



Day Services for Adults



A Report from Overview & Scrutiny





Contents

Preface	3
Summary	4
1.1 Background	4
1.2 Methodology	7
1.3 Conclusions	7
Summary of Recommendations	10
2 Terms of Reference	15
2.1 Reasons for the Review	15
2.2 The Committee and its Terms of Reference	15
2.3 Methodology	16
3 The National Context	17
3.1 Introduction	17
3.2 National Policy and Guidance (General)	17
3.3 Physical Disabilities	19
3.4 Older People	20
3.5 Learning Disabilities	21
4 Evidence from Key Players	23
4.1 Introduction	23
4.2 Social Care and Health Directorate	23
4.3 Voluntary Sector	34
4.4 Health Service	36
4.5 City Council Departments	36
4.6 Other Key Players	38
5 Description of Current Service Provision	40
5.1 Introduction	40
5.2 Physical Disabilities	40
5.3 Older People	43
5.4 Learning Disabilities	45



Day Services for Adults

6	Findings – General	48
6.1	Introduction	48
6.2	Findings – All User Groups	48
6.3	Findings – Physical Disability	53
6.4	Findings – Older People	54
6.5	Findings – Learning Disability	56
7	Conclusions and Recommendations	58
7.1	Conclusions and Recommendations – General	58
7.2	Conclusions and Recommendations – Physical Disability	63
7.3	Conclusions and Recommendations – Physical /Learning Disability	64
7.4	Conclusions and Recommendations – Older People	65
7.5	Conclusions and Recommendations – Learning Disability	65
7.6	Conclusions and Recommendations –Tracking	66
	Appendix 1: Review Pro-forma	67
	Review of Citywide Day Care Services for Adults	67
	Appendix 2: Glossary of Terms	71
	Appendix 3 Bibliography	73

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Preface

by Councillor Len Clark

City day services are a vital lifeline for many users, their families and carers. Yet their importance has not been well reflected in the way services are currently presented and delivered in Birmingham. This review enabled us to recognise the various shortcomings and deficiencies in service provision, while also being cognitive of the considerable potential there is in Birmingham to develop socially inclusive and user centred services.



This review has been comprehensive and strategic in its approach to addressing the future needs of a wide constituency of people, namely older people, people with physical and learning disabilities and as importantly their carers. We took into account national perspectives and policy directives with regard to how services are evolving; we adopted a strategic view of modernisation in line with the development of Special Care and Extra Care centres and the recently completed commissioning strategies; and considered a range of external agencies, partners and possibilities for developing services that are more appropriate to user needs.

The result is a review report which recognises that whilst most Day Services are generally under-resourced, current provision and resources could be more effectively managed and delivered. This inconsistency was reflected in the very framework and ethos of current service provision, with many services being delivered through tired, run down and inappropriate buildings. Most services appear to be delivered to fixed and rigid schedules which in most instances are not sufficiently flexible or suitable for users and carers. This organisational model presents a serious constraint to the future development of a modern service. This report's conclusions and recommendations are critical of previous assumptions of how services have been provided and challenge the Adults and Communities Directorate to find more appropriate and creative solutions to meeting future needs.

Our recommendations seek to engage and harness other Directorates within the City Council, as well as envisioning an increased role for the voluntary sector in providing well-being services and building on the valuable contribution that carers already make, to ensure older people and people with physical and learning disabilities are supported within their communities as fully participating citizens.

Critical to the development of modern day services across the city is the development of partnerships with the independent and voluntary sector and their specific contribution to the well-being agenda. I am thankful to Age Concern Birmingham and Mencap for their contribution to this review.

I wish to conclude by expressing my gratitude to the Members of the Review Group who engaged in lengthy meetings to receive reports, Officer presentations, and undertook numerous day-long visits to various day centres and for contributing objectively and forthrightly to the review process and the resulting conclusions and recommendations in this report. The review team unanimously agreed the conclusions and recommendations contained within this report. I would also like to thank officers from a range of Directorates in Birmingham City Council, the Scrutiny Office and Committee Services for their support.



Summary

1.1 Background

- 1.1.1 The recently completed commissioning strategies have clearly outlined the future direction of Social Care services in Birmingham, and day services need to be altered to reflect the priorities of promoting independence, well-being and choice. With an increasing move towards providing effective support in the community to prevent admission to long-term care, day services are increasingly recognised as a crucial element in maintaining people's independence. As part of this review process, a review of day services for people with mental health needs was reported to the City Council in February 2006. This review provides clear ideas about how services need to integrate coherently with the totality of the commissioning strategies and service redesign.
- 1.1.2 Social Care and Health has plans to improve many of its services through a focus on outcomes. This is part of the City Council's wider drive to provide excellent services; through the development of alternatives to residential care such as Extra Care and Special Care Centres for example. Day services need to be improved and strengthened in a similar way; as outcome focused services. Improvements in day services will need to be driven by the directorate, as unlike residential or domiciliary services day services are not subject to national inspection or minimum standards.
- 1.1.3 Services in Birmingham also need to change in order to reflect national policy, particularly the recent White Paper "Our Health, Our Care, Our Say," which requires Local Authorities to work more closely with partners including service users, their carers, Health colleagues and the Voluntary Sector to provide more responsive, flexible and innovative services.
- 1.1.4 Further, Birmingham's demographic profile is changing and services need to be able to respond to this. According to the 2001 Census, Birmingham's total population is 977,087. The Commissioning Strategies for Physical Disabilities, Older People and Learning Disabilities provide statistical data that is a useful measure of the possible demand on Social Care and Health services; these are detailed below:

Physical Disabilities

- 1.1.5 The Census 2001 identifies 578,865 people in Birmingham as being aged 18-64 years. Of the city's working age population (men aged 16-64, women aged 16-59) 16% describe themselves as having a limiting long-term illness. There is a concentration in certain wards across the city; for example: Hodge Hill, Ladywood and Erdington – where areas are characterized by poverty, deprivation, poor quality housing and larger numbers of people with



a disability (2001 Census). This is born out by the Health Survey for England 2001 with 18% (104,195 people) of the city's population aged 18 – 64 having at least one disability and 5.0% (28,943 people) having a serious disability.

- 1.1.6 Of the city's population 54,200 (5.4%) receive Disability Living Allowance. This is non-contributory; non-means tested and tax free contribution towards the disability-related extra costs of severely disabled people who claim help with those costs before the age of 65. (Department of Work and Pensions website May 2005).
- 1.1.7 The incidence of disabling conditions remains relatively stable though people with multiple and complex needs are living longer and there is a greater incidence of some conditions in specific black and ethnic minority communities.

Older People

- 1.1.8 The strategy for future service development has to take full account of the projected demographic changes over the next decade. Somewhat surprisingly, the absolute numbers of older people in Birmingham are not projected to grow as fast as in most other parts of the country. However, it is estimated that the number of people over 85 will rise by 50% over the next twenty years.
- 1.1.9 It is the numbers in late middle age which will see the greatest increase over the next decade. It is, therefore, imperative that the next few years are used to re-configure services before this population bulge reaches old age.

Age groups	2003	2006	2012	2016	2022
50–64 years	141,600	141,400	146,800	158,100	175,700
65–74 years	72,700	70,000	69,400	70,600	70,700
75–79 years	28,900	28,200	27,400	27,400	29,000
80–84 years	22,400	21,100	20,700	20,700	21,000
85+ years	16,600	18,800	20,900	22,100	24,400
Total 50–85+	282,200	279,500	285,200	298,900	320,800
All ages	992,100	1,004,600	1,034,300	1,055,600	1,086,400



Day Services for Adults

Learning Disabilities

- 1.1.10 According to 'Valuing People' (2001) we would currently estimate a total of 25,115 people in Birmingham with a mild or moderate learning disability with 4,018 with a severe or profound learning disability (based on 2006 projection from Nov. 2004 ONS (Office of National Statistics) sub-national population projections - 2003 base). The strategy for future service developments has to be based on likely changes to the population of people with learning disabilities over the next ten years. There will be a sustained growth of people aged 15yrs+ likely to be known to learning disabilities services of 14%, over decades 2001-2021, to an estimated figure of 4,173 (based on 2001 base rates compared to ethnicity and mortality adjusted rates - Estimating Future Need/Demand for Supports for Adults with Learning Disabilities in England. Emerson & Hatton, 2004).

Reason for the Review

- 1.1.11 It is evident from these figures that there will be an increasing number of older people and people with a learning disability requiring care and support from the Social Care and Health Directorate. Any modernisation or remodelling of services must take into account the changing demographic picture in Birmingham.
- 1.1.12 Against this backdrop, the Social Care Overview and Scrutiny Committee set out to undertake a review of day services. The Committee recognised that this review would be highly challenging but essential to bring about better outcomes for service users and their carers through improved day services.
- 1.1.13 At the beginning of the review, the Committee agreed that the purpose of the review was to consider whether current services need to be reconfigured to more appropriately meet the assessed needs of service users. The objectives set were:
- To consider assessed needs of those attending 'traditional' day centres for rehabilitation, respite or social reasons.
 - To consider assessed needs of those who need day services but do not attend traditional day centres.
 - To consider best use of resources e.g. staff, buildings and finances.
 - To consider partnership with voluntary organisations, Health, Learning and Culture, Housing, Leisure and employment services in service delivery.
 - To consider community alternatives needed to give choice and flexibility in meeting assessed need.
- 1.1.14 It became apparent during the early stages of the review that there were serious limitations to the nature and range of day services provided and Members set out to focus on exploring



the limitations of current day services and to identify ways of bringing about positive changes to service provision.

1.2 Methodology

- 1.2.1 The Committee adopted a range of evidence gathering techniques to ensure that it had the most up to date information about day services. These included receiving evidence from key officers from within Social Care and Health and other Directorates including Development and Local Services. The Committee also engaged with key partners including Health colleagues, the Connexions service and Voluntary Sector partners including Age Concern Birmingham and Birmingham Mencap. Members wish to express their thanks to those who gave evidence to the Review Group.
- 1.2.2 In addition, Members undertook an extensive series of visits to day services within the city. These provided an opportunity for Members to witness day services first hand. Members saw for themselves that services are failing to meet the needs of many service users and carers and that the buildings and facilities in which services are based are often inadequate. There are also huge issues in terms of capital investment and human resources. Members also undertook a visit to view services provided by Shropshire Social Care Department as they are keen to learn from other Local Authorities. Shropshire Council is recognised by the Department of Health as having gone some way to modernising its day provision for adults with learning disabilities. Members observed an innovative community based model of service provision in Shropshire.
- 1.2.3 This report was completed before the Adults and Communities Directorate came into being in April 2006. While all references in the report are to the Social Care and Health Directorate, the recommendations, where appropriate, refer to the Cabinet Member with responsibility for the Adults and Communities Directorate.

1.3 Conclusions

- 1.3.1 The Review Group found that many day services are failing to meet the needs of many service users and carers and as a result the findings from this review are mainly negative. However, there are those service users and carers who have used day services for many years and do not wish services to change or to consider alternatives to traditional day services. Members did find some limited pockets of good practice and these are acknowledged in the body of the report and within the recommendations. However, the general findings of the Committee are:



Day Services for Adults

- Day Services in Birmingham have been starved of resources for many years. The lack of resources is evident in the state of many of the day centre buildings; indeed some require urgent renovation or even demolition. Service users should not have to use buildings that are not fit for purpose.
- Social Care and Health must take urgent steps to modernise and improve current day service provision which is traditional, inflexible and failing many users and carers. Services must all promote independence, choice and well-being rather than creating dependency.
- Services need to be developed to meet the needs of current and future users. For some users and carers they are content to continue receiving day services in their current form but Members heard that some service users are reluctant to use traditional day “care” services. Services in their current form do not meet these needs and therefore there must be an urgent remodelling of services. There needs to be a clear vision for day services that is deliverable and contained within the commissioning strategies.
- The Directorate must work more closely with the voluntary sector to develop alternatives to current traditional day services, to enhance their current day services and in the provision of well-being services. Adequate financial arrangements must be in place to support voluntary sector and community organisations.
- Day services need to be subject to more stringent operational and strategic management. Current management arrangements will not lead to service improvements.
- Transport arrangements are inadequate, foster dependency and need to be urgently reviewed. The Directorate is not making effective use of its transport resources.
- Charging arrangements are not equitable across service user groups and this must be addressed through a review of the Fairer Charging policy.
- Users and Carers must be engaged in meaningful discussions about the future of day services. There needs to be mechanisms in place for ongoing dialogue with users and carers.
- Well-being services have not been given sufficient attention. Discussion about the development of well-being services has taken place in a policy vacuum. The resources and infrastructure to support these developments does not yet exist. Districts are, not yet fully engaged with the well-being agenda and this must be urgently addressed through District Partnership arrangements and Local Area Agreements. In order for progress to be made in this area, priority must be given to developing a delivery model for well-being services.
- Employment and Training opportunities need to be expanded to provide real choice and promote independence. Services need to be more closely linked in order to ensure service users receive the best service possible and can access relevant training and employment opportunities.
- The Committee recognise that although there are some examples of good practice within day services, there are considerable challenges and scope for improvement. Where there are positive examples of innovative alternatives to day services these have not been



developed further or replicated e.g. Community Options, Share Options and the Matchbox Cafe

- 1.3.2 This review and its findings are challenging and Members believe that Social Care and Health will need to make some radical and difficult decisions about the future of its day services. The future shape of day services is not an issue that can be left to drift any further and the Directorate is asked to take urgent action to address the findings of this review.



Summary of Recommendations

	Recommendation FOR ALL SERVICE USER GROUPS (Recommendations 1– 14)	Responsibility	Completion Date
R1	That a plan and schedule must be produced outlining the remodelling of services to make them more person-centred, flexible and fully integrated into the community. This remodelling must challenge the basic premise of day services, looking at key issues including opening hours/days, activities, staffing arrangements and focus on service users needs with a view to modernising and improving services.	Cabinet Member for Adults and Communities	The plan and schedule to be produced by October 2006. There must be substantial service re-modelling beginning in July 2009 and to be completed by July 2011.
R2	That the systems of measuring capacity and occupancy at day centres are reviewed to provide robust and auditable statistics about performance with a focus on outcomes. A full review of all client groups to be carried out with a view to: • Developing robust outcome focused reporting systems. • Plans to have an outcome focus so where possible they meet the re-enablement needs of all current service users. • A focus for all new clients to be on outcomes.	Cabinet Member for Adults and Communities	March 2007
R3	That a person-centred approach to assessment/ reassessment and care planning is adopted for all service users referred for, or currently receiving day services, and that all options are considered and result in care plans with clear objectives and timescales.	Cabinet Member for Adults and Communities	May 2007
R4	That for those with complex needs, specialist day services should be commissioned in-house or from specialist agencies with the aim of improving an individual's capacity for independent living or provide short breaks for carers. Where appropriate partnerships should be developed with Health and the voluntary sector.	Cabinet Member for Adults and Communities	June 2007



	Recommendation FOR ALL SERVICE USER GROUPS (Recommendations 1- 14)	Responsibility	Completion Date
R5	That the new Adults and Communities Directorate engage properly with the voluntary sector to develop quality alternative services and that voluntary sector providers are given sufficient financial support to allow them to maintain, plan and develop these e.g. secure three year financial agreements. This must involve a move away from existing grant aid arrangements to Service Level Agreements that are functional, specific and measurable.	Cabinet Member for Adults and Communities	November 2006
R6	That the new Adult and Communities Directorate put in place effective strategic and operational management arrangements for services to include monitoring of performance and professional engagement with partners through effective joint commissioning arrangements.	Cabinet Member for Adults and Communities	December 2006
R7	That the recommendations from this review be adopted and integrated into the commissioning strategies implementation plans for older people, learning disabilities, physical disabilities and carers, financial planning and resource allocation.	Cabinet Member for Adults and Communities	December 2006
R8	That the re-provision of services include reviewing arrangements with trading services (and other contracted services such as transport) in order to maximise opportunities for service users to develop independent skills and competencies, through training and employment opportunities. Consideration should be given to developing social enterprises as a means of providing training and employment opportunities.	Cabinet Member for Adults and Communities and Cabinet Member for Local Services and Community Safety	April 2007
R9	That a review of direct Adults and Communities Directorate transport provision be undertaken to ensure that transport facilities are appropriate and necessary and provided for users, in the context of issues like mobility, promoting independence and value for money. This review must include consideration of the utilisation of Ring and Ride and the expansion of travel training.	Cabinet Member for Adults and Communities	December 2006
R10	That a review of Fairer Charging be conducted to ensure that the level and scope of fees for people using day services are appropriate and in accordance with principles of equality and fairness.	Cabinet Member for Adults and Communities	December 2006



Day Services for Adults

	Recommendation FOR ALL SERVICE USER GROUPS (Recommendations 1 – 14)	Responsibility	Completion Date
R11	That the Adults and Communities Directorate implement a framework to enable joint commissioning boards and reference groups to engage systematically with and consult users and carers in the development and planning of services.	Cabinet Member for Adults and Communities	October 2006
R12	That the Adults and Communities Directorate actively promote Direct Payments as an alternative to directly provided day services as part of offering independence and choice to service users. A progress report on Direct Payments must be produced and reported to the Social Care Overview and Scrutiny Committee.	Cabinet Member for Adults and Communities	October 2006
R13	That in the context of the Adults White Paper and the Adult Commissioning Strategies, the Adults and Communities Directorate must accelerate the development of a delivery model for well-being services. The model must include how Districts will engage and manage the well-being agenda.	Cabinet Member for Adults and Communities and Cabinet Member for Local Services and Community Safety	October 2006
R14	That given the extensive nature of this report, a strategic change team is established to provide the capacity and direction needed to implement the recommendations put before the City Council.	Cabinet Member for Adults and Communities	October 2006

	Recommendation FOR PHYSICAL DISABILITY SERVICES (Recommendations 15 – 16)	Responsibility	Completion Date
R15	That the use of Adults and Communities Directorate buildings be extended to provide more clearly defined and flexible services; an action plan must be produced to show how this will be achieved.	Cabinet Member for Adults and Communities	December 2006
R16	That the capacity of the Share Options Service be developed to ensure the provision of day and evening services that meets the diverse needs of service users.	Cabinet Member for Adults and Communities	December 2006



	Recommendation FOR LEARNING DISABILITY AND PHYSICAL DISABILITY SERVICES (Recommendations 17 – 18)	Responsibility	Completion Date
R17	That a joint evaluation of whether the Disability Employment Service (Regeneration portfolio) is appropriately sited within the City Council is carried out. It is the view of Scrutiny that this service should be considered as an integral part of the Community Options Service and strategically directed to assist in the accomplishment of the Adults and Communities Directorate's objectives.	Cabinet Member for Adults and Communities and Cabinet Member for Regeneration	October 2006* *while the evaluation may commence in October 2006, we recognise that it may not necessarily be completed in the same month.
R18	That an effective employment pathway be created with the Disability Employment Service (Regeneration), Community Options, Share Options and other employment related agencies to ensure people with learning and physical disabilities are actively targeted and supported to access education, training, paid and voluntary employment opportunities.	Cabinet Member for Adults and Communities and Cabinet Member for Regeneration	December 2006

	Recommendation FOR OLDER PEOPLE'S SERVICES (Recommendation 19)	Responsibility	Completion Date
R19	That in light of Recommendation 1, day services are remodelled alongside the development of Special Care Centres and Extra Care Sheltered Housing. Remodelling needs to address the purpose of day services i.e. rehabilitative, respite and social dimensions.	Cabinet Member for Adults and Communities	December 2006



Day Services for Adults

	Recommendations FOR LEARNING DISABILITY SERVICES (Recommendations 20 – 21)	Responsibility	Completion Date
R20	That in partnership with the Voluntary Sector and Health, the Adults and Communities Directorate establish a flagship model of service as part of the re-provision of existing day services. Users, carers and staff to be fully engaged in the remodelling of services.	Cabinet Member for Adults and Communities	June 2008
R21	That the excellent model currently in place at Community Options be developed further and expanded across the city and to other service user groups.	Cabinet Member for Adults and Communities	December 2006

	Tracking of Recommendations (R22)	Responsibility	Completion Date
R22	That progress towards achievement of these recommendations be reported to the Social Care Overview and Scrutiny Committee in January 2007. Subsequent progress reports will be scheduled by the Committee thereafter, until all recommendations are implemented.	Cabinet Member for Adults and Communities	January 2007



2 Terms of Reference

2.1 Reasons for the Review

- 2.1.1 The recently completed commissioning strategies have clearly outlined the future direction of Social Care services in Birmingham, and day services need to be altered to reflect the priorities of promoting independence, well-being and choice. With an increasing move towards providing effective care in the community to prevent admission to long-term care, day services are increasingly recognised as a crucial element in maintaining people's independence.
- 2.1.2 Social Care and Health has plans to improve many of its services particularly through the development of alternatives to residential care such as the development of Extra Care and Special Care Centres; day services need to be improved and strengthened in a similar way.
- 2.1.3 Services also need to change in order to reflect national policy, particularly the recent White Paper "Our Health, Our Care, Our Say" which requires Local Authorities to work more closely with partners including service users, their carers, Health colleagues and the Voluntary Sector to provide more responsive, flexible, innovative services.
- 2.1.4 In response to these local and national changes, the Social Care Overview and Scrutiny Committee decided to undertake a review into day services particularly as they have not been subject to a comprehensive strategic review for many years.

2.2 The Committee and its Terms of Reference

- 2.2.1 The terms of reference for the review were agreed by the Co-ordinating Overview and Scrutiny Review in March 2005 and are attached as Appendix 1. As part of this review process, the review of day services for people with mental health needs was reported to City Council in February 2006.
- 2.2.2 The review was carried out by a Working Group of Councillors serving on the Social Care Overview and Scrutiny Committee. Membership of the Working Group altered during the course of the review, those Members that worked on the review were:
 - Councillor Len Clark (Chairman)
 - Councillor Abdul Aziz
 - Councillor Margaret Byrne
 - Councillor Susan Burfoot
 - Councillor Barbara Dring
 - Councillor Bill Evans



Day Services for Adults

- Councillor Dilawar Khan
- Councillor Jim Whorwood

2.2.3 The Members were supported by Officers from Social Care and Health, particularly Steve Wise, Deb Wilkes, Simon Fenton, Heather Holmes and Sally Botteley. Natalie Borman, Scrutiny Manager, who was Lead Officer for this review, and was supported by Ajmal Hussain from the Scrutiny Office and Viv Smith from Committee Services.

2.2.4 A glossary of useful terms is included as Appendix 2 of this report.

2.3 Methodology

2.3.1 The Review Group utilised a range of evidence gathering techniques, including:

- Presentations from City Council Officers including numerous areas of Social Care and Health, Disability Employment Services (Regeneration) and Trading Services.
- Members visited day services and alternatives to day services in Birmingham that are provided by the City Council and by Voluntary Sector organisations. A visit was also made to learning disability day services in Shropshire as the Department of Health had identified Shropshire as having made progress on the modernisation of day services.
- Mencap and Age Concern Birmingham provided a perspective from the voluntary sector.
- Discussions with key partners including Primary Care Trusts, Birmingham and Solihull Mental Health Trust and Connexions.
- At the inception of the review, the Chairman wrote to all in-house day centres in the City to inform them of the review and provided all day centres with information to display in their public areas about how staff, users and carers could engage with the review.
- Members of the review team attended some of the consultation meetings about the Learning Disability Commissioning Strategy which were held with users and carers of learning disability day services.
- At the start of the Review members were provided with an extensive information pack outlining Birmingham's current provision and key policy documents.



3 The National Context

3.1 Introduction

- 3.1.1 National policy and legislation influence the services that are provided by the Local Authority. For Social Care and Health there is a raft of legislation and policy guidance that requires the Directorate to provide specific services and increasingly to provide or signpost people to flexible services which promote independence, choice and facilitate effective cross-agency working. There is specific national policy, legislation and guidance which relates to the groups of people who this review considers, namely Physical Disability, Older People and Learning Disability. This section outlines the national context for all these groups.
- 3.1.2 The national agenda dictates that the modernisation of services, including day services must happen. The Committee has taken into account the emerging policy agenda when considering the evidence it received and in shaping its recommendations.

3.2 National Policy and Guidance (General)

- 3.2.1 All services provided to adults over the age of 18 are in accordance with the statutory responsibilities laid upon the Council principally by the National Assistance Act 1948, the Community Care Act 1992, and the Chronically Sick and Disabled Act 1970, together with relevant parts of other legislation. One of the most significant legislative requirements in relation to day services stems from the Chronically Sick and Disabled Persons Act 1970 (Para.2).

“(1) Where a Local Authority having functions under section 29 of the National Assistance Act 1948 are satisfied in the case of any person to whom that section applies who is ordinarily resident in their area that it is necessary in order to meet the needs of that person for that authority to make arrangements for all or any of the following matters, namely...

...(c) the provision for that person of lectures, games, outings or other recreational facilities outside his home or assistance to that person in taking advantage of educational facilities available to him;

(d) the provision for that person of facilities for, or assistance in, travelling to and from his home for the purpose of participating in any services provided under arrangements made by the authority under the said section 29 or, with the approval of the authority, in any services provided otherwise than as aforesaid which are similar to services which could be provided under such arrangements.”



Day Services for Adults

- 3.2.2 The 2005 Green Paper “Independence Well-Being and Choice” sets out proposals for the future direction of social care for all adults of all age groups. The vision for social care where:
- Services help maintain the independence of the individual by giving them greater choice and control over the way their needs are met;
 - The Local Authority and Director of Adult Social Services (DASS) have key strategic and leadership roles and work with a range of partners, including primary care trusts (PCTs) and the independent and voluntary sectors, to provide services which are well planned and integrated, make the most effective use of available resources, and meet the needs of a diverse community;
 - Local Authorities give high priority to the inclusion of all sections of the community, and other agencies, including the NHS, recognising their own contribution to this agenda;
 - Services are of high quality and delivered by a well-trained workforce or by informal and family carers who are themselves supported;
 - We make better use of technology to support people, and provide a wide range of supported housing options;
 - We provide services with an emphasis on preventing problems and ensure that social care and the NHS work on a shared agenda to help maintain the independence of individuals;
 - People with the highest needs receive the support and protection needed to ensure their own well-being and the safety of society;
 - The risks of independence for individuals are shared with them and balanced openly against benefits.
- 3.2.3 The subsequent White Paper “Our Health, Our Care, Our Say: A New Direction for Community Services” (Department of Health, 2006) set out practical steps aimed at turning the vision of the “Independence, Well-being and Choice” Green Paper into reality.
- 3.2.4 The White Paper requires Local Authorities to provide services within a statutory framework around 7 key outcomes:
- Improved health and well-being
 - Improved quality of life
 - Making a positive contribution
 - Choice and control
 - Freedom from discrimination
 - Economic well-being
 - Personal dignity
- 3.2.5 The White Paper sets out four main goals:
- Health and Social Care services will provide better prevention services with earlier intervention.



- People to be given more choice and a louder voice – enabling them convenient access to social and primary care that they can choose and influence.
- Do more on tackling inequalities and improving access to community services. Health and Social Care commissioners must work together to understand and address local inequalities.
- Provide more support for people with long-term needs to manage their conditions themselves with the right help from Health and Social Care services.

3.2.6 The White Paper sets out how improvements to Social Care and Health services will be achieved. The key mechanisms for achieving better services for adults are:

- Shifting resources into prevention; Health and Social Care will need to focus together on prevention and health promotion.
- More care undertaken outside hospitals and in the home. This will be partly achieved by creating a new generation of community hospitals and facilities with strong links to social care.
- Better joined up services at the local level; there will be more joint commissioning between Primary Care Trusts (PCTs) and Local Authorities.
- Encouraging innovation, this will be achieved through greater patient and user choice. In Social Care and Health, direct payments and individual budgets will result in more responsive services.
- Allowing different providers to compete for services.

3.3 Physical Disabilities

3.3.1 Services for physically disabled people have been shaped by Government policy. Two key drivers have been “Independence Matters” and the “National Service Framework (NSF) for Long-term Conditions.”

3.3.2 “Independence Matters – An overview of the performance of social care services for physically and sensory disabled people” was produced by the Social Services Inspectorate in 2003.

3.3.3 The Government’s agenda to modernise social services for disabled people was outlined in “Independence Matters” as aiming to:

- Help people to live as independently as possible and improve their quality of life;
- Create fairer, more consistent services;
- Develop services that respond to the expressed needs and aspirations of disabled people;
- Ensure that services fit the needs of individuals; and
- Maximise the control that people have over the services they receive.



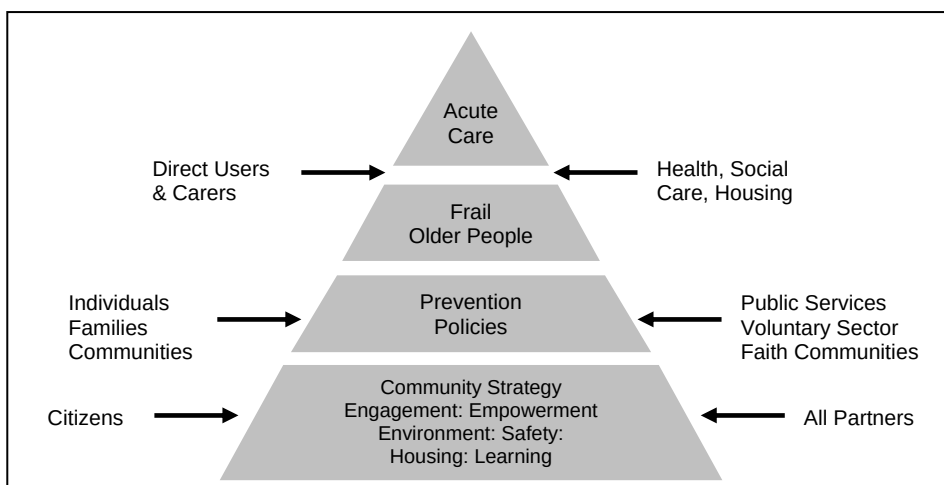
Day Services for Adults

- 3.3.4 “Independence Matters” made specific reference to day services and a “need to move away from a reliance on traditional day centres to providing more community-based activity”.
- 3.3.5 The document also set out key messages for the future of day services:
- Councils need to work with partners and disabled service users to develop a range of community-based day services linked to increased leisure, educational, training and employment opportunities.
 - Staff working with disabled people need to be skilled facilitators and enablers.
 - Councils need to work with partners to provide effective transport systems.
 - Councils need to recognise the contribution of advocacy services to achieving good outcomes for service users and ensure access to this support.
 - Councils should improve their performance as employers of disabled people and continue to pursue the Welfare to Work agenda.
- 3.3.6 The National Service Framework for Long-term Conditions” (Department of Health, 2005) also aims to transform the way Health and Social Care services support people to live with long-term neurological conditions. Key themes are independent living, care planned across the needs and choices of the individual, easier, timely access to services and joint working across all agencies.

3.4 Older People

- 3.4.1 Within Older Peoples’ Services a key document is “All our Tomorrows, Inverting the Triangle of Care” (Local Government Association and ADSS, 2003). The document states that we currently focus most resources for older people on those with the most severe needs (see fig 1).

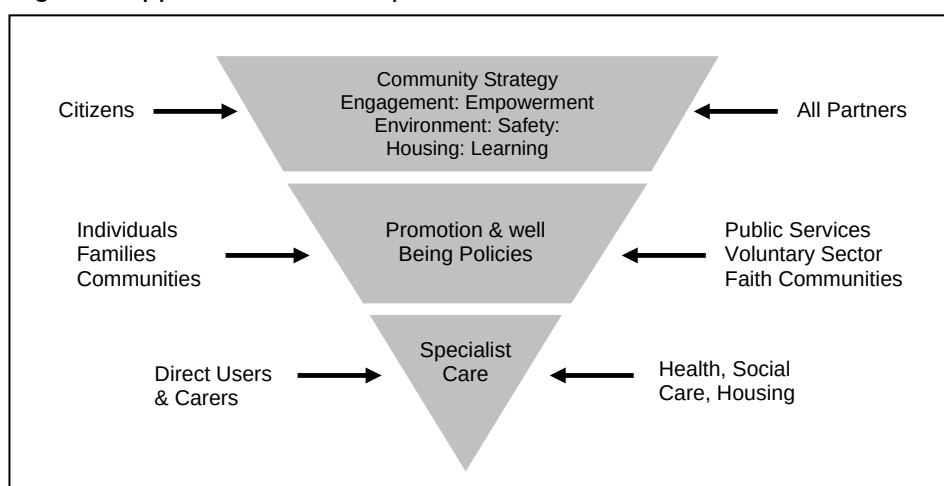
Fig 1 – Support for Older People Today





- 3.4.2 Future services need to reverse this trend by inverting the triangle (see Fig 2) so that the community strategy and promotion of well being of older people is at the top of the triangle and the extension of universal services for all older people is seen as crucial to all services.

Fig 2 – Support for Older People Tomorrow



3.5 Learning Disabilities

- 3.5.1 Learning Disability services have been shaped by national guidance, in particular the “Valuing People” White Paper (Department of Health, 2001).
- 3.5.2 The White Paper was written in 2001 and is the main policy driver for modernising services. It was the first white paper for people with learning disabilities for 30 years. The key principles underpinning “Valuing People” are:
- Developing real opportunities for independence
 - Offering increased choice in daily lives
 - Promoting full inclusion within society
 - Equal rights as citizens
- 3.5.3 Valuing People sets an objective for people with learning disabilities to live fulfilling lives:
- “To enable people with learning disabilities to lead full and purposeful lives within their community and to develop a range of friendships, activities and relationships.”
- 3.5.4 This objective requires a greater emphasis on individualised or person-centred and flexible services which will:
- Support people in developing their capacity to do what they want.
 - Help people develop social skills and the capacity to form friendships with a wider range of people.



Day Services for Adults

- Enable people to develop skills and enhance their employability.
- Help communities to welcome people with learning disabilities.

3.5.5 Valuing People has informed the Committee's perception about current and future day service provision and the direction in which services for people with learning disabilities must adapt and develop.



4 Evidence from Key Players

4.1 Introduction

- 4.1.1 Members undertook to receive evidence from a range of interested parties. Evidence was received from key staff from within the City Council including Social Care and Health, Trading Services (part of Local Services Directorate) and the Disability Employment Service (part of Development Directorate).
- 4.1.2 Evidence was also provided by external agencies including representatives of Birmingham Mencap, Age Concern Birmingham, Health colleagues and the Connexions Service.

4.2 Social Care and Health Directorate

- 4.2.1 The Committee received evidence from key people from the Social Care and Health Directorate; namely the three Strategic Commissioners, Area Directors and Managers from Adult Services.

Strategic Commissioners

- 4.2.2 Throughout the Review, the Committee received considerable evidence from the three Strategic Commissioners; one for learning disabilities, older people and physical disabilities. The Commissioners highlighted concerns about current provision and identified the future vision for day services. This section provides a summary of the evidence from the Strategic Commissioners.

Strategic Commissioner Physical Disabilities

- 4.2.3 There has been considerable improvement to services for people with physical disabilities in Birmingham. However, there is still scope for change. The Commissioner outlined the agenda for reconfiguring services as:
- No one “needs” a day centre, it is a service used to meet an assessed need but there are alternatives.
 - There needs to be a move away from institutionalisation to social inclusion.
 - There must be a commitment to the social model of disability.
 - There should be a move towards more inclusive, community based services.
 - There should be a move away from inflexibly timed, centre-based services to giving greater choice, flexibility and control; this includes increasing the number of Direct Payments provided in lieu of services.
 - A change in service delivery which will result in “independence” rather than “dependence”.
 - A shift from “service led provision” to “person centred planning”.



Day Services for Adults

- A change in transport arrangements away from taking people to day care to accessing community activities.
- Greater emphasis on employment, whether this be voluntary or paid.

4.2.4 The limitation of current services was also described. The key limitations are:

- Resources are scarce and day centres cater for only a small percentage of service users. They are not the first choice in meeting the needs of younger users.
- Day centres are not used to capacity – most are open for users for a limited part of the day with no flexibility.
- Services offered are not all part of Social Care and Health core business e.g. helping people to socialise.
- Unit costs are high.
- Transport arrangements create dependency and are expensive.

4.2.5 Service development must be based on the needs of users. Current users of service have needs falling into three main groups:

- Rehabilitation – those needing time limited rehabilitation with specific goals and exit strategy.
- Respite – those needing day respite to support carers.
- Social – those needing/wanting to socialise.

4.2.6 Members were advised that when considering current and future day services they should consider the following questions:

- Is the service promoting independence?
- Is it meeting assessed needs?
- How could diversification in the use of centres and partnership working better meet the needs of a greater number of people?
- Is the current service cost effective?
- What and how can alternative community services be developed in partnership to give more flexibility and choice to meet assessed need?

Strategic Commissioner Older People

4.2.7 The strategic commissioner for older people's services outlined some of the concerns regarding the current provision. There is no clear overall vision for day services. Current provision is almost entirely traditional and creates dependency. Occupancy of services is also unacceptably low.

4.2.8 There is no clear purpose outlined for day services. Currently there are a number of reasons why people attend building based services, ranging from social interaction to severe



depression. Others are attending primarily to give their carers a break. Only in a limited number of cases are people attending for rehabilitation as only St Stephen's currently offers this service.

- 4.2.9 Evidence about gaps in current service was also highlighted. To meet people's assessed needs a range of services should be offered. This should range from building based services targeted to meet different needs, community based services, services based in Extra Care Sheltered Housing and support in people's own homes.
- 4.2.10 For those with dementia there is a need for continuity of care to enable people to retain skills and to give respite for carers. For many the most appropriate respite is that offered in the person's own home whilst the carer is able to take a break. For those for whom this is not possible, a buildings based service with appropriately skilled staff would meet the need. Currently there are three such specialist services jointly funded between Social Care & Health and Birmingham and Solihull Mental Health Trust. The challenge is to meet this need in the rest of the city not covered by these centres and to offer a respite service at times appropriate to meet the needs of the carers, as provided by Edendale and Weatherdale Units.
- 4.2.11 Where people require a period of rehabilitation only St Stephens offers a time limited outcome-focussed service. For other areas in the city not covered by this centre rehabilitation services are needed.
- 4.2.12 The need for support for those with severe depression should be taken into consideration and planned for in any redesign of services.
- 4.2.13 The current location of day centres has been largely due to suitable accommodation and funds becoming available. The current spread and the geographical catchment area will need to be addressed in any redesign of services. An additional complication is that many of the day services are currently sited within Social Care Older People's Homes and with the planned closure of these homes the services will need to be relocated.
- 4.2.14 Social Care and Health have developed a Commissioning Strategy for Older People, which has a clear vision for future service delivery. It distinguishes between primary day care opportunities which enable older people to be fully involved in all mainstream social activities, possibly with the support of voluntary and community groups. Secondary day care, which will be delivered by the Directorate, in conjunction with Health, on a personalised basis and aimed at restoring people's capacity for independent living.
- 4.2.15 Part of the vision is working with others to develop more opportunities for older people to access mainstream services, with a transport strategy being an essential element. Increased partnership working with community and leisure services to support voluntary organisations



Day Services for Adults

to provide a range of day services including lunch clubs, preventative type services such as falls prevention and advice and support services.

- 4.2.16 A key requirement is engaging with Health to redesign current day services to focus on rehabilitation and respite care. In order to provide more specialist services there will need to be a review of staff skills, the staffing levels and the suitability of the building to meet the specialist need.
- 4.2.17 The planned development of Special Care Centres will also play a major role in the modernisation of day services; there will be a focus on those who are physically dependent receiving rehabilitation and those who are cognitively impaired rehabilitation receiving day respite.

Strategic Commissioner Learning Disabilities

- 4.2.18 The strategic lead for learning disability services clearly outlined the challenges facing learning disability day services. The current day provision was described as traditional, large centre-based, institutional and having limited opportunities. However, there was recognition that the current services do provide invaluable respite to carers.
- 4.2.19 Users of learning disability day services have a range of abilities, varying levels of dependency, personal care needs and transport requirements. Current services are trying to meet all of these needs within the day services.
- 4.2.20 When presenting service users views of day services, the commissioner stated that users want more choice and opportunities, more accessible services open 7 days a week, paid employment at proper rates of pay and the opportunity to meet new friends and develop relationships.
- 4.2.21 Also outlined were the barriers to improving services; these included:
- difficulties in releasing resources tied up in buildings and staff
 - slow development of links with other services including supported employment
 - tension between respite for families and providing fulfilling opportunities for the person
 - time constraints from following a person-centred approach to planning
- 4.2.22 The vision for future service delivery is outlined in a Joint Commissioning Strategy between Social Care and Health and the Primary Care Trusts; the vision is for people with a learning disability to :
- Determine for themselves where they live, how they are supported and how they spend their day.
 - Live, work, learn and participate in the community as equal members alongside the rest of the community.



- Have equality of access to community life and opportunities to build and sustain valued relationships.
- Have access to services which are person-centred, sustainable and promote dignity, safety and independence.

4.2.23 The Commissioner reported that to achieve a modernised service there needs to be a shift in the way services are managed, financed and delivered. The areas that will need to be focused upon in order to bring about modernisation were listed as:

- **Person-Centred Approach to Services**

This means taking an individualised approach to meeting the needs of service users rather than slotting users into services that already exist. This will require a shared understanding of person centred planning at all levels connected to the leadership and operation of day services.

- **Family Carers**

For many users, family carers are their main providers of care and support away from day services. In these instances, day services provide an essential respite, without which they may struggle to offer continued care and support. Day centres also offer families security and certainty and any attempts to modernise day services will have to continue to offer this. A modernisation programme will need to engage with families and carers throughout the modernisation process whilst recognising their needs in terms of day respite and security.

- **Community Capacity Building**

An underlying concern of modernising day services is that the community is not always welcoming to people with learning disabilities and many venues remain inaccessible. There would need to be a development of a partnership approach, particularly with the Districts and community groups.

- **Including Everyone in Modernised Day Opportunities**

All people with a learning disability are given an equal chance in the community regardless of what other needs / requirements they have including people with significant disabilities and health care requirements, from black and minority ethnic communities and with behaviour that challenge services.

- **Finance**

The modernisation of day opportunities will need to be supported by an effective finance strategy (covering capital and revenue) that will underpin person-centred and flexible services.



Day Services for Adults

- **Reprovision of Day Centres**

Many day centres operate in inappropriate buildings or are poorly located. The centres need to be reviewed and consideration given to options for reprovision. There are many current users of service that could be supported in alternative settings; this is demonstrated by the Community Options service (See 5.4.6).

- **Staffing**

The majority of staff are day centre based and some may have initial resistance to change. However their role will be crucial to any modernisation of service and some will require a programme of staff development. There will need to be engagement with staff and unions.

- **Transport**

Transport is outside the main scope of this review but consideration will need to be given to issues such as providing a flexible transport service, the length of time that people spend on transport and the impact of unreliable transport on users and family carers. Most crucially it needs to be acknowledged that the wrong transport policy can create dependency.

- 4.2.24 The Commissioner summarised his evidence on day services by informing the Committee that:
- “A modernised day service is much more than just improving the buildings in which the service operates. People want lifestyle opportunities that are based upon them being real and full members of their communities, with the opportunity to have jobs, go to college, meet friends, relax and enjoy themselves. It is important that we do not fall into the trap of creating smaller institutions and that we recognise that “community” is an experience not a location. We need to develop better ways of ensuring we measure outcomes for users. At the same time the genuine need of families to have support to get on with their own lives must be recognised.”

Assistant / Area Directors and Heads of Adult Services

- 4.2.25 Following on from the evidence that they had received about day services and their visits the Members highlighted strategic and operational management of day services as an area warranting further investigation.
- 4.2.26 The main issues of concern were:
- Who manages the day service managers?
 - Why have day services received so little attention?
 - Who ensures that good practice is disseminated to all day services?
 - What are the links between Adult Services and the Voluntary Sector?
- 4.2.27 Members reported that the impression given by many Day Centre Managers was that there were no effective management arrangements in place. There was a lack of a strategic focus



for service development. Also that where good practice was happening, other Day Centre Managers were not aware of this and therefore there appeared to be little shared learning. On the issue of day to day management of services, Members were told that there are management arrangements in place, including supervision and monthly meetings with day service staff.

- 4.2.28 The Area Heads of Adult Services outlined their roles which include responsibility for managing Day Centre Managers and staff. It was apparent that there were many other service priorities and that day services did not always get the attention warranted in terms of resources, service development and sharing best practice. Much of the Directorate's focus over recent years has been on the commissioning strategies, older people's services and Commission for Social Care Inspection assessments of Children's Services. However, all those giving evidence concurred that day services have been akin to a Cinderella service.
- 4.2.29 Members reported that there was considerable variation in the style and effectiveness of Day Centre Managers. Some were happy to continue providing the current traditional and seemingly inadequate model of day service whilst others had a more positive attitude and used their initiative to bring about change such as altering staffing patterns which ensured staff were available when users were present rather than waiting with apparently little to do before the users arrived. Those giving evidence agreed that improvements to services were often attributable to individual Centre Managers and much depended upon the competency and experience of the Centre Managers.
- 4.2.30 Members were informed that improvements to the service were often stifled by users and carers who had used day services for many years and did not readily accept change. Some were also reluctant to accept any service change.
- 4.2.31 It was reported that there is considerable variation in the relationships with the voluntary sector. One area had developed a voluntary sector forum which had led to more effective partnership arrangements. Members asked the views of those present about the difference between the in-house day services and voluntary sector provisions. There was recognition that the voluntary sector was expected to provide a professional service but was often resourced at lower levels than the in-house service. It was agreed that more detailed service level agreements would improve the commissioning of services from the voluntary sector and improve the quality of services provided. Joint-working arrangements with Health also need to be strengthened.
- 4.2.32 Members also asked whether in-house services were being under utilised and unnecessary referrals were being made to the external sector. Those present said that this was not the case as only the Heart of Birmingham had made external placements in the last 12 months.



Day Services for Adults

Whilst there is under-occupancy in learning disability day services this was attributed to making use of more appropriate community resources.

- 4.2.33 Members were advised that new senior management arrangements were to be introduced. Under the new arrangements, senior managers would focus on a particular service or function as opposed to a geographical area. Further, that the split between Adults and Children's Services would act as a driver for the further development of the commissioning arrangements. Under the new arrangements Area Heads of Service would also work more closely together to make services as seamless as possible. There was a general agreement that the planned move to citywide services should result in improved strategic management of services, including day services, improved communication and more effective sharing of good practice.
- 4.2.34 Members concluded that although they had heard evidence that there are opportunities for change it would require more than structural change to modernise and improve the quality of day services. Other factors include how we work more effectively in partnership and other modes of best practice need to be taken into account.

Direct Payments

- 4.2.35 Members received a presentation from the Lead Officer for Direct Payments. Direct Payments are available to a wide spectrum of service users both children and adults which includes older adults, people with physical disabilities and people with learning disabilities.
- 4.2.36 A Direct Payment is a cash payment given to an individual in lieu of services that would otherwise have been provided by Social Care and Health. It should be as cost effective as a direct provision. The Direct Payment is based on assessed need following a community care assessment (adults) or framework assessment (children). The aim is to increase the individual's choice by giving them flexibility over the way services are delivered.
- 4.2.37 Members were informed that to receive a Direct Payment an individual:
- Must have an assessed need
 - Must be able to consent
 - Must be able to manage direct payment alone or with assistance

The Directorate fund a support agency to assist the individual with issues such as the legal responsibilities of being an employer, setting up a bank account and recruitment and employment of staff, though an individual is free to choose where to obtain any such support elsewhere.

- 4.2.38 A Direct payment can be used to:
- Employ a personal assistant



- Employ an agency worker
- Purchase external day service
- Purchase respite care either residential or in the person's own home
- Any other creative alternative that meets their assessed need e.g. sports and recreational activities.

Members were also informed that a direct payment cannot be used to purchase services such as in-house services, paying their spouse, a partner or a close relative living in the same house and (to date) equipment or adaptations.

4.2.39 As at January 2006, 540 Direct Payments were provided in Birmingham. Of these, the number going to client groups this review has been concerned with were:

Older Adults – 122

Physically Disabled – 199

Learning Disability – 46

Under 65 with dementia - 2

4.2.40 Members were alerted to the fact that if people choose to receive a direct payment in lieu of traditional in-house day services this would impact on the level of day service that Social Care and Health would need to provide or purchase directly from the voluntary sector. Another factor to be considered is the ability of the market to respond to a growth in demand for alternatives to traditional day services.

Share Options

4.2.41 Members received a presentation from the Share Options Team who provide alternatives to traditional day services. The service provides support to people with a physical disability to access local community facilities, education and paid and voluntary employment.

4.2.42 Community Officers from the team also see all referrals made to day centres for physically disabled adults prior to a person starting at a traditional day centre. In this way, the service is able to reduce the number of people attending a traditional day service that they would receive little if any benefit from.

4.2.43 The success of the Share Options is evident in the following figures:

2004/05

Number referred to Share Options was 110

Outcomes – 88 accessed community services

11 went to day care



Day Services for Adults

11 declined a service

2005/06 (figures up to 16th March 2006)

Number referred to Share Options was 87

Outcomes to date – 57 accessed community services

2 went to day care

16 declined a service

- 4.2.44 The Team were asked about their links with the Disability Employment Team based in the Regeneration Portfolio. They were not aware of the service. This caused considerable concern to Members as there should be strong links between the two services to facilitate disabled peoples' access to training and employment opportunities.
- 4.2.45 Members acknowledged the value of the service for encouraging and supporting people not to enter traditional day services when there are viable alternatives that would better meet their needs. However, there is a need to expand the service if the Directorate is to divert people away from unsatisfactory traditional services.

Carers

- 4.2.46 The Review Group received evidence from the Strategic Commissioner for Carers and the Head of the User Involvement and Carer unit. Evidence was provided about carers' views and needs in relation to day services. The key issues for carers were listed as:
- 4.2.47 Opening hours – One in seven carers work and are used to having the person they care for in day care for specific times that are often complementary to their own employment arrangements. Opening hours need to be longer and more flexible to fit in with the needs of the carer.
- 4.2.48 Flexibility – carers require a more holistic approach to respite and short breaks. It is not always appropriate to place the person they care for into a respite facility and a different way of providing the right break needs to be considered.
- 4.2.49 Staffing issues – carers require staff at day care services to be fully informed and well trained. Carers also want to be part of the decision making process and to have a say in how the person they care for will be affected. Carers need to be fully informed before changes take place. Carers also want to be treated with respect with their views taken seriously.
- 4.2.50 Conflict – if service users are more empowered and take charge more of their own lives, there may be conflict with the carer as the person they care for may be taking more risks.
- 4.2.51 Appropriate care – carers simply want the person they care for well taken care of, in the most relevant and appropriate way so that they do not have to worry about what is happening



whilst they are not there. They want socialisation and in the case of younger people with learning disabilities and mental health problems, often require a range of employment options.

- 4.2.52 The Committee asked what the most appropriate mechanism for consulting carers was. The Review Group were informed that carers have an opportunity to attend regular carers' forums to discuss their issues and concerns. Four locally based forums take place bi-monthly across the city for carers of people with physical disabilities and older adults. Carers Incorporated is a forum that looks at carers of someone with a learning disability and the Mental Health Carers Forum is self-explanatory. Engaging with carers is crucial although it is important to note that the regular carers that have been attending for years can put off new carers attending the forums. The forums are by no means representative of all carers and it is therefore important to try to engage with all carers to take them through the modernisation agenda process.
- 4.2.53 Carers need to be engaged in the modernisation process. Carers need to be reassured that they will continue to receive the level of support that they require. Carers are more likely to accept change if they can see that there will be a better service for the person they care for.

Head of Policy and Partnership – Well-Being Services

- 4.2.54 The Review Group received a presentation from the Head of Policy and Partnership and additional information from the Assistant Director Adult's Strategy on well-being services.
- 4.2.55 Well-being services focus predominantly on prevention. Public services focus by and large on the most vulnerable people at times of crisis rather than adopting an approach which enables the wider population to remain independent for as long as possible and to live their lives to the full. Well-being services should be provided for all sections of the community including older people, people with learning disabilities, and physical disabilities, those with mental health needs and children. The Social Care and Health Directorate is going to further develop co-ordinated preventative services to promote independence, choice and well-being within a three levels of intervention model encompassing:
- Universal services that are community-based e.g. transport services and lifelong learning opportunities.
 - Targeted services aimed at specific vulnerable groups of people e.g. befriending, shopping, exercise programmes.
 - Personalised services for individuals at risk based on assessments of need.

A coherent range of services can only be established through joint and collaborative approaches and requires the Local Authority to work in partnership with other agencies such as the NHS, Voluntary Organisations and communities.



Day Services for Adults

- 4.2.56 Social Care and Health is currently undertaking an exercise with 6 Districts to map services that are classed as well-being services. The pilot aims to support the development of established and new well-being services with a view to developing services and sharing good practice across the city.
- 4.2.57 Members were disappointed to learn that the development of well-being services is at such an early stage, particularly given the intention to move people away from traditional day services to services and support which is more closely aligned to communities. Members have raised concerns, reached conclusions and made a recommendation about this issue which are outlined further in this report.

4.3 Voluntary Sector

Birmingham Mencap

- 4.3.1 The Chief Executive of Birmingham Mencap outlined the services that they provide and views about the future of day services for people with a learning disability in Birmingham. Birmingham Mencap provides services to 350 people per week. Birmingham Mencap's approach centres on the choice and inclusion agendas and day services are delivered in a non-traditional way.
- 4.3.2 A project has been delivered aimed at encouraging people not to drift into traditional day services and to move into the world of employment. The "Volunteering into Employment" has provided support to 70 people aged below 25. The service is aimed at meeting younger people's aspirations and expectations.
- 4.3.3 Birmingham Mencap provides a social group on 2 evenings each week and on a Saturday. Efforts were made to encourage people with learning disabilities to link up with one another for social evenings at other venues rather than attend Mencap's group.
- 4.3.4 Birmingham Mencap is highly critical of traditional learning disability day services which were more interested in containment than meeting the needs of the individual.
- 4.3.5 There was a recognition that older family carers can be resistant to change and want the person they care for to be "safe". Mencap are developing a new service which will provide short break respite for carers that could enable them to consider alternatives to traditional day care services.
- 4.3.6 It may be that people with profound learning disabilities will always require a day service that is more focussed on meeting their personal and safety needs. However, there is considerable scope to develop the social and recreational opportunities for this group and improve the quality of the service that they receive.



4.3.7 The Chief Executive was asked about how he saw day services or alternatives to day services in the future to which he replied:

- Giving people worthwhile activities, meaningful attachment to employment, leisure and recreational activities is the way forward.
- Voluntary sector contracts need to be longer-term and more stable. The City Council needs to move away from being a provider and to enable voluntary organisations to provide services on its behalf. Voluntary organisations such as Birmingham Mencap (and Age Concern) have a brand name and a good reputation which would assist them in getting users and carers to shift to new, innovative services.
- Brave decisions need to be made such as the closure of a day centre. Resources could then be redirected and innovative services could be developed to replace obsolete services. The voluntary sector would be well placed to provide a pilot scheme as an alternative to the service that has been closed.

Age Concern Birmingham

4.3.8 The Director of Operations of Age Concern Birmingham outlined their current provision and the possibilities for improved partnership working with Social Care and Health.

4.3.9 Age Concern Birmingham have day centres across the city providing services to a minimum of 318 people over the age of 50 each week. Some centres are operated jointly with housing schemes such as Anchor Housing. Information was provided about the type of service provided, activity levels, and staffing and management arrangements.

4.3.10 Staffing levels varied but the ratio was one member of staff to four service users. The staff are equally well-trained as their City Council equivalents but tended to be paid less. This led to some staff moving to better paid positions.

4.3.11 The issue of transport was discussed, interestingly Age Concern Birmingham have a contract with the Ring and Ride Service; Ring and Ride providing the bus and driver and Age Concern Birmingham providing an escort. This arrangement has taken several years to secure. Members were interested in this arrangement as they had understood that Ring and Ride would not enter into this type of scheduled contract.

4.3.12 On the future of day services, Age Concern raised the following points:

- Voluntary organisations struggle to plan and develop services when the Local Authority provides them with annual contracts.
- Age Concern Birmingham would wish to double its capacity and to run a greater number of smaller centres which would allow more one to one attention. Age Concern Birmingham would require pump priming in order to move in this direction.
- Age Concern Birmingham and Birmingham Mencap stressed the need for the Local Authority to enter into meaningful partnerships with the voluntary organisations. Such partnerships would mean that agencies could legitimately make demands on each other.



Day Services for Adults

4.4 Health Service

4.4.1 The Committee received evidence from the Birmingham and Solihull Mental Trust's Older Adults Directorate, the Joint Head of Commissioning for Learning Disability Services and South Birmingham PCT.

4.4.2 For Members the key issues were:

- Why do some people receive day services from the NHS rather than Social Care and Health?
- Is there any overlap between the services being provided?
- Is there any potential for joint working?

4.4.3 From the evidence provided the key messages were:

- People with Learning Disabilities who receive day services from Health have complex medical needs e.g. require direct nursing care that means they are excluded from alternative day services.
- There was no exit strategy for those receiving Health day services; it was possible for some users to move into alternative services such as those provided by the City Council. A seamless service whereby users moved between services would be the ideal.
- There needed to be clarity about where each service started and stopped. This would result in less disputes about funding of day services. This would result in closer partnerships between agencies and service users receiving more appropriate services.
- There needs to be a move away from centre based services to supporting day activities in a variety of community settings.
- There needs to be more collaborative working with the voluntary sector.
- While both sectors had shared objectives in terms of service delivery and aspirations for 'valuing people', their approaches to planning services needed to be harmonised.
- Day services need to be mapped and a needs analysis completed if there is to be a move towards more integrated provision.
- Carers need to be assured that they will not be left without services. However, respite services do not have to be centre-based. A flagship service should be developed so that carers can see that there could be a better service for the person they care for.
- Transition from children's to adult's services needs to be considered at a strategic and operational level. The City Council and Health need to have a shared vision for those young disabled people leaving school and accessing other support services.

4.5 City Council Departments

4.5.1 The Review Group needed to explore a number of issues with officers from other departments. During their visits to day services and evidence gathering sessions it became



apparent that they needed to further explore two key issues: meal provision in day services, particularly the service provided by Trading Services and the disability employment services from the Regeneration portfolio.

Trading Services

- 4.5.2 Trading Services, which is part of the Local Services Directorate of Birmingham City Council, provides meals to 33 day centres. Although there is no contractual agreement with the Social Care Directorate for this provision, there is however, a service level agreement. Charges for meals are set annually by the Executive. Some of these day centres are equipped with large commercial kitchens staffed by up to 6 people at any one centre. There was a disparity between the scope these kitchens were utilized for and the potential for their use. For example, these kitchens offered potential for training users to cater for themselves and others within their day centres.
- 4.5.3 The Review Group were told that there were health and safety issues associated with service users preparing meals for other users and the requirement for kitchens to be managed by suitably trained personnel, but that Trading Services would be receptive to establishing a pilot scheme where people with learning disabilities could receive training to work in kitchens.

Disability Employment Services (Regeneration)

- 4.5.4 On 1st April 2002, Shelforce, Employment Preparation Team (EPT) and Direct Employment Team transferred from Social Care & Health (SC&H) without budgetary provision to Planning & Regeneration (formerly Economic Development (ED) on the basis that they were employment based and ED would be in a better position to draw down grant funding to finance the estimated £760,630 net cost at that time. At that point, it was also agreed that there would be a review of "Other Employment Services" remaining in Social Care and Health to identify other services, which were predominantly "employment based" as opposed to "care services". Immediately, Strawberry Studios and MITRE were identified as being predominantly employment based and hence transferred to the Development Directorate from 1st November 2002.
- 4.5.5 The Review Group were informed that the purpose of Disability Employment Services was to:
- To provide vocational training, employment development and support to enable people with disabilities to secure employment.
 - To concentrate on those people who are economically inactive and who would otherwise become dependent on health or social care support.
 - Increase substantially the number of disadvantaged people with no or very low skills living in the most deprived areas to gain employment.



Day Services for Adults

- Ensure equality of job opportunities for people with a disability into growth sector jobs and major developments within the city i.e. University Hospital/IMI, Witton.

- 4.5.6 The service is provided to people with complex and higher support needs, who require long-term help to sustain employment and to those for whom employment was not ever an option and who couldn't access employment without support.
- 4.5.7 The services provided by the service are Shelforce, Disability Access into Learning and Employment, Employment Preparation Team, Nechells Green Garden Centre, Direct Employment Team, Mitre (A mental health service that falls outside of this review) and catering services including Strawberry Studios.
- 4.5.8 Members received a considerable amount of evidence from the service. However, there are key issues that the Review Group felt needed to be addressed:
- 4.5.9 The Disability Employment Service was transferred to the Regeneration portfolio in order for it to be able to access external sources of funding. The evidence presented showed that this had not occurred.
- 4.5.10 The service receives its referrals from a variety of sources including Job Centre Plus, schools and colleges, Social Care and Health and Primary Care Trusts. Members were concerned that the service only receives 1% of its referrals from Social Care and Health.
- 4.5.11 Links with Social Care and Health were limited. During the course of the review, Members had asked officers and managers about the Disability Employment Service and many were unaware of its existence. The Members were informed that there were plans to provide staff at the day centres to try to improve links but this had yet to be agreed. Members felt that the service being placed outside of Social Care and Health had resulted in the service not being adequately linked with services such as Community Options and day services.
- 4.5.12 The Members were keen to acknowledge that the Shelforce service is an excellent example of a social enterprise in that it provides meaningful employment and operates at a profit which it re-invests into the service. However, there were concerns that the service has not developed despite there being scope for development and also about the long-term viability of a service that relies heavily on a single contract with the city's Housing Directorate.

4.6 Other Key Players

Connexions

- 4.6.1 The Committee received evidence from Birmingham and Solihull Connexions Service.
- 4.6.2 Connexions brings together all the services and support young people need during their teenage years offering differentiated and integrated support to young people through Personal Advisers (PA's). For some young people this may be just for careers advice, for



others it may involve more in-depth support to help identify barriers to learning and find solutions brokering access to more specialist support, e.g. drug abuse, sexual health and homelessness. PAs work in a range of settings including schools, colleges, one-stop shops community centres and on an out-reach basis.

- 4.6.3 The Connexions Service has specific responsibilities for young people with learning difficulties and disabilities. Connexions work with young people up to the age of 19, or for some young people with learning difficulties and disabilities up to their 25th birthday. The Committee heard that it is essential that transition planning for young people moving from children to adult services is effective and involves all relevant agencies.
- 4.6.4 In terms of day services, Connexions believe that it is essential that users and carers are made aware of every opportunity available to them. So often, carers assume that the only option is for the young person to progress from their school directly to adult day services. This is certainly not the case as many young disabled people can progress to mainstream college or employment. For those that cannot there are other alternatives to day service including specialist colleges, training or supported employment. It is important for Connexions to make links with adult social care teams. For Connexions, it is essential that links are made with services such as Community Options so that young people and their carers can be talked through alternatives to day services.
- 4.6.5 Connexions hope that the new split into Adult and Children's services will result in a more effective transition arrangement for young people with disabilities. Consideration should also be given to establishing a transition team.
- 4.6.6 In essence, the key message from Connexions is that it is essential that young people who do not require adult day services are diverted to more appropriate services.



5 Description of Current Service Provision

5.1 Introduction

- 5.1.1 The Review Group undertook an extensive number of visits to day services and alternatives to day services to understand first hand the extent and nature of provision and received a considerable amount of empirical information about current day service provision in Birmingham.
- 5.1.2 The Social Care and Health Directorate provide and purchase traditional day care services across the city for people from the following adult client groups:
- older adults
 - people with physical disabilities (aged 18-64 years)
 - people with learning disabilities
- 5.1.3 This section provides a description of current day services and alternatives to traditional day services including information about budgets and occupancy rates. Details are supplied for both in-house and externally purchased services.
- 5.1.4 Any analysis of these services based on the empirical information gathered and from observations made by Members during their visits to services is contained within section 6 of this report.

5.2 Physical Disabilities

Internal Provision

- 5.2.1 The Directorate runs three in- house day centres, Elwood Centre in Erdington serving the north of the city, Bordesley Green Centre serving the east of the city and Fairway serving the south of the city (See Table 1) These centres have been offering a traditional model of care with service users attending for set days from approximately 10.00 a.m. – 3.00 p.m. with little use of building for service users outside these times.

Table 1: Physical Disability In-house Day Services

Name of the Service	Budget 2006/07	Capacity	Average Attendance as at Dec 2005	Days open per week
Elwood	508,193	50	40 (80%)	5
Bordesley Green	551,009	55	33 (60%)	7



Fairway	492,869	55	46 (84%)	5
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- 5.2.2 Places are offered to different clients on a different number of days a week with very few now attending 5 days. Some service users have attended the centres for 30 years with limited throughput (historically due to lack of accessible alternatives, in the community). However with development in partnerships with other organisations there is now more emphasis setting clear objectives and enabling people to move on to more community based activities and greater independence.
- 5.2.3 For several years now in line with government thinking and national trends there has been a move away from an entirely traditional model of centre based day care for people with physical disabilities to more community based alternatives to meet people's social, respite and rehabilitative needs. Visioning days have taken place with staff on 2 of the areas and others are planned. The process of assessing the current in-house service and producing action plans to progress future development of the service to give more flexibility and choice as well as better use of resources has begun. This also includes plans to develop more partnerships with other organisations to enable access to more socially inclusive community facilities and promote independence.

External Provision

- 5.2.4 The Directorate also commissions day care in traditional day centres from other agencies either through service level agreements, grant aid or spot contract. There are two main providers, Headway House for those with acquired brain injury and CP Midlands mainly for those with cerebral palsy.

5.2.5 Headway House

Headway provide a social rehabilitation service to people with an acquired brain injury who will usually have completed formal clinical rehabilitation (physiotherapy, occupational therapy etc). Many people may still be unable to return to work but are ready to start to re-integrate back into the community. The service provides opportunity to

- Re-learn lost skills i.e. education, social
- Learn coping/compensation skills
- Acquire new interests/skills
- Meet with other brain injured people
- Understand more about brain injury
- Learn how to modify their behaviour
- Receive guidance and support
- Access community activities



Day Services for Adults

- Avoid isolation and deterioration

The emphasis is on promoting and maintaining independence. This is achieved through participation in a choice of structured programmes of individual or group activities.

The service is purchased on a spot contract basis; the budget for 2006/07 is £58,419.98.

- 5.2.6 **CP Midlands** provide a service to between 15 and 20 people from Birmingham per day in partnership with other agencies including Headway, Sandwell College and Scope. People attend for rehabilitation, respite and for educational and social reasons. CP Midlands are currently modernising their services to focus on promoting greater independence and social inclusion. The service is purchased via a grant from Social Care and Health at a cost of £43,826 (2006/07)

Alternatives to Traditional Day Service

- 5.2.7 **Elwood Rehabilitation Service** is a service where Social Care and Health is joint working with South Birmingham PCT to provide a goal centred, time limited, rehabilitation centre based at (but separate from) Elwood Day centre in Erdington predominantly for adults up to the age of 65. This provides for up to 5 people a day. This service is linked to the rehabilitation centre run and funded by South Birmingham PCT based on the site of Moseley Hall Hospital. The combined services offer a citywide rehabilitation service.
- 5.2.8 **Share Options** is a person centred, citywide service helping individuals access local community activities and opportunities including leisure activities, education and employment. The Review Group received a presentation from Share Options as part of an evidence gathering session (See section 4.2.41).
- 5.2.9 **Share Friends** is a provided by Social Care and Health and provides a befriending service and social opportunities for disabled people.
- 5.2.10 **Rehab UK** offer a rehabilitation service to people with an acquired brain injury with a view to a return to paid or voluntary employment. Social Care and Health have a service level agreement with Rehab UK to provide this service to 16 Birmingham residents, the budget for 2006/07 is £50,183.
- 5.2.11 **Physical Disability Community Team** (Heart of Birmingham) provide information and support to individuals to enable them to identify and access suitable activities. The team adopt a person-centred approach and offer support on a short-term basis, withdrawing once the person is settled in their placement.



5.3 Older People

Internal Provision

- 5.3.1 There are currently 25 day centres for older people operated by Birmingham Social Care and Health. 8 of the 25 day centres provide specific services for black and minority ethnic groups.

Table 2: Older People's In-house Day Services

Name of the Service	Budget 2006/07	Capacity	Average Attendance as at Dec 2005	Days Open per week
Baker Street	164,448	20	12 (60%)	5
Briarscroft	142,007	22	18 (82%)	5
George Canning	163,988	18	14 (78%)	7
Marsh Lane	132,614	17	15 (88%)	5
Milan Asian	126,040	12	9 (75%)	5
Ruby Rhydderch	172,712	22	16 (73%)	6
Annie Wood House	140,221	25	16 (64%)	5
Cheung Ching	83,124	20	14 (70%)	3
Evergreen	114,183	20	19 (95%)	7
Magnolia	148,199	20	18 (90%)	5
Milap	141,578	12	7 (58%)	5
Park Hill	214,322	25	17 (68%)	5
Shakti Asian	146,715	20	14 (70%)	5
St Stephens	260,734 Joint funded	46	25 (54%)	5
Barncroft	85,511	18	10 (55%)	5
Normanhurst	134,340	20	11 (55%)	5
Edendale	91,484 Joint Funded	12	6 (50%)	7
Weatherdale	Joint Funded	12	10 (83%)	7
African Caribbean	120,453	20	19 (95%)	3
Bequest Hall	186,025	24	21 (87.5%)	6
Callowbrook	239,901	40	30 (75%)	5
Chamberlain House	156,933	20	14 (70%)	5
Maypole Grove	163,785	20	19 (95%)	7
Sahara Asian	86,794	20	6 (30%)	3
Weatheroak	167,640 Joint Funded	12	10 (83%)	6



Day Services for Adults

- 5.3.2 The majority of day centres for older people offer a similar type of service catering for people with a range of dependency, including physical frailty, mild to moderate dementia and older people who require stimulation to avoid social isolation and those with depression.
- 5.3.3 A typical day centre will open at approximately 8.30am Monday to Friday with transport departing to collect those service users requiring transport. However, there are some centres that open 7 days a week. Dependent on the number of drivers and mini buses attached to the centre they will arrive back at the centre anywhere from 10.30am until 11.30am. The service users have refreshments and participate in a range of activities. Lunch is provided and is usually followed by further centre based activities. Service users beginning to be transported home from 3.30 onwards with the day centre closing at approximately 4.30 for those being collected by relatives or carers.
- 5.3.4 The staffing levels vary in numbers but the typical structure would be 1 manager, 1 deputy manager, 2 driver/care assistants (although some units have three) and 3-4 care assistants.
- 5.3.5 Weatheroak, Edendale and Weatherdale offer a different level of service from the norm with more emphasis on people with mental health needs, outreach and respite. These receive partial funding from Solihull and Birmingham Mental Health Trust. In addition there is also mental health input at Shakti Day centre provided by the Birmingham and Solihull Mental Health Trust. St Stephen's offers a rehabilitation service and is jointly funded by Heart of Birmingham Primary Care Trust.
- 5.3.6 There are some day services that are attached to residential homes, many have been converted from the communal dining rooms and therefore only have basic facilities. As a result many of the centres share access with the attached older peoples homes, have combined dining/lounge facilities, shared toilet facilities, lack extra rooms or rooms to allow privacy for reviews or treatment by District Nurse or GPs.

External Provision

- 5.3.7 There are 54 grant funded day centres and luncheon clubs run by voluntary organisations across Birmingham. Of these 54 schemes, there are a number of services run by voluntary organisations for black and minority ethnic groups. Some of these centres are based in sheltered housing or extra care sheltered housing schemes, church halls, community buildings and residential care settings. Some operate in a similar fashion and provide a similar service to the City Council's in-house day services; others offer a specialist service to meet the need of those with dementia.

Alternatives to Traditional Day Service

- 5.3.8 **Outreach** is an alternative to traditional day care; some centres offer an outreach service to those in the community. Outreach is currently based at Marsh Lane, Weatheroaks and Annie



Wood day centres. This service encourages older people to engage in community activities. These may include Adult Education, Community and Leisure Services and links with health such as exercise programmes. Activities may be supported in the home.

- 5.3.9 The **Home from Home** service involves carers visiting older people providing companionship, support and friendship. There are seven Home from Home co-ordinators employed by Social Care and Health.
- 5.3.10 **Direct Payments** are a cash payment given to individuals following a community care assessment in lieu of services that Social Care and Health would otherwise provide. They cannot be used to buy in-house services but give the user choice and flexibility in meeting the needs that would otherwise be met through in-house day care services. Direct Payments are available to all service users group (See section 4.2.35).

5.4 Learning Disabilities

Internal Provision

- 5.4.1 Day care services provided for adults with learning disabilities in Birmingham are mainly large day centre provision. The Directorate operates 9 day care services with a total capacity of 940 places. Table 3 illustrates that services are high volume/low cost, and support many service users and families across the city.
- 5.4.2 The learning disability provision accounts for about half of all the internal day care places provided by the Council, even though there are significantly more older adults day centres. Attendance levels are highest within the learning disability centres, demonstrating the importance of providing day services.

Table 3: Learning Disability In-house Day Services

Name of the Service	Budget 2006/07	Capacity	Average Attendance as at December 2005	Days open per week
Alderman Bowen	1,299,927	125	102 (82%)	5
Aldridge Road	792,208	110	79 (72%)	5
Collingwood	1,178,504	100	61 (61%)	5
Ebrook	626,904	100	75 (75%)	5
Harborne	907,919	110	74 (67%)	5



Day Services for Adults

Name of the Service	Budget 2006/07	Capacity	Average Attendance as at December 2005	Days open per week
Hockley	993,649	120	85 (71%)	5
Moseley	1,381,945	140	89 (64%)	5
Sparkbrook	466,011	60	29 (48%)	5
Tyburn	397,657	75	47 (63%)	5

5.4.3 The profile of users attending day services varies in terms of level of ability, age, ethnicity and gender etc. About half of the users would be classed with a moderate to severe learning disability with complex needs and personal care issues, there are however a significant proportion who attend with mild learning disabilities, many of which travel independently to the service centre.

5.4.4 The day services operate a structured day activities programme including recreational, educational, therapeutic (Moseley day service runs a hydrotherapy pool) and vocational. A number of social enterprises operate in order to provide meaningful activities. These enterprises include catering, car valet, printing services, picture framing and various horticulture services. For example; Matchbox Café is a user led catering operation, set-up as a co-operative with users sitting on a board. The café is open to the public and generates sales at a sustainable level. The product and service is high quality and enjoys a good reputation within the local community. It functions as a business in its own right. Meals are sold at comparable rates to the meal charges at day centres, which are heavily subsidised. After discussing the operation with users, Councillors were impressed by the level commitment shown.

External Provision

5.4.5 Grant aid is also used to purchase non-statutory sector day services. Organisations currently supporting people with learning disabilities during the day include Birmingham Rathbone and Birmingham Industrial Therapy Association (BITA) with emphasis on work preparation, as well as a number of independent providers such as Autism West Midlands and Ellys Extra Care. Members visited BITA, Rathbone and Ellys Extra Care.

Alternatives to Traditional Day Service

5.4.6 Members visited the **Community Options** team and were impressed by the service provided.



- 5.4.7 The Community Options team works with adults who have a learning disability. It covers the whole city and has teams on the North and the South side. The aim of the team is to promote independence and social inclusion. This is achieved by offering person-centred planning, voluntary work experience, independent travel training, quality leisure time, college and Adult Education placements and choice of activities.
- 5.4.8 Support is offered on a one-to-one basis and is short term. Once the person is able to do things by themselves the support is withdrawn. Although they cease involvement clients can come back to the service as and when they need it.
- 5.4.9 The service has been working very closely with the social work assessor team for the past two years. They have taken on referrals without formal care plans and as a direct result of this have been able to cut down on waiting times for the service.
- 5.4.10 Members found that it is a cost-effective service, receptive to clients and responsive to their needs. For example, in the 12 months to 31 July 2005 the service worked with 320 referrals citywide, out of these only 10 people went to day centers. Their other successes include promoting independent travel; this is an activity which enables clients to get out and about on their own after a period of successful training by qualified staff. They also look at alternative methods of transport if clients are not able to undertake a journey independently.
- 5.4.11 The service actively engages with service user and carers. They also manage a friendship project, which links up a very small group of people to build friendships. They link into special schools with school leavers who are in transition to make them aware of their service and the options available to them.
- 5.4.12 The services' aspirations for the future include building on their good practice and to be the leaders in the modernisation of day services. The service wants to secure resources to pilot drop-in bases, like the one at Linkway. The purpose of the drop-in base would be to encourage access to their services and for signposting.
- 5.4.13 A further alternative to traditional day services is provided by the community assessment teams who purchase a number of day care packages. There are hundreds of people with learning disabilities living in care homes placed by the community assessment teams (social workers) - these care packages sometimes include day care packages with the care home providers to provide activity throughout the day.



6 Findings – General

6.1 Introduction

- 6.1.1 As part of the review, Councillors visited a number of day centres and some alternatives to traditional day services.
- 6.1.2 These visits gave Members an indication of some of the services available and provided a snapshot of how they operate. Service managers also had the opportunity to feedback on some of the operational issues encountered when running a service. Members visited day services for people with learning disabilities in Shropshire as these were highlighted nationally as examples of good practice. The group also received a vast range of evidence from key players (See section 4) which enabled them to gain a significant understanding about day services and the areas where improvements are needed.
- 6.1.3 This section outlines the Members' findings; whilst the Review Group recognise that there are some differences in the day services that are provided or purchased by the Directorate there are some findings that relate to all service user groups and to most day services. This section outlines both the findings that relate to all services and those which are specific to physical disabilities, older people and learning disabilities.
- 6.1.4 The Members found issues of real concern whilst examining day services but also limited pockets of good practice and innovation. The recommendations from this review will reinforce the need to support those services that are delivering positive outcomes for service users and re-model or cease failing services.

6.2 Findings – All User Groups

- 6.2.1 The key finding from this review is that traditional day centres do not meet the needs of all service users. Evidence gathered by Members from their visits revealed that:
- Services generally have a lack of innovation and vision.
 - Services have been left to drift with very little (or no) investment coupled with very little strategic management or interest, resulting in services that are dated and not fit for purpose.
 - Services are generally not person-centred; there is an assumption that people will fit services rather than services being shaped to the individual.
 - Services on the whole create dependency rather than focussing on people's strengths and building upon them. This is particularly evident in the transport and meal arrangements.
 - Services are not embracing the opportunities available to them in the community, people should be encouraged to use mainstream community resources. Services are very much inward looking and centre-based.



- 6.2.2 Most day centres lack clarity of purpose and vision with little or no emphasis on positive outcomes for service users.
- 6.2.3 There was a “typical” model of day service; this included the time that users spent at the day centre being limited because of staffing arrangements and inflexible transport arrangements. However, there were a limited number of services that were prepared to operate outside of standard hours and offered a service at the weekend.
- 6.2.4 Services are locked into a dependency culture; this was typified by the number of people reliant on day centre transport. Within some services staff appeared to be locked into providing a service that maintained dependency. Service such as Direct Payments need to be marketed as an alternative to Social Care and Health provision.
- 6.2.5 The services are very much centre-based and did not make optimum use of local community resources.
- 6.2.6 On the days of Member visits, there were low occupancy levels at many in-house day centres this was particularly evident in older people and physical disability centres and less significant in learning disability centres. Member’s observations were supported by performance data we received on day services (see table 1 on page 39, table 2 on page 42 and table 3 on page 44). Despite the under usage, referrals were being made to external providers and voluntary sector organisations. Members questioned the cost-effectiveness of this and in particular the failure to utilise the full capacity of the service. Day Service Managers reported that there has been a reduction in the number of people attending day services as a result of the Fairer Charging policy. However, Members did not receive any evidence to support the Managers’ views about the impact the Fairer Charging arrangements had on attendance.
- 6.2.7 Where there were examples of good practice such as the rehabilitation model adopted by St Stephen’s service for older people, this was not replicated by other day services.
- 6.2.8 The lack of effective strategic and operational management resulted in poor practice at many centres not being acted upon.
- 6.2.9 The current day services try to meet the needs of all users from those requiring well-being type services to those with complex and profound needs. Services are struggling to provide a service that is able to respond to this spectrum of need. It is essential that consideration is given to developing services for those individuals with highly complex needs and also those requiring well-being services.

Premises

- 6.2.10 Members found the condition of many of the day centre buildings to be poor and in need of urgent attention. The condition of the buildings impacts on service users’ perception of the



Day Services for Adults

service provided and reflects badly on the Social Care and Health Directorate. Members identified many areas of concern about the day service buildings including:

- From the outside premises were uninviting. Some were located in pre-fabricated buildings whilst others looked like large institutions or industrial buildings. At one centre the entrance was covered in graffiti despite staff's attempts to keep it free of graffiti; this is the appalling first impression given to visitors to the centre.

Examples of day centre buildings



The entrance to a day centre





- Buildings had received little or no capital investment or maintenance, leading to the buildings being in a state of disrepair. Members observed problems such as holes in ceilings, plaster coming off walls and general “shabby” interiors.

The interior condition of some day centre buildings



- Many buildings were unsuitable due to their original design, small rooms being used by large groups of service users. Rooms were being used for storage or worse still, were being used for both activities and storage.

Inside a day centre





Day Services for Adults

Activity taking place in a day centre



- 6.2.11 The meals arrangements at the centres are unimaginative. The current arrangements create dependency rather than using the opportunity to encourage and facilitate users being able (where possible) to make their own drinks and meals. The current arrangements with Trading Services do not foster independence or choice. The planned re-modelling of services will result in less centres but where they remain there is a huge opportunity for the meals service at centres to be developed into a social enterprise or training model. Any meal service should be “enabling” rather than “disabling”.
- 6.2.12 Transport provision is on the whole inappropriate. Some centres had a large fleet of mini buses that were not being used to their optimum i.e. they spent most of the day parked on the drive. Managers of the centres reported the difficulties associated with managing a fleet of vehicles. Social Care and Health has a fleet of 186 vehicles. Also, some users were being provided with transport that they did not need. Services were creating unnecessary dependency and should consider alternatives such as the use of Ring and Ride and travel training. However, Members acknowledged that some people with highly complex needs will always require transport, whether a large institutional minibus is the most appropriate vehicle is questionable. Whatever mode of transport is used, it should most definitely not be used solely to bus people into traditional centres.

A typical transport fleet serving a day centre





- 6.2.13 Members acknowledged that day services do have a crucial role in providing much needed respite for carers. Members recognise that carers provide vital support to individual's who access Social Care and Health. However, there can be a conflict with the aspirations of users who may wish to use and benefit from alternatives to traditional day centres.
- 6.2.14 Members heard about Social Care and Health's progress, indeed the lack of it, in relation to well-being services. Pilots are taking place within six Districts but in reality this has only progressed as far as a mapping exercise. Members were hugely concerned to learn how little progress has been made. Consideration of well-being services appears to be largely theoretical and has taken place within a policy vacuum. Very little consideration has been given to what services are needed, where they are to be based and how and by whom they will be developed. Engagement with Districts has been limited and it is crucial that these discussions and subsequent developments are accelerated. There must be a corporate city-wide approach and a strategic direction identified to provide a policy framework for the development of well-being and community services.

6.3 Findings – Physical Disability

- 6.3.1 Members received evidence to show that physical disability services have improved. It was evident that progress has been made towards making services less centre-based and towards promoting independence and choice. Commitment to the social model of disability that focuses on abilities rather than disabilities was apparent. The service has a vision of where it wants to be and a commissioning strategy that sets out actions for the future. However, there is still scope to modernise and revitalise services.
- 6.3.2 Some in-house and external day services are based in large institutional buildings where a dependency culture predominates. There needs to be a culture change for staff and users and although this has started in physical disability services this may take some time.
- 6.3.3 Traditionally people have been referred to a day centre without a clear action plan or exit strategy. Some service users have attended the service for 30 years so there has been a limited throughput, historically due to a lack of accessible alternatives in the community. Some carers have also become dependent on a service that is structured in a way that gives them definite periods of respite e.g. from 9am to 3pm.
- 6.3.4 Younger physically disabled people are rejecting traditional services and looking for more innovative services to meet their aspirations.
- 6.3.5 The issue of transport is slightly different for people with a severe physical disability than for some users of day services. For some the provision of accessible transport is essential for them to participate in normal everyday activities. It is however questionable whether this transport needs to be in the form of a large City Council minibus.



Day Services for Adults

- 6.3.6 For many disabled people they would choose to use mainstream services if they were accessible and they could reach them by accessible transport. There is a challenge for mainstream services to fully embrace the social model of disability and change their services accordingly.
- 6.3.7 There are few external providers of day services for people with a physical disability. Those that there are offer services to specific groups of people e.g. Headway to people with an acquired brain injury (see glossary) and CP Midlands for people with cerebral palsy. CP Midlands are looking to modernise their services in line with Social Care and Health and national trends and policies.
- 6.3.8 There are some examples of positive, innovative services. Members recognised that services such as Share Options and the Heart of Birmingham Community Team offer a viable alternative to day services. These services enable people to access community facilities and paid and voluntary employment. Employment, whether paid or voluntary is an essential element of physically disabled peoples' lives. Members wish to see a more stringent pathway to employment developed, to achieve this Social Care and employment services need to be directly linked. However, the capacity of these teams is limited by the resources available to them to expand and develop, and this must be addressed.
- 6.3.9 There is potential to use existing day centres more efficiently. All in-house physical disability centres have plans to develop more social inclusive community activities. This will result in service users being able to exercise choice and routes to greater independence.

6.4 Findings – Older People

- 6.4.1 Some change in day service provision is essential as a result of plans to de-commission residential care homes for older people. There are day centres attached to those residential establishments which are due to close as part of the de-commissioning process. The closures will be phased so priority must be given to ensuring that there are alternative services in place.
- 6.4.2 Day services for older people, both in-house and those provided by the voluntary sector need to shift from a dependency model to a re-enabling model. Members found that current services tend to create dependency. This dependency culture appears to be reinforced by some Day Service Managers and staff.
- 6.4.3 The Local Authority buildings from which services are delivered were dated and described by one Member as 'depressing and dismal' (see photographs in 6.2.10) However, buildings used by the voluntary sector were in many instances under-capitalised and lacking in many basic amenities.



A day centre building



- 6.4.4 There was little evidence that Managers and day service staff used innovative methods to engage older people, there was a reliance on traditional activities such as bingo and craft work. There was evidence of some modest innovation within some services but on the whole Managers did not actively seek to change services.
- 6.4.5 There were low levels of occupancy within services and a considerable amount of unused capacity. Despite this, a significant number of places are being purchased from alternative voluntary sector providers at considerable additional cost to Social Care and Health.
- 6.4.6 There was limited engagement with activities taking place in the wider community. This resulted in services being insular and not developing and maintaining effective links with other providers.
- 6.4.7 Members made a number of observations about voluntary sector provision having visited a number of centres and receiving evidence from providers. Members noted that the services provided are on the whole very similar to in-house provision and needed to modernise. Members recognised that the voluntary sector is an important provider and it was evident that without them there would be insufficient capacity.
- 6.4.8 The voluntary sector is expected to deliver a professional, high quality service with limited financial support from Social Care and Health. The financial support that they receive tends to be agreed on an annual basis reducing the ability of the voluntary agencies to plan and develop services in a strategic way. The Service Level Agreements (SLAs) with the voluntary sector did not specify any detail of how the service was to be provided, thus creating



Day Services for Adults

uncertainty for the providers. The move away from Grant Aid was not related to service provision and therefore was of little benefit to voluntary organisations or the City Council in terms of our responsibility to manage performance. These merely replicated the old grant aid arrangements but in another format.

- 6.4.9 Members were interested to note that Age Concern Birmingham had secured a scheduled contract with Ring and Ride. The Review Group had previously heard that Ring and Ride would not enter into such arrangements. Members felt that discussions with Ring and Ride should form part of the planned transport review.

6.5 Findings – Learning Disability

- 6.5.1 It is clear that Learning Disability services need considerable improvement if they are to reflect the principles of choice, independence and people-centred services. The recent letter from the Audit Commission identified learning disability services as an area of concern that must be addressed. In particular improving outcomes for people with learning disabilities.
- 6.5.2 Members were particularly concerned about day services for people with learning disabilities, finding them to be of a poor standard and under resourced in comparison to those provided to older people or people with physical disabilities. Many of the premises lacked investment and needed to be maintained to a higher standard (See 6.2.10 for photographs).
- 6.5.3 The pattern of service within the traditional day services has remained the same for many years. On the whole, staff within the centres appear to accept that the service needs modernising. There are some staff and managers that have strived to modernise the provision but found difficulties including considerable resistance from users and carers. Where innovation has been introduced, such as Matchbox Cafe and Community Options, this has been down to the efforts of individual staff and managers rather than the service as a whole agreeing change.
- 6.5.4 The vital need of carers for some form of respite was noted. For many carers day services provide them with a guaranteed period of respite. However, there can be a conflict between the need of carers and users. Members acknowledged that for many carers day services have been a lifeline and that we can not expect them to agree to radical changes to day provision without demonstrating to them that there is a viable alternative. There needs to be closer engagement with carers in future provision and planning.
- 6.5.5 For people with learning disabilities, accessing employment, training and education is essential. The performance in relation to employment and training was disappointing other than a few pockets of social enterprise. Members were particularly impressed with the service provided by Community Options and would like to see this expanded. In contrast, Members were disappointed to note that a number of City Council employment related services did not



have effective working links with day service providers. Members expect the Disability Employment Service currently based in the Regeneration portfolio to be more closely aligned with and addressing Social Care and Health priorities.

- 6.5.6 The links with Health and the voluntary sector need to be strengthened. Members were particularly impressed with Birmingham Mencap. Birmingham Mencap's approach is to provide non-traditional services which are based on the choice and social inclusion agendas. Members were particularly interested in the volunteering into employment scheme that aims to discourage people with learning disabilities from drifting into inappropriate, traditional day services. Members were encouraged to hear Mencap's support for redeveloping obsolete services and providing more innovative services in partnership with Social Care and Health.
- 6.5.7 In contrast to many of the Learning Disability day centres and services visited by the Review Group, the Matchbox Cafe - an enterprise initiative part of Moseley Day Centre - was an isolated example of a forward thinking and progressive initiative involving users. The Matchbox Cafe is a catering co-operative run jointly by staff of Moseley Day Centre and people with learning disabilities. It is situated in a public building on the outskirts of the city centre and enjoys a good level of trade from members of the public. Matchbox is an excellent example of user involvement in meaningful activities that enable people with learning disabilities to better their life chances. It also demonstrated getting the maximum out of a traditional day centre model.
- 6.5.8 The City Council's expansion of social enterprise initiatives should build on such examples as the Matchbox Cafe and the employment scheme in place at Shelforce.



7 Conclusions and Recommendations

7.1 Conclusions and Recommendations – General

- 7.1.1 Existing models of day services based on traditional day centres are not appropriately meeting the needs of many service users (both in-house and voluntary) and are not in line with the White Paper “Our Health, Our Care, Our Say”.
- 7.1.2 There is an urgent need for the Adults and Communities Directorate to modernise its day service provision. Services appear dated and inflexible. There must be a remodelling of services and a decision taken regarding the need for day services in their current form. The remodelling of services must be based on accurate data about the performance and occupancy levels at current day services and a needs analysis.

	Recommendation	Responsibility	Completion Date
R1	That a plan and schedule must be produced outlining the remodelling of services to make them more person-centred, flexible and fully integrated into the community. This remodelling must challenge the basic premise of day services, looking at key issues including opening hours/days, activities, staffing arrangements and focus on service users needs with a view to modernising and improving services.	Cabinet Member for Adults and Communities	The plan and schedule to be produced by October 2006. There must be substantial service re-modelling beginning by July 2009 and to be completed by July 2011.
R2	That the systems of measuring capacity and occupancy at day centres are reviewed to provide robust and auditable statistics about performance with a focus on outcomes. A full review of all client groups to be carried out with a view to: • Developing robust outcome focused reporting systems. • Plans to have an outcome focus so where possible they meet the re-enablement needs of all current service users. • A focus for all new clients to be on outcomes.	Cabinet Member for Adults and Communities	March 2007



- 7.1.3 Services need to be developed to meet the spectrum of need of service users. There are people who use day services for rehabilitation, social and respite reasons; services need to reflect all of these needs. Assessments and re-assessments must be person-centred and the individual's care plan must specify clear objectives and timescales.

	Recommendation	Responsibility	Completion Date
R3	That a person-centred approach to assessment/ reassessment and care planning is adopted for all service users referred for, or currently receiving day services, and that all options are considered and result in care plans with clear objectives and timescales.	Cabinet Member for Adults and Communities	May 2007

- 7.1.4 For some individuals with highly complex needs there will always be a need for more traditional day services. However, even traditional type services should be modernised and be provided in buildings that are accessible, fit for purpose and closer linked to the community.

	Recommendation	Responsibility	Completion Date
R4	That for those with complex needs, specialist day services should be commissioned in-house or from specialist agencies with the aim of improving an individual's capacity for independent living or provide short breaks for carers. Where appropriate partnerships should be developed with Health and the voluntary sector.	Cabinet Member for Adults and Communities	June 2007

- 7.1.5 The Adults and Communities Directorate needs to engage more fully with the voluntary sector. Where the sector provides day services or alternatives to day services they must receive appropriate financial support.

	Recommendation	Responsibility	Completion Date
R5	That the new Adults and Communities Directorate engage properly with the voluntary sector to develop quality alternative services and that voluntary sector providers are given sufficient financial support to allow them to maintain, plan and develop these e.g. secure three year financial agreements.	Cabinet Member for Adults and Communities	November 2006



Day Services for Adults

	This must involve a move away from existing grant aid arrangements to Service Level Agreements that are functional, specific and measurable.		
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- 7.1.6 The current management arrangements for day services appear inadequate. There is little evidence that priority has been given, leading to little strategic or operational development. Members expect the managerial arrangements within the new Adults and Communities Directorate will result in improved services.

	Recommendation	Responsibility	Completion Date
R6	That the new Adult and Communities Directorate put in place effective strategic and operational management arrangements for services to include monitoring of performance and professional engagement with partners through effective joint commissioning arrangements.	Cabinet Member for Adults and Communities	December 2006

- 7.1.7 There is need for a clearer vision for day services across all the user groups. The recently developed commissioning strategies for older people, people with learning disabilities and people with physical disabilities and carers will result in a commitment being made to the future direction of all services, including day provision. Effective implementation of these strategies will result in more appropriate services being developed.

	Recommendation	Responsibility	Completion Date
R7	That the recommendations from this review be adopted and integrated into the commissioning strategies implementation plans for older people, learning disabilities, physical disabilities and carers, financial planning and resource allocation.	Cabinet Member for Adults and Communities	December 2006

- 7.1.8 As day services are remodelled, the Directorate needs to consider carefully its meal arrangements. Current meal provision within day services perpetuates the dependency model. This needs to change to an enablement model offering service users the opportunity to participate both in the preparation and choice of meals. A re-assessment of other contracted services such as transport needs to be undertaken as a matter of urgency. The City Council needs to give consideration to the development of social enterprises.



	Recommendation	Responsibility	Completion Date
R8	That the re-provision of services include reviewing arrangements with trading services (and other contracted services such as transport) in order to maximise opportunities for service users to develop independent skills and competencies, through training and employment opportunities. Consideration should be given to developing social enterprises as a means of providing training and employment opportunities.	Cabinet Member for Adults and Communities and Cabinet Member for Local Services and Community Safety	April 2007

7.1.9 Transport plays a crucial role in promoting the independence of older people and people with physical and learning disabilities. Without an effective transport strategy the Adult and Communities Directorate will continue to provide a service that creates dependency. The Directorate is also wasting precious resources by not using its fleet of vehicles appropriately. It is essential that an urgent review of transport arrangements is undertaken and recommendations made on how to improve transport arrangements.

	Recommendation	Responsibility	Completion Date
R9	That a review of direct Adults and Communities Directorate transport provision be undertaken to ensure transport facilities are appropriate and necessary and provided for users, in the context of issues like mobility, promoting independence and value for money. This review must include consideration of the utilisation of Ring and Ride and the expansion of travel training.	Cabinet Member for Adults and Communities	December 2006

7.1.10 Charges for service affect whether or not people choose to receive services. The Review Group acknowledge that current fairer charging arrangements may need to be adjusted to ensure that the charging policy is equitable.

	Recommendation	Responsibility	Completion Date
R10	That a review of Fairer Charging be conducted to ensure that the level and scope of fees for people	Cabinet Member for Adults and	December 2006



Day Services for Adults

	using day services are appropriate and in accordance with principles of equality and fairness.	Communities	
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- 7.1.11 Members concluded that it is essential to win the heart and minds of service users and carers. Without the support of users and carers it will be difficult to modernise and shift the direction of services.

	Recommendation	Responsibility	Completion Date
R11	That the Adults and Communities Directorate implement a framework to enable joint commissioning boards and reference groups to engage systematically with and consult users and carers in the development and planning of services.	Cabinet Member for Adults and Communities	October 2006

- 7.1.12 The Direct Payments scheme is a means through which users and carers can purchase alternatives to traditional day services. It enables people to exercise greater choice over their lives and should result in greater flexibility and choice. This scheme needs to be further publicised to increase take up.

	Recommendation	Responsibility	Completion Date
R12	That the Adults and Communities Directorate actively promote Direct Payments as an alternative to directly provided day services as part of offering independence and choice to service users. A progress report on Direct Payments must be produced and reported to the Social Care Overview and Scrutiny Committee.	Cabinet Member for Adults and Communities	December 2006

- 7.1.13 There has been an ever increasing shift towards services being provided at a local level and with greater involvement of the Districts in the management of "well-being services". These are essential to provide support to vulnerable people within the community who would not be eligible for Social Care and Health services.

- 7.1.14 Members expressed great concern that the well-being agenda has not progressed beyond the planning stage. There has been very little practical progress in this area and any discussions are taking place within a policy vacuum. The Adult and Communities Directorate must urgently address the issue of resources and infrastructure for the development of well-being services. A practical delivery model for community well-being services needs to be developed as a matter of urgency and progressed within the districts.



	Recommendation	Responsibility	Completion Date
R13	That in the context of the Adults White Paper and the Adult Commissioning Strategies, the Adults and Communities Directorate must accelerate the development of a delivery model for well-being services. The model must include how Districts will engage and manage the well-being agenda.	Cabinet Member for Adults and Communities and Cabinet Member for Local Services and Community Safety	October 2006

7.1.15 Members acknowledge that this review presents considerable challenge for the Adult and Communities Directorate. The recommendations from this report require a fundamental shift in the way that day services are configured and delivered. In order for the recommendations from this report to be implemented fully, it is recommended that a change agent team is established.

	Recommendation	Responsibility	Completion Date
R14	That given the extensive nature of this report, a strategic change team is established to provide the capacity and direction needed to implement the recommendations put before the City Council.	Cabinet Member for Adults and Communities	October 2006

7.2 Conclusions and Recommendations – Physical Disability

7.2.1 There has been considerable work undertaken to reshape and modernise services for people with a physical disability. It is evident that there has been a commitment within the service to move towards more person-centred, innovative provision. However, there is an opportunity to use current buildings more flexibly whilst engaging with other departments and agencies. A more holistic service would greatly benefit users and carers.

	Recommendation	Responsibility	Completion Date
R15	That the use of Adults and Communities Directorate buildings be extended to provide more clearly defined and flexible services; an action plan must be produced to show how this will be achieved.	Cabinet Member for Adults and Communities	December 2006



Day Services for Adults

- 7.2.2 The Share Options service was highlighted as a beacon of good practice. The service actively diverts service users away from traditional day services. This service needs to be supported and further expanded.

	Recommendation	Responsibility	Completion Date
R16	That the capacity of the Share Options Service be developed to ensure the provision of day and evening services that meets the diverse needs of service users.	Cabinet Member for Adults and Communities	December 2006

7.3 Conclusions and Recommendations – Physical / Learning Disability

- 7.3.1 There are some recommendations that apply equally to people with physical and learning disabilities. One of the key issues for both of these groups is access to education, training and paid and voluntary employment. The Adult and Communities Directorate needs to actively promote services that steer people away from day services and into education, training and employment. The links between current services that support these activities need to be strengthened. The City Council also needs to be more imaginative in exploring potential to develop more social enterprises involving vulnerable people.

	Recommendation	Responsibility	Completion Date
R17	That a joint evaluation of whether the Disability Employment Service (Regeneration portfolio) is appropriately sited within the City Council is carried out. It is the view of Scrutiny that this service should be considered as an integral part of the Community Options Service and strategically directed to assist in the accomplishment of the Adults and Communities Directorate's objectives.	Cabinet Member for Adults and Communities and Cabinet Member for Regeneration	October 2006 *while the evaluation may commence in October 2006, we recognise that it may not necessarily be completed in the same month.
R18	That an effective employment pathway be created with the Disability Employment Service (Regeneration), Community Options, Share Options and other employment related agencies to ensure people with learning and physical disabilities are actively targeted and supported to access education, training, paid and voluntary employment opportunities.	Cabinet Member for Adults and Communities and Cabinet Member for Regeneration	December 2006



7.4 Conclusions and Recommendations – Older People

- 7.4.1 The Commissioning Strategy for Older People sets out the priority for day services and clearly states the direction of travel as:

“To draw a clearer distinction between primary day care opportunities which enable older people to be fully involved in all mainstream social activity, possibly with the support of voluntary and community groups and secondary day care, which will be delivered by the Directorate, in conjunction with Health, on a personalised basis, aimed at restoring people's capacity for independent living.”

	Recommendation	Responsibility	Completion Date
R19	That in light of Recommendation 1, day services are remodelled alongside the development of Special Care Centres and Extra Care Sheltered Housing. Remodelling needs to address the purpose of day services i.e. rehabilitative, respite and social dimensions.	Cabinet Member for Adults and Communities	December 2006

- 7.4.2 The development of special care centres which will be focal points for delivering services to older people with a higher and/or more complex level of needs will also help to shape the future of day services. These Centres will offer a full range of residential and non-residential services for both short and longer term needs.

7.5 Conclusions and Recommendations – Learning Disability

- 7.5.1 It is evident that current day services for learning disabilities are in urgent need of modernisation. They do not appear to meet the requirements of the “Valuing People” White Paper. Also, the Audit Commission has criticised learning disability services in Birmingham. This service user group should be given priority. The Directorate needs to convince users and carers that there is a real alternative to traditional day services, and therefore a flagship service should be developed.

	Recommendation	Responsibility	Completion Date
R20	That in partnership with the Voluntary Sector and Health, the Adults and Communities Directorate establish a flagship model of service as part of the re-provision of existing day services. Users, carers and staff to be fully engaged in the remodelling of services.	Cabinet Member for Adults and Communities	June 2008



Day Services for Adults

- 7.5.2 Members believe that where good practice exists that this should be expanded and replicated. In the context of learning disability services, Members were particularly impressed with the Community Options Service and wish to see this service developed further.

	Recommendation	Responsibility	Completion Date
R21	That the excellent model currently in place at Community Options be developed further and expanded across the city and to other service user groups.	Cabinet Member for Adults and Communities	December 2006

7.6 Conclusions and Recommendations –Tracking

- 7.6.1 Members expect that the Cabinet Member for Adults and Communities will urgently address the issues highlighted through this review. Members of the Social Care Overview and Scrutiny Committee will actively track the recommendations made in this report.

	Recommendation	Responsibility	Completion Date
R22	That progress towards achievement of these recommendations should be reported to the Social Care Overview and Scrutiny Committee in January 2007. Subsequent progress reports will be scheduled by the Committee thereafter, until all recommendations are implemented	Cabinet Member for Adults and Communities	January 2007



Appendix 1: Review Pro-forma

Proposed Scrutiny Review:

Review of Citywide Day Care Services for Adults

1. Review Outline

Subject of review	Review of Citywide Day Care Services for adults
Overview and Scrutiny Committee	Social Care Overview and Scrutiny Committee

Reasons for Conducting the Review

Reasons for conducting this review	To consider reconfiguration of day care services to better meet the assessed need of service users in line with available resources.
Objectives of review / Areas for investigation	To consider assessed needs of those attending 'traditional' day centres (rehabilitation, respite, social). To consider assessed needs of those who need 'day services' who do not attend 'traditional' day centres. To consider best use to resources (staff, buildings, finance) to meet assessed need. To consider partnership with voluntary organisations, Health, Learning and Culture, Housing, Leisure, Employment agencies in service delivery need. To consider community alternatives needed to give choice and flexibility in meeting assessed need.
Outcomes expected from conducting this work	Recommendations and plans for reconfiguration of day centres to better meet needs of all adult service users. Recommendations and plans for development of a range of day services/activities to give choice and flexibility in the way individual needs are met (person centred planning). Recommendations of reconfiguration of services in line with available resources. Service delivery in line with budget. Recommendations re increased partnership working. Recommendations on appropriate charges for the reconfigured day services.



Day Services for Adults

2. Project Plan and Resourcing

Member Involvement

Lead Member	Cllr Len Clark
Other Members involved	Cllrs Barbara Dring, Jim Whorwood, Dilawar Khan, Susan Burfoot, Bill Evans The membership of the group altered part way through the review. The Membership was changed to Cllrs Len Clark, Susan Burfoot, Barbara Dring, Dilawar Khan, Abdul Aziz, Bill Evans
Are all parties on the Overview and Scrutiny Committee involved?	Yes
Key Cabinet Member/Decision Maker	Councillor Sue Anderson, Cabinet Member for Social Care and Health
Other Cabinet portfolios covered	Education and Lifelong Learning Housing

Officer and External Involvement

Link Officer	Lesley Heale
Lead Review Officer	Bill Robertson
Physical Disability	Sally Botteley
Older Persons	Heather Holmes
Learning Disability	Simon Fenton
Mental Health	Catherine Underwood

Council Departments Expected to Contribute

Contact / Department	Contribution Expected
Leisure and Culture	To explore opportunities for and access to services for individuals and groups.
Adult Education	To explore opportunities for and access to services for individuals and groups.
Housing	To provide opportunities for day services in sheltered housing.
Disability Employment Services	To create opportunities for supported and open employment.



External Organisations Expected to Contribute

Contact / Organisation	Contribution Expected
PCTs	To explore opportunities for the development of joint specialist day care.
Employment Agencies	To explore opportunities for further expansion of protective employment.
Voluntary organisations	To explore potential for greater involvement in provision.
User and Carers Groups	To contribute to and comment on development of recommendations.

Publicity and Awareness of the Review

Publicity activities to be undertaken

Time Frame for Core Phases of Review

Phase

Meetings and evidence gathering sessions

Drafting the report

Consideration of draft report by Committee

8-Day Rule: Executive Comment

Reporting to Committee

Reporting to Council Business Management Committee

Reporting to the City Council

Time Required	Completion Date
Information gathering Project Plan Initial Recommendations Consultation Action planning	For Physical Disability Client Group * April 2005
	For Physical Disability May 2005 *
	For Physical Disability May 2005 *
	June 2005
	June 2005
	July 2005
	September 2005

Specific Costs Identified

Anticipated call on Scrutiny Budget

None anticipated



Day Services for Adults

Signed Approval

Signed:

(By Chair on behalf of Overview and Scrutiny Committee)

Date Agreed:

(By Overview and Scrutiny Committee)

Approved:

(Chairman, Co-ordinating Overview and Scrutiny Committee)

Date Approved:

(By Co-ordinating Overview and Scrutiny Committee)



Appendix 2: Glossary of Terms

Acquired Brain Injury

Damage to living brain tissue e.g. following a traumatic brain injury, road traffic accident, and stroke, anoxia or post neurosurgery, resulting in complex impairments in some or all areas of physical, cognitive, behavioral, educational and social functioning.

Fair Access to Care Services

Guidance issued by the Department of Health Councils and Care Trusts about fairer charging policies for home care and other non-residential care, and advice about eligibility for adult social care.

Local Area Agreement (LAA)

This provides a single framework through which government departments can allocate additional funding to a Local Authority and its partners.

National Service Framework

Referred to as the NSF, these are Government documents setting out standards for the best ways of providing health and social care services for particular disease or population groups e.g. older people and people with long-term conditions.

Office for National Statistics

This is the Government department that provides statistical and registration services. ONS is responsible for producing a wide range of economic and social statistics. It also registers life events and holds the decennial census of the population.

Person-centered planning

A process of life planning for individuals, based around the principles of inclusion and the social model of disability. This replaces more traditional outmoded styles of assessment and planning which are based on a medical model approach to people's needs.

Social Model of Disability

The Social Model since has become internationally recognized as the driving force behind the disability agenda and a cornerstone of the disabled people's movement. The Social Model in its simplest changes the focus away from people's impairments and towards removing the barriers that disabled people face in every day life. The barriers can be:



Day Services for Adults

Environmental	Systematic	Attitudinal
For example: Lack of accessible information.	For example: Segregated provision.	For example: Disabled people being seen as expensive, useless or needy.

In the main it is not the impairment that is the problem, or the disabled person, rather it is society's failure to take into account our diverse needs. The Social Model shifts policy away from a medical, charity, care agenda into a rights led, equalities agenda **(Source – Birmingham City Council)**.

Special Care Centres

Offer a full range of residential and non-residential services for older people with both short and longer term needs. Special care centres form the hub of services for older people with chronic health and other disadvantaging conditions, like dementia, who require intensive care management. The range and type of services offered by these Centres varies according to the needs of the communities they serve. These are shortly to be adopted by Birmingham City Council.



Appendix 3 Bibliography

- Association of Directors of Social Services (October 2003) "All our Tomorrows – inverting the triangle of Care"
- Department of Health (2001) "Valuing People: A New Strategy for Learning Disability for the 21st Century"
- Department of Health (March 2005) "Independence, Well-being and Choice - Vision for the future of social care for adults in England"
- Department of Health, (2005) "The National Service Framework for Long-term Conditions"
- Department of Health (January 2006) "Our Health, Our Care. Our Say – A New Direction for Community Services"
- HMSO (1948) "National Assistance Act"
- HMSO (1970) "Chronically Sick and Disabled Persons Act"
- HMSO (1990) "National Health Service and Community Care Act"
- National Statistics Office "Census 2001"
- Social Services Inspectorate (2003) Independence Matters – An overview of the performance of social care services for physically and sensory disabled people"