respite services need careful planning - the notes I just read seem to dress cost cutting with word salad on paper. None of it make sense. Having respite at home where you have to spend all your time training staff on how to look after their loved ones. Quirks they have. (How you need to follow them up the stairs to catch them if they have a seizure) and numerous details about not only looking after them but how to look after them in that particular environment. Then the effort for the carer to get their house ready for a 'visitor' I've done it before and I spend a week before cleaning and planning and getting things like food they'll eat and writing lists on how to use the household stuff (cookers) etc. it's plain exhausting! At least if the cared for person goes away it's just their suitcase and meds that needs packed. Although if they go to a caravan/self catering it's also all the food they'll eat need etc. I think going away with your cared for person is also not respite! In any way or form, not in the slightest. I'd like a place where my

loved ones can go have fun (they a young person) and I as a carer doesn't have the mental load of thinking about what they'll eat and cleaning and sorting. Pack a suitcase for them and that's it. I feel this consultation is veiled that the undercurrent is you have a preferred option that you are trying to lead us too. Really disappointed with the level of creativity and out of the box thinking that is not displayed in the slightest.

Q2 Responses

"Families experience of Respite in a care home is not the same as in Ludgate. This is feedback given to Ludgate and social workers and we provide an assessment and reports of care needs during their Respite stay. Ludgate staff work closely with social work and families."

"A further reduction in social care provision for older people. There should be more Respite facilities in communities. Reducing costs at the expense of service users."
The proposed options do not offer many options - access to planned bed based - away from the home is a crucial part of carers being able to keep a loved one at home for longer - preventing the need to move into long term care. How this is delivered is critical to unpaid carers.

The options as I see are providing care from a private care home for cheaper cost than a bed in Ludgate is all about the councils saving money - not about the quality of the experience for families.

It is a sad day when we are looking at cheaper care rather than quality, easily accessible, with staff interested in the client and the carer welfare and maintaining contact in and out of respite as Ludgate staff provide us.
It would be good to keep a respite unit in Clackmannanshire.

Staff need to keep their jobs

Families need respite in their own communities,

Families need respite for their loved ones, loosing Ludgate respite unit would be devastating, families need a break.

Clackmannanshire has lost enough. Support is essential

More staff to all services ie Mecs/ Reablement. Families will need additional support at home.

If proposal goes ahead clients need the right support and time for staff to carry out the task.

Staff need more visit times and time slots on visits to allow some social time, physio visits and will need to be reviewed regular.
Carers and individuals will lose out if they don't have their own transport for example cost of taxi

This is called outsourcing and the actual cost will add more pressure to their budget which will hurt the individuals and carers

This could actually be breaking point where the individual and carer are put at risk also this would be detrimental to the carers and immediate family (eg daughter caring for her mum with a family of her own) the repercussions and consequences of broken down families would be inevitable

The film Sophie's choice, springs to my mind because presently I have to choose between my mum and my adult children and grandchildren, as a mum I brought up my 2 children, now I have grandchildren which I look after, this is leading to huge arguments between me and my family, and my mum is not responsible for her actions meaning she can cut her and my clothes, cut carpets, destroy furniture and throw things at me

Stuart Rose M&S CEO he was so busy with his work and his own family etc, his mum did have

mental health issues, she kept phoning him and the time when he put himself first as being too exhausted and couldn't cope with listening to the same stories his mum committed suicide, he has to live with himself for not returning her call

Concerns as outlined above.
The key driving force here is transparently about saving money. I understand that budgets are tight across the board but options 3 and 3b are clearly focused on money saving rather than options 1 and 2 which are more focused on the cared for person and the wellbeing of their carers which is what should be the central focus at all times.

Dropping someone with my mum's needs into a respite care home bed would not be good for her needs or mine!

It would be too overwhelming for her in the short-term. The smaller scale option and the higher quality of care provided at Ludgate is ideal for her needs and the peace of mind it gives the rest of the family is priceless.

I feel that use of the phrase "traditional" bed based respite is weighted in a negative light (ie - it's old fashioned, should be in the past) where in reality this is actually the ideal scenario for a person with my mums needs.

Mum has stayed at Ludgate on several occasions to allow us to go on holiday/short break. Knowing that she was safe and well looked after in a home from home environment allowed us to switch off for a bit, relax and recharge our batteries ready to go again when we returned.
It is difficult to comment on Option 3+ as it is still being developed but the wording does make it sound as if this is the option which is most likely to be taken forward. Short notice beds - 2 weeks in advance - do not give the carer much time to find and book a break for themselves or to prepare the cared for person about their break. This could mean the carer is unable to take advantage of cheaper advance booking and may result in the cared for person, for example if that person has dementia, being more unsettled in their respite setting. If COSLA have set the national care home rate at a level where a private company can provide the care required, why does a local authority needs more than twice as much money to provide the care. Are there perhaps management savings which can be made there?

Option 3+ mentions developing an integrated care model to be delivered from CCHC but, so far, little detail about how this would work. As this review is about cutting costs, it would probably mean using the existing wards at CCHC. As these wards are already used to capacity, would this result in the current "step down" beds being moved to Stirling making it more difficult for friends and family to visit - poor public transport links - with an adverse effect on the recovery process of those patients? Care closer to home? There may be a reluctance for people to accept respite in what will be seen as a hospital/medical setting. It is easier to suggest that the cared for person is going to have a wee holiday when it is in a care home setting with a more homely environment than at the Health Centre!
Option 1 – No Change:

Keeps things stable and predictable, which we value deeply, but doesn't address the wider funding and access issues between Stirling and Clackmannanshire.

Option 2 – Shared Access:

Potentially fairer and could improve flexibility if managed properly, but access must be guaranteed, not left to chance or budget pressures.

Option 3 – Decommission Ludgate:

We would like to see how this would work in reality. Closing Ludgate removes the only reliable, familiar respite service we have.

Moving to general care homes could remove the sense of safety and trust built up over years.

The savings being suggested don't justify the disruption and anxiety caused to people who rely

on this support.

Option 3+ – Decommission + Intermediate Care Model:

This model seems designed more for rehabilitation or hospital discharge, not planned respite for carers.

There is no clear explanation of where my mother-in-law would go, how we would book, or whether we would still get our 42 nights per year.

Without those guarantees, this option feels unworkable and unfair.
What's really confusing me about your draft proposal document is the reference to the four respite beds at Ludgate. I always understood that ALL the beds in the unit were for respite. The Clackmannanshire Council website states that the respite service offers 10 bedrooms. Misleading, isn't it? Why say this when it's only four?

If the four beds are not going to be funded, are staff still going to be caring for the people in the other six beds? Who are those beds for & who funds them?

Short breaks budget – all options -

Overnight care at home so the carer can go away – Won't work for us as my mum lives with my partner & I. We don't/can't always go away. In fact this model would make it impossible for me to use all my allocated respite. E.g. Last year, while my mum was in Ludgate, my partner & I went on holiday for one week, the rest of the time was spent at home getting a wet room installed for her. As much as I'd love to, there is no way we could afford to go away for four whole weeks in order to vacate ourselves from the house for the carers to come in.

I can see that sending staff into people's homes to provide care will save on the costs of running the building etc. But won't you need to employ a lot more staff in order to provide 24/7 care in multiple places? Or, is the idea of home respite care going to involve a number of different carers visiting people in their houses throughout the day, relying on them to press their MECS if they need assistance?

When I looked into private respite care (when the council initially told me I wasn't a candidate for respite) the cost of home-based respite was more expensive than residential respite + extra cost for staff expenses. It certainly wasn't the cheaper option.

Shared lives – This would be perfect for my mum, such a lovely idea. Pie in the sky!

Holidays/trips breaks for carer & cared for person – Not possible in our situation.

Overnight short breaks away in proximity where carer is – No, feel exhausted just thinking through the logistics.

Option 1 -

Of course, this option is best for our us!

There was a lot of info in your proposal document but it's a shame you didn't give a bit of detail to explain why a Ludgate bed costs double a Stirling bed. I don't know the history of Ludgate but assume it was set up with public funds by the council. It was likely always costly to run by its specialist nature. I would expect a facility such as Ludgate to cost more - it seems naïve to suddenly say it's costing too much now.

Presumably the weekly rate is similar to previous years - unless it has suddenly jumped up in which case, you will know exactly what has caused such a sharp increase (not having the heating on full whack all summer long, especially during heatwaves might help.)

It's hard to understand how you can compare the cost of a publicly funded facility to Annefield

House which may not be paying their staff the same rate of pay as Ludgate. Might there be a higher ratio of staff at Ludgate? No doubt there will be higher pension costs, more annual leave, more training & better working conditions in general to fund with Ludgate.

If the higher cost at Ludgate is down to the extra efforts put into enabling people to maintain their levels of mobility in order keep their independence long-term, then surely it's a potential saving if it delays their need for long term social care.

Option 2 -

We can hardly object to sharing the facility with Stirling if it's financially carrying Clackmannanshire, but it will be a problem to all users if it becomes impossible to book.

The current procedure to book respite through Adult Services is hard enough. Your phone call is logged. Calls are returned by the duty social worker on a system of priority. Obviously, social workers are under a lot of pressure, some calls are far more important than others, therefore a carer requesting a break is low on the list for a call back. In the past I have waited almost four weeks for a return call despite calling back again & again. A social worker does eventually phone you. You request dates, they call Ludgate to book them. The dates often aren't available. They call you back at some point & ask you for alternative dates. This is my experience anyway.

One time I asked if they could let me know what weeks were available in the month of September thinking it would be easier, but the social worker said that wasn't possible & I had to give specific dates.

Add carers from Stirling into the mix & I wouldn't fancy my chances of getting anything!

Option 3 -

Decommission the four beds - Still wondering what the other six beds are for.

How will you find spare beds to commission respite care in local care homes? Will you be block booking rooms for 52 weeks a year? I was invited to go & look around Ludgate & then the manager requested I return with my mum to be sure she was happy to go in there, so we had met staff & started to form a relationship & level of trust long before my mum even had her first stay there. Both my mum and me were apprehensive that first stay. We feel we know the staff now and they remember my mum. This doesn't seem like something a private care facility could accommodate & I get the feeling that she wouldn't necessarily be returning to the same home each time anyway which would cause too much anxiety.

Before I was granted respite through Ludgate, I looked into short term respite in private care homes. I contacted about five around the Forth Valley & Glasgow areas. They all advertised respite care as a service they provided but, in every case, I was told that it depended on whether a bed was available, & they wouldn't know that until a week or two before we needed it. Basically, offering something they really weren't in a position to provide. So, carers call two weeks before they want to take a break then book a last-minute holiday? Or, book a holiday in advance & keep their fingers crossed that a room will happen to be available. I don't know anyone that has zero other commitments to make this a sensible option. This year I booked September respite back in February.

Option 3+

Develop further in collab with staff, supported people, carers… during October 2025.

Not a lot to say on this option. I get the feeling that you don't really want to collaborate. Ludgate House is located in a very central part of Clackmannanshire, in easy reach of a high proportion of residents, and provides resident centered services to the users. Any alternative cannot lead to a diminution of these service levels.

Provision of respite care is a key aspect of care for local residents, many of whom have played

key roles in the development and shaping of the local society over the years. Therefore it is of utmost importance that the control of these services remain with a body whose primary concern is to achieve the best possible level of care, and is not focused on cutting costs.

Ultimately, regardless of how it is dressed up, the proposals put forward are about cutting costs. This is wrong, and will result in a degradation of service levels to the users of the facility.
Extremely worried and concerned. Whilst arranged Respite care may be accommodated 'close to home' my query is about response to a crisis situation.

Private care placements would be unable to 'protect' the need for ad hoc Respite beds so would the commissioning of crisis beds be value for the public purse? Some unpaid Carers and the cared for do not want a Respite service in their own home. It must be a person centred service with the needs of the unpaid Carers taken into account as well as the cared for.

Looks like a cynical way to save costs and will not enhance in any meaningful way.
Options are intersting.

What I am about to say sounds very selfish, and I am really sorry about my attitude, but here goes:-

I do not agree with sharing respite beds with Stirling. Ludgate currently has 4 x respite beds to cover Clacks. To continue with only 4 x respite beds but increase the demand of those beds by allowing Stirling service users to use them is not fair to the Clacks carers . The reason is that Clacks carers will lose out because they may not get the weeks they want because there will be a lot more unpaid carers from Stirling, also applying for respite beds
It will never be enough with regards to how much respite us truly needed but it's better than nothing.
Pants!

Get some real engagement with those who want to use the service. Honestly it's shows you have zero idea of what carers want.

Q3 Responses

"Staff and families have built a good rapport and there is a strong bond of trust between us all. Families don't always know who to turn to and as a result come to staff at Ludgate for help and advice. We have been witness to failed discharges in the past and families reach breaking point. This is why Respite is a much needed service and plays a fundamental role in keeping older people at home for a longer period of time."

"Service users can be very anxious of their first stay at Ludgate and reluctant to come. This usually has positive outcomes and they will return for further stays. They agree to come as it is a Respite service. These service users may not accept going to a care home in case they don't go home."
It must be available when its required else moving it to private acre homes will not support unpaid carers needs.
Keep it in Ludgate,

This service is very valuable
It is the most idiotic and irresponsible idea that has cost the tax payer and the only ones who have benefited are the managers and above

This glossy slide show has ensured that someone has not been given respite as it will come out of their budget

This exercise is clearly a waste of time, someone at the top has decided that ludgate must close and in order to justify their reasons they have called upon social services, staff at ludgate and carers to attend a pointless meeting and pretending to listen, the cost will always be justified to the top dog and they will always find a way to prove its cost effectness, in the real world it's going to be an expensive mistake

I for one, know that, I cannot continue to keep my mum at home living with me, I considered making myself homeless, then found out I won't get a house because I was forced to make

myself homeless, my mum with dementia takes priority, she stays in my house, yet I am the broken one who tries extremely hard to keep coping I try to continue to function in an environment that is clearly affecting my health and wellbeing

At 62 with no friends, extremely lonely and having my 89 year old mum living with me is really pushing me over the edge, I need help NOW, I have nothing to lose or give

The figures don't make sense.
Closing down the respite beds at Ludgate would be devastating for the service users, their families and the wider local community of Clackmannanshire.

Ludgate and its highly motivated, experienced, skilled and caring staff have been a lifeline for my mum and our wider family over the last few years.

My mum is a current user of the service but I had previous experience there with my elderly dad. Before he moved into a care home my dad didn't want to leave there - "why can't I just stay here" - that says it all.

I wonder why there is such a cost difference between nursing care level beds and respite beds?

Is there a way you can reduce the cost of the respite beds other than "decommissioning" them?

I urge you to take account of the wishes of the service users, respect their rights and listen to their voices.
If the 4 respite beds at Ludgate House are closed will these rooms just be left empty until the 6 STA beds are also closed because not enough use is being made of the facility or will the number of STA beds be increased to 11 (the number of rooms) with perhaps increased access to Physiotherapy and assessment by OTs so that people regain a level of independence.

I would hope that there will still be local access to Respite Beds and that the service will be centralised in Stirling. We have already seen the loss of Menstrie House and the removal of Day Care at Ludgate House - which was a useful service for carers of older people - and it would be sad to see yet another local service being removed.
We simply want to keep the support we rely on — 42 nights of planned respite each year, accessible locally, in a place we trust.

If any change is made, there must be a fully functional replacement ready before Ludgate closes.

The Council should make sure communication is open and clear; we should not have to find out about changes through rumours or the press.

Six weeks is a short time to gather meaningful input — this process should not be rushed, and we would welcome in-person discussions with decision-makers.

We want our voice to be heard clearly: respite isn't a luxury — it's what allows us to keep caring full-time.
Whatever you do, you need to really look at your communication because it's not good.

We were told you were having this consultation, so I was actively looking out all summer for details on how to take part. Inviting carers to an afternoon meeting with only a few days' notice seems a rather odd thing to do. It sent a strong message that you probably aren't all that concerned about getting the maximum number of participants or their input.

If you understood the role of an unpaid carer, you'd know that they might not be able to leave the person they care for alone & would require notice to make arrangements to attend.

I appreciate you also have your online meetings scheduled, but perhaps you should have arranged ALL of your meetings toward the end of October/early November to give more notice.

I would also like to say that it was a total shock to read about the potential closure in the Alloa Advertiser back in April. It was only in February they reported how well Ludgate came out its care

inspection. Such a kick in the teeth for the staff & their hard work yet they have continued doing an excellent job despite this looming over them.

There was no communication with carers/supported people before or after that announcement. With statements like "there is no money left in the budget for this year" you can't be surprised it generated some hysertia. It sounded as if the closure could happen any day.

I assumed HSCP would write to all concerned properly explaining what was going on & do your best to alleviate people's worries, but you didn't. People were left hanging, trying to gather what information they could. Ludgate staff didn't know what was happening themselves & when I phoned Adult Services, my call was logged but of course, nobody called me back.

My mum was booked to go into Ludgate in May & I didn't know if that was still going ahead. It was the same when she went in September – I was half expecting a call to say it was cancelled.

Whist I am happy to live with & care for my mum, there are no days off other than her time in Ludgate & I don't have the freedom to go out whenever I want without advance planning. If carers don't get any break, then I can see how becoming a bit tired & run down can quickly lead to full-on burnout. No one can care for another person in that state which will eventually put the burden on to social services to find permanent residential care. Won't that create a bigger headache?

Long term costs -

I have seen so much waste during my mums many outpatient/inpatient hospital visits. We are constantly being told of the rising costs of the NHS & social care. When my mum stopped walking last year her need for council funded home care doubled. If my mum loses her ability to stand altogether & requires more care visits, that'll double again.

My care input also increased. I can't work full time now, I claim carers allowance, but this is an extra drain on welfare. And so it goes on…

I realise that what happened (or didn't happen) when my mum was in hospital last year wasn't the fault of social care but surely all medical staff have a part to play in helping a patient to recover, particularly elderly patients because of the cost to social care. There seems to be quite a disconnect. Basically, if my mum ends up in a care home for two weeks that doesn't provide the same quality of care as Ludgate which then results in her needing a course of physio or more equipment or additional care/carers when she comes home, it's going to potentially cost a great deal more.

Contributions from users -

"A letter advising of your contribution towards your respite care placement will be issued under separate cover by our business matching team" – this is always written on my respite care placement confirmation letters. I have never received a request for any contribution. Does the "business matching team" ever ask anyone for a contribution? If we had to choose between paying a private home care provider such as "Home Instead" anything between £1700 - £2400 for one week of home care or pay £2129 for my mum to spend a week at Ludgate, we would absolutely pay that extra for Ludgate.
For those who suffer from dementia, it is essential that the regular respite care is conducted in a familiar environment by familiar staff. Otherwise there is a high risk of causing distress to those being cared for.

Opening up vacant respite beds at Ludgate House to eligible residents of Stirling is a reasonable proposal, but Clackmannanshire residents should have first option on the use of these beds. If a bed remains without a respite booking within a reasonable timescale (eg 2 weeks of availability) then it should be made available to residents of Stirling.

Analysis of capacity utilisation at Ludgate House appeared to show that the facility was operating at approximately 75% capacity. However, there was no evidence presented to support whether

the vacant capacity arises from odd days between resident changeovers, or if it is longer term beds available for weeks at a time. This needs to be examined more closely before determining what the real available capacity for increased residency is.
Unpaid Carers are under a lot of stress already, if they are unable to continue in their caring role this will have a huge impact on other parts of health & social care services as well as an impact on individual unpaid carers.
Look to properly invest in greater provision so that users and carers are properly supported and valued.
Clacks carers must be your priority when it comes to Ludgate House.

Let me tell you another true story:-

A few years ago I broke my wrist. I struggled to care for my partner. Ludgate House could not accommodate my partner immediately as there was no free bed, but they did have an empty bed a short while later (can't remember details, but it was like 10 days later).We were very grateful they were able to accommodate him.

Moral of the story:-

If Ludgate house respite does open to Stirling carers as well, this would mean that Clacks carers like myself, may not be able to get respite beds at short notice for emergencies.

Increase it.
I can see it isn't working the fact that I've been told there isn't any respite service. Probably because it's based on the older generation.

Meeting Note

Date: 2nd December 2025
Present:

- Theresa McNally
- Moira Bruce
- Scott Farmer (Chair, Clackmannanshire & Stirling IJB)
- Joanna MacDonald (Interim Chief Officer, Clackmannanshire & Stirling IJB)
- Judy Stein (Interim Head of Service, Clackmannanshire & Stirling HSCP)

Key Points Discussed

1. **Chief Officer Engagement**
    - Joanna MacDonald has been highly accessible and committed to hearing the voice of the community.
    - Members expressed regret at Joanna's departure, noting her positive engagement with local communities.
2. **Upcoming Decision**
    - The January IJB meeting will be the decision-making point for the proposals under discussion.
3. **Carer and Staff Concerns**
    - Concerns raised by carers and staff regarding proposed changes.
    - A petition initiated by Brian Leishman and supported by Theresa McNally was presented.
    - Theresa noted that many signatures were collected before full information was available and circumstances have since changed.
4. **Managing Change**
    - Scott Farmer acknowledged that change can be emotional and may lead to unnecessary fears.
    - Emphasized that the paper aims to increase choice for carers.
5. **Elected Member Engagement**
    - Joanna advised that elected members are seeking a dedicated session to discuss proposals in detail.
6. **Service Model Discussion**
    - Discussion on the use of beds at Ludgate and how Clackmannanshire residents are currently supported at the Bellfield Centre.
    - Theresa highlighted that some people were unaware of the Bellfield model.
7. **Proposed Hub at CCHC**
    - Proposal to create a community integrated care hub at CCHC was viewed positively.
    - Transport remains a concern, with the loss of DART journeys and the volunteer car scheme still in early stages.
8. **Petition Submission**
    - Theresa handed the petition with **676 signatures** to Scott Farmer.

Appendix 5

EQIA Initial Screening Document

Name of document:	Future model of Planned Bed Based Respite throughout Clackmannanshire & Stirling		
Type of Document			
Guidance ☐	Policy ☐	Procedure ☐	Other ☒
If other please detail	IJB Report with recommendations on the future model of Planned Bed Based Respite throughout Clackmannanshire & Stirling		
Scope			
FV Wide ☐	Service Specific ☐	Discipline Specific ☒	Other ☐
If other please detail			
Is this a new document being EQIA'd			
Yes	☒	No	☐
Briefly describe the Aims and Objective of the document			
To set out recommendations on the Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling that have been developed by the HSCP working group and informed via consultation with service users and wider stakeholders.			
Does the evaluation completed identify a potential negative/ adverse or differential impact on the following protected characteristics: - age, disability, gender reassignment, marriage and civil partnership (eliminating discrimination only), pregnancy and maternity, race/ethnicity, religion/belief, Sex (Male/female) Sexual Orientation in relation to the Equality Act 2010 - General Duty to: • Eliminate Discrimination • Advance equality of opportunity • Foster good relations Please indicate your decision below			
☒	Yes - potential discrimination identified for 1 or more protected characteristics (Note: a general SIA will therefore need to be completed indicating what areas are of concern and require to be addressed)		
☐	No impact/discrimination identified		

I agree that the details within the enclosed evaluation are a true reflection of the assessment completed and that the above policy/function/service does ~~not~~ potentially have a significant impact upon equality issues and therefore does ~~not~~ require a Standard Impact Assessment.

Signature and Date
David Niven 11 May 26

Equality Impact Assessment Process

Equality & Diversity Impact Assessment

Guidance on how to complete an EQIA can be found here:

https://www.equalityhumanrights.com/en/advice-and-guidance/guidance-scottish-public-authorities

and here

https://www.equalityhumanrights.com/en/advice-and-guidance/coronavirus-covid-19-and-equality-duty

Q1: Name of EQIA being completed i.e. name of policy, function etc.

Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling

Q1 a; Function ☐ **Guidance** ☐ **Policy** ☐ **Project** ☒ **Protocol** ☐ **Service** ☐ **Other, please detail** ☐

Q2: What is the scope of this SIA

Service Specific	☐	Discipline Specific	☒	Other (Please Detail)	☐

Q3: Is this a new development? (see Q1)

Yes ☐ No ☒

Q4: If no to Q3 what is it replacing?

If approved by the IJB, this would replace the current model of planned bed based respite across Clackmannanshire and Stirling.

Q5: Team responsible for carrying out the Standard Impact Assessment? (please list)

HSCP Transformation

Q6: Main person completing EQIA's contact details

Name:	David Niven	Telephone Number:	
Department:	HSCP Transformation	Email:	nivend@stirling.gov.uk

Q7: Describe the main aims, objective and intended outcomes

Aim: To set out recommendations to the IJB on the Future Model of Planned Bed Based Respite throughout Clackmannanshire & Stirling. The recommendations have been developed by the HSCP working group, informed by a period of engagement in the form of consultation with service users and wider stakeholders, and approved by HSCP SLT.

Objectives: To develop a set of options for the future model that could be consulted upon. To carry out a six-week consultation period that would further inform the options before approval by the HSCP SLT and generation of recommendations on a future model to the IJB. To plan for and implement any approved future model.

Outcomes: The intended outcome of the future model is to support carers to exercise choice and control in their accessing of short breaks and to increase the provision and ease of access to bed-based respite for those with an assessed need across Clackmannanshire & Stirling. This is in line with the necessary implementation of the C&S Short Breaks Service Statement approved by the IJB in March 2025.

Q8:
(i) Who is intended to benefit from the function/service development/other (Q1) – is it staff, service users or both?

Staff	Service Users	Other	Please identify
☐	☒		Providers, third sector, independent sector

(ii) Have they been involved in the development of the function/service development/other?
Yes ☒ No ☐

(iii) If yes, who was involved and how were they involved? If no, is there a reason for this action?

A six week period of engagement in the form of consultation was carried out between 1st October 2025 to 12th November 2025. This consultation included in person and online meetings for service users and wider stakeholders to attend and share their views. An online survey was also available throughout the consultation period.

(iv) Please include any evidence or relevant information that has influenced the decisions contained in this SIA; (this could include demographic profiles; audits; research; published evidence; health needs assessment; work based on national guidance or legislative requirements etc)

Comments:

Q9: When looking at the impact on the equality groups, you must consider the following points in accordance with General Duty of the Equality Act 2010 see below:

In summary, those subject to the Equality Duty must have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation;
- advance equality of opportunity between different groups; and
- foster good relations between different groups

Has your assessment been able to demonstrate the following: Positive Impact, Negative / Adverse Impact or Neutral Impact?

What impact has your review had on the following 'protected characteristics':	**Positive**	**Adverse/ Negative**	**Neutral**	**Comments** **Provide any evidence that supports your conclusion/answer for evaluating the impact as being positive, negative or neutral (do not leave this area blank)**
Age	x			If approved, the proposed model would offer a wider range of short breaks options

				for carers and cared for people via enhanced short breaks budgets being available, which in turn could support a wider age range of people to access short breaks that meet their assessed needs and their preferences. It is therefore anticipated that there will be a positive impact.
Disability (incl. physical/ sensory problems, learning difficulties, communication needs; cognitive impairment)	x			The proposed model would offer a greater range of options to carers and cared for people on the type of respite/short break they would like to access. It would also offer more flexibility of location for planned bed based respite than currently exists, supporting carers and cared for people to more easily exercise choice and control when accessing short breaks /respite. In addition, it would support an overall increase in provision of respite and short breaks. It is therefore anticipated that there will be a positive impact.
Gender Reassignment			x	It is anticipated that there will be a neutral impact.
Marriage and Civil partnership			x	It is anticipated that there will be a neutral impact.
Pregnancy and Maternity			X	It is anticipated that there will be a neutral impact.
Race/Ethnicity			X	It is anticipated that there will be a neutral impact.
Religion/Faith			X	It is anticipated that there will be a neutral impact.
Sex/Gender (male/female)			X	It is anticipated that there will be a neutral impact.
Sexual orientation			X	It is anticipated that there will be a neutral impact.
Staff (This could include details of staff training completed or required in relation to service delivery)		x		If approved, the model proposes the retention of staff through redeployment throughout Clackmannanshire Council in general with the additional facility that any

				vacancies arising in either the Clacks Reablement Team or Clacks MECS (Mobile Emergency Care Team) during May and June 26 will be held back and ring fenced for Ludgate House beds staff should the IJB approve the proposal to decommission the Ludgate beds service at their meeting on 24 Jun 26. It is noted however that these may not be suitable alternatives for all staff and that there is a risk of a negative impact.

Cross cutting issues: Included are some areas for consideration. Please delete or add fields as appropriate. Further areas to consider in Appendix B				
Unpaid Carers	x			If approved, the model should provide more bed based respite available to unpaid carers with an assessed need. There should be more flexible options open to unpaid carers around the types of short breaks/respite they wish to access, enabling them to exercise choice and control.
Homeless			X	It is anticipated that there will be a neutral impact.
Language/ Social Origins			X	It is anticipated that there will be a neutral impact.
Literacy			X	It is anticipated that there will be a neutral impact.
Low income/poverty			X	It is anticipated that there will be a neutral impact.
Mental Health Problems			X	It is anticipated that there will be a neutral impact.
Rural Areas	x			If approved the proposed model should support planned bed based respite to be offered from a wider range of locations across C&S than is currently available. It should also offer more flexibility in the type of short break available to carers, supporting them to access the service in a way that best suits their needs and circumstances. It is therefore anticipated that there will be a positive impact.

Armed Services Veterans, Reservists and former Members of the Reserve Forces			X	It is anticipated that there will be a neutral impact.
Third Sector			X	It is anticipated that there will be a neutral impact.
Independent Sector	x			If approved, the model would require an increase in commissioning of bed based respite from the independent sector.

Q10: If actions are required to address changes, please attach your action plan to this document. Action plan attached?

Yes ☐ No ☒

Date EQIA Completed	11 / 05 / 2026		
Date of next EQIA Review	11 / 05 / 2027		
Signature	David Niven	Print Name	David Niven
Department or Service	HSCP Transformation		

Please keep a completed copy of this template for your own records and attach to any appropriate tools as a record of SIA or EQIA completed. Send copy to: fv.clackmannanshirestirling.hscp@nhs.scot

Equality & Diversity Impact Assessment Action Plan

Name of document being EQIA'd:

Date	Issue	Action Required	Lead (Name, title, and contact details)	Timescale	Resource Implications	Comments

Further Notes:

Signed: Date:

DIRECTION FROM CLACKMANNANSHIRE & STIRLING INTEGRATION JOINT BOARD

Reference Number	CSIJB- 2026_27/001
Does this direction supersede, vary or revoke an existing direction? If yes please provide reference number of existing direction	No N/A
Approval Date	24 June 2026
Services / functions covered	Carers Short Breaks and Planned Bed Based Respite throughout Clackmannanshire & Stirling
Full text of Direction	Implement the recommended future model of planned bed based respite throughout Clackmannanshire & Stirling to deliver a carer centred approach to short breaks and respite that provides greater choice and control for carers and supported people, while maintaining access to bed based respite for those with assessed need. 1) Decommission the current approach to bed based respite throughout Clackmannanshire & Stirling including decommissioning the 4 residential respite beds and the 6 short stay assessment beds at Ludgate House. 2) Commission a total of 6 nursing care level respite beds from the local independent care home sector for year-round use (3 in Stirling and 3 in Clackmannanshire). 3) Increase the Carers Short Breaks Budget in Clackmannanshire from £65k/year to £200k/year in 2026/27 funded by a share of the expected savings from commissioning changes in Clackmannanshire. 4) Realise circa £795k/year of recurring annual savings from 2027/28 onwards from commissioning changes in Clackmannanshire.
List of key stakeholders impacted and any specific engagement and consultation requirements	Strategic Planning Group consulted Weds 17 June 2026. Stakeholders impacted: Carers and supported people with assessed need, and Ludgate beds staff. Broad consultation carried out 1 Oct to 12 Nov 2025, and ongoing with staff and carers with assessed need.
Timescale(s) for Delivery	From Thurs 25 Jun 2026 to 31 Mar 2027
Direction to	Clackmannanshire Council Stirling Council
Link to relevant IJB report(s)	To be inserted after IJB
Budget / finances allocated	Delivered within existing resources
Performance Measures	See Section 6.4 of Report and HSCP Performance Framework
Date direction will be reviewed	Apr 2027 and Annually thereafter.