

A Report from Overview & Scrutiny



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Reports that have been submitted to Council can be downloaded from www.birmingham.gov.uk/scrutiny.





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

- 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



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

- 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	Responsibility	Completion
FOR ALL SERVICE USER GROUPS		Date
(Recommendations 1- 14)		

R1 That a plan and schedule must be produced outlining the remodelling of services to make them more personcentred, 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

	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 dis.18-8.ss0, physical dis.18-8.ss0 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 skill0 and competencis0, through training and employment opportunities. Consideration should be given to developing social enterprises a0 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 fac8-8.ss0 are appropriate and necessary and provided for users, in the context of issus0 like mo18-8.y, promoting independence and value for money. This review must include consideration of the ut8-8sation 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 equa-8.y and fairness.	Cabinet Member for Adults and Communities	December 2006



	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	Responsibility	_* .
FOR PHYSICAL DISABILITY SERVICES		Date
(Recommendations 15 - 16)		

R15

	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	*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



	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
R2	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



- 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 Manger, 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:

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 servs s0o-5(s)1aoTanoo uoo 38D7 ecn the tionalg 38D7



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:

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- 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 tsTJ2a.2022 0 T316



- 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

2667.62024.41.4(1)]Not0tb7r6.01d2r112r0203pleTsv50ce071669s4a39R26y document is "All our Tomorrows, Inverting the Triangle

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.

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

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- 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.



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- 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

• Have equality of access to community life



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

- 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

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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

- 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



- 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



4.4

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

- 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

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



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 aTJ14 TD0.0ov2aTJ14 toaTJ14 bwd in2dpdle .39(d-1.6(ew[s)3wbm Birmingha

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	Capacity	Average	Days Open
	2006/07		Attendance as at	per week
			Dec 2005	
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

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- 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.



Name of the Budget Capacity Average Attendance as

Service 2006/07





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

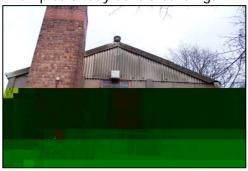
- 6.2.2 Most day centres lack clarity of purpose and vision with little or no emphasis on positive outcomes for service users.
- 6.2.3 There was a "typical" model of day service; this included the time that users spent at the day centre being limited because of staffing arrangements and inflexible transport 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 M.0324 1mb0 -17i0 fe theeeiccudeaicy0 f ee s((e a)01m7(a)5.nde)5.y0lfea ey



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

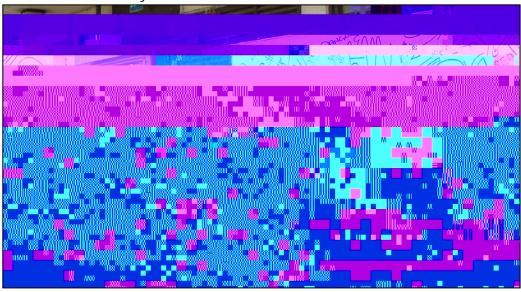
• From the outside premises were uninviting. Some were located in pre-fabricated buildings whilst others looked like large institutions or industrial buildings. At one centre the entrance was covered in graffiti despite staff's attempts to keep it free of graffiti; this is the appalling first impression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

Examples of day centre buildings



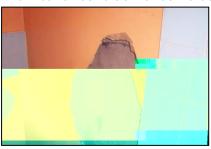


The entrance to a day centre



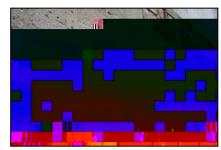
• Buildings had received little or no capital investment or maintenance, leading to the buildings being in a state of disrepair. Members observed problems such as holes in ceilings, plaster coming off walls and general "shabby" interiors.

The interior condition of some day centre buildings



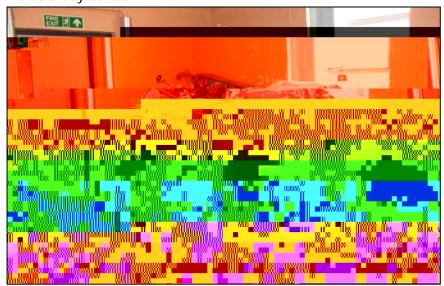






• Many buildings were unsuitable due to their original design, small rooms being used by large groups of service users. Rooms were being used for storage or worse still, were being used for both activities and storage.

Inside a day centre



- 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



- 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 .4hat the re are offer services to specific groups of people e.g. Headway to people with an

6.4.4	There wa	s little	evidence	that	Managers	and	day	service	staff	used	innovative	method	s to
						55			Rep	oort to t	the City Coun	cil 11 July	2006

Wire and the second

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

- 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

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
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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.

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This must involve a move away from existing	
grant aid arrangements to Service Level	
Agreements that are functional, specific and	
measurable.	

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





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
R1 <i>6</i>	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



7.5.2

Appendix 1: Review Pro-forma

Proposed Scrutiny Review:

Review of Citywide Day Care Services for Adults

1. Review Outline



2. Project Plan and Resourcing

Member Involvement

Lead Member Other Members involved Cllr Len Clark

Cllrs Barbara Dring, aJim\arDilawar Khan, Sus7.5Burfoot, Bill7.58 -29.4192 -.44099

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

Specific Costs Identified

Anticipated call on Scrutiny Budget

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

None anticipated

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



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

Appendix 3 Bibliography

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- 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) "Natio.48Tc-0.0310ieD r