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## Late Item – Older People's Day Services – Service Improvement Plan

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# Agenda Item 1a



Originator: Steven Courtney

Tel: 247 4707

Report of the Head of Scrutiny and Member Development

Scrutiny Board (Adult Social Care)

## Date: 23 July 2008

### Subject: Older People's Day Services – Service Improvement Plan

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
Ward Members consulted (referred to in report)	Narrowing the Gap

### 1.0 Introduction

- 1.1 The purpose of this report is to provide the Board with an update on issues around Older People's Day Services, and specifically the service improvement plan.
- 1.2 Attached is the Executive Board due to be considered on 16 July 2008, which report updates Members about progress in respect of the development of day services. It highlights the fact that work has already started in three areas of the city East, West and South and presents implementation proposals for the city.
- 1.3 Details of the outcome(s) from the Executive Board meeting will be provided at the meeting.

### 2.0 Recommendations

2.1 The Board is requested to note the information provided in the attached papers and consider its future involvement in this area of work.

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# Agenda Item 18

Originator: John Lennon

Tel: 2478702

Report of: Director of Adult Social Services

### **Executive Board**

Date: 16<sup>th</sup> July 2008

### Subject: Older People's Day Services – Service Improvement Plan

Electoral Wards Affected:	Specific Implications For:
	Equality and Diversity
	Community Cohesion
Ward Members consulted (referred to in report)	Narrowing the Gap
Eligible for Call In	Not Eligible for Call In (Details contained in the report)

### **EXECUTIVE SUMMARY**

- 1. In February 2007 the Executive Board received a report setting out the position with regard to the day service provided to older people by Adult Social Care Services through its city-wide network of day centres. That report set out key issues relating to the need for the modernisation of the service, outlined features of a new service model and explained how this work was going to be taken forward.
- 2. Members resolved: That the programme to develop further and introduce the new service model outlined in the report be agreed and that further reports outlining progress be submitted to Executive Board.
- **3.** The work on the modernisation of the day service is placed in the wider strategic context. Older people with care needs should be supported in pursuing day opportunities in line with their preferences and needs and in ways which are socially inclusive. This overall approach will require a continuum of provision to ensure an appropriate range of options are available to service users. A day service for older people with significant care needs has a key role to play. The future service model must be able to respond positively, assisting service users when recovering from periods of difficulty and supporting those with complex, long term needs.
- 4. This vision for the service means that a modern day service will enable older people to remain as active citizens, provide the specialist support they need and support their carers effectively. The overriding principle is that physical, mental or sensory Page 245

impairment should not be a barrier to social inclusion and services should be focused on enabling people to remain active within their families and communities. This will mean developing high quality resource centres in each area where information and support is easily accessible for older people and their carers, high quality local and accessible dementia and other specialist provision and a pro-active and well supported voluntary sector.

- 5. The report emphasises the need for investment plans in Adult Social Care to be aligned with these aims. It also explains that Leeds is well placed to take this agenda forward because of its investment in preventative services, the progress it is making with new service developments and initiatives and the work it is doing to make the other services provided by the Council more accessible.
- 6. This report updates Members about progress in respect of the development of day services. It highlights the fact that work has already started in three areas of the city East, West and South and presents implementation proposals for the city. These proposals include initial steps to begin the reshaping of the service and the reduction of the building base.
- 7. With regard to the future of individual units, the position of Richmond Hill is highlighted where there is low occupancy and surplus capacity in that area of the city. The position with regard to the Peripatetic Unit is also set out and proposals are made with regard to its future. The Peripatetic Unit is the one service which operates across different venues during the week. Proposals are being brought forward about this service at an early stage because of concerns about low occupancy levels and the venues not being fit for purpose in the context of developing a modern day service. The report seeks authority to commence consultation regarding the reprovision of current services at Richmond Hill and the Peripatetic Service (not including Otley) into other day services in the City. It should also be noted that day centres are likely to be subject to inspection and regulation by the Commission for Social Care Inspectorate in the future.
- 8. The report explains how this work will be progressed through the development of further locality based plans for the other parts of the city. This process will continue to include consultation and work with older people themselves and other stakeholders.
- **9.** The proposals outlined in this report will enable reinvestment in the service to provide enhanced day opportunities and to contribute to the development of a day service better able to meet the changing needs and aspirations of the older people of Leeds.

### 1. Purpose of the Report

The purpose of this report is to:

- 1.0. Highlight the excellent progress in developing popular and high quality alternatives to day service attendance.
- 1.1. Update Members with regard to work which is being undertaken in Adult Social Care to modernise the day service provided by the Day Centres for Older People and how this fits with the changing strategic context for Adult Social Care.
- 1.2. Confirm for members that this work is consistent with the wider strategic context, the February 2007 Executive Board Report and the findings from consultation with service users and other stakeholders. The work is also in line with that of best practice authorities.
- 1.3. Seek endorsement for the city wide phased implementation of the model for modernised day service described in this report.
- 1.4. Take forward recommendations relating to specific day centres and in doing so release resources to support the development of a redesigned personalised service of better quality and value.

### 2. Background Information

### 2.1 Strategic Context

- 2.1.1 The report to Members in February 2007 laid out the strategic direction for Adult Social Care as set by the ambitions laid out in the White Paper "Our health, our care, our say: a new direction for community services". This envisages social care services which are flexible enough to be closely tailored to individual needs and preferences. Service users should be seen as full members of their communities and services should support them in remaining as independent as possible and able to benefit from the same opportunities as other people.
- 2.1.2 Day centres for older people have traditionally provided a safe environment in which service users can form friendships and participate in social activities. This helps to avoid isolation when social outlets become restricted because of increasing care needs. Appropriate assistance with personal care and other practical support is provided. Attendance at a day centre can be used to complement other services being provided as part of an extensive package of care or to provide respite for a carer.
- 2.1.3 Local consultation, along with analysis of trends in usage of day care, confirm that older people want more choice about day time support in order to remain independent and living in their own homes. Assistance to access social opportunities is a priority along with more specialist support to maintain physical functioning and to provide dementia care.
- 2.1.4 Leeds is well placed to respond to these challenges in relation to older people's services generally and to day services in particular. Previous investment and the work which is being done to keep up to date with new service developments means that there is a wide range of provision to meet different levels of needs. More detail is provided about this in Section 2.2.

- 2.1.5 An important feature of the strategic context with regard to older people's services is the aging population and the implications of there being significantly larger numbers of older people particularly in the over 75 age band. The 25 year projection for Leeds for the 2003 2028 period is that the number of people aged over 75 years of age will grow from 52,300 to 69,200, an increase of approximately 32%. ('Baseline Needs Analysis for Older People in Support of Health and Wellbeing Strategies for Leeds City Council' Moore and Jones 2006)
- 2.1.6 This in turn is linked to a concern about the extent to which older people experience poor health and loss of independence in their later years resulting both in reduced quality of life for the individual and in greater demand for social care services. The available figures indicate that among those over 75 in Leeds over twenty one thousand women and about 11,600 men report that they have a limiting long term illness. This equates to several hundred older people in each ward in the city.
- 2.1.7 It has therefore also been projected that the number of people in this age band in Leeds experiencing the day to day difficulties associated with ill health and disability, for example with self care or domestic tasks, will also increase. It is envisaged that the number of older people over 75 unable to manage at least one self care activity on their own will rise from the current figure of 23,628 to over 30,000 in 2025, with an increase of the same order for those unable to manage at least one domestic task on their own.
- 2.1.8 It must also be anticipated that demands on services for older people with dementia will increase. On the basis of the findings from the Dementia UK Survey the number of people with dementia in Leeds will increase from approximately 9,500 to 11,500 over the next fourteen years, an increase of over 20%.
- 2.1.9 Another aspect which must be considered is the extent of health inequalities and the way in which older people in more deprived areas of the city experience poorer health. Older people who live in those areas are more likely to experience such factors as low income and environmental stresses for example, poor housing conditions or a higher incidence of crime. This highlights the position of older people coping with ill health and increasing frailty living in circumstances which have the potential to exacerbate their difficulties.
- 2.1.10 Appendix 1 provides an overview of the older people's population of Leeds. This is broken down by ward (including the indicator of deprivation for each ward) and shows the incidence of long term limiting illness for all older people.
- 2.1.11 In planning the future of the day service this combination of the impact of ill-health and disability and the uneven effects of social deprivation have been considered.

### 2.2 New service opportunities for Older People

In Leeds over recent years there has been considerable investment by Adult Social Care in the voluntary sector, together with other service developments, resulting in a wider range of options being available for older people now compared with the period when the network of day centres was originally developed.

### 2.2.1 <u>Neighbourhood Networks (See Appendices 2 and 3)</u>

- This well established tradition of creative investment in new services for older people is particularly reflected in the continuing development of the Neighbourhood Network schemes. Many older people who might in the past have begun attending a day centre are now actively involved with Neighbourhood Networks or other appropriate local provision. Projected expenditure for the current financial year on Neighbourhood Networks is over £1.4m. This level of investment supports 38 organisations which together are in contact with over 18,000 older people.
- The Neighbourhood Networks undertake a wide range of activity which contributes to local day opportunities. They are also closely in touch with the wider range of activity going on in their patch, run by churches or held in community centres, for example, which also have much to offer and they are well placed to ensure that older people take full advantage of these.
- These developments in Leeds have resulted in the city's preventative services for older people attracting national attention and prompting visits from other local authorities. It is an example of excellence and is widely supported by partners across the city.

### 2.2.2 Preventative Services

- At the same time there is investment in other initiatives aimed to address the needs of older people in Leeds. 'Older Better' is the strategy to promote healthy and active life for older people and sets out a joined up approach which aims to ensure that all older people in Leeds have access to healthy living opportunities. Link-Age Plus forms part of the 'Older Better' strategy and aims to tackle exclusion faced by some older people. It brings with it additional resources to develop further the network of provision and preventative services for older people.
- Link-Age Plus is working on a number of key priorities:
  - Developing and strengthening partnership structures.
  - Creating better sources of information.
  - Developing and testing the effectiveness of Neighbourhood Networks as local access points for older people.
  - Capacity building in the voluntary sector.
- There are significant developments in the area of mental health. The Partnerships for Older People Project (POPPS) is a set of initiatives focused on improving services for older people with dementia and other mental health needs. The work to modernise day services has taken account of these developments.

### 2.2.3 Assistive Technology

 Government has also provided a grant to develop assistive technology – known as 'Telecare'. This grant is being used to help older people live more independently and enables some remote monitoring as part of an overall care package. For example a fall can trigger an alert and summon assistance. This provides an additional way of maintaining people safely in their own homes and is proving to have particular benefits for older people with dementia. Over 1250 additional older people were supported with telecare equipment over the last year.

### 2.2.4 Direct Payments

The Direct Payments scheme makes it possible for the Council to make a payment to an older person in place of a directly provided service. The older person can then buy a service which fits with their particular requirements, thereby enhancing their ability to exercise control over their care arrangements. In 2002 there were 20 older people utilising direct payments, there are now over 300 older people accessing their support through the use of direct payments and we are expecting this to increase over the next 12 months by at least another 100 (25% year on year growth)

#### 2.2.5 Keeping House

- Keeping House is finding new ways of developing local organisations which can provide domestic services to help older people in their own homes. These services are run as social enterprises, charging for work done, but putting any profit back into the business for the benefit of the community. Over 2,300 households have benefited from these developments.
- Keeping House is also responsible for an information resource which brings together details of domestic service providers across Leeds. This has been extensively disseminated in both electronic and paper form and continues to be developed. Collating figures from different sources and survey results, it is estimated that last year over 3,700 people made use of this resource to look for a service of their choice.

### 2.2.6 Family Placement

 The Family Placement Scheme recruits and approves carers who traditionally have provided short breaks (periods including overnight stays), in their own homes, for older people. More recently the scheme has developed a day service. This offers a flexible and personalised way of providing older people with care and support during the day. Arrangements are made which match the older person with a carer who is able to meet their individual requirements. These day arrangements have proved popular and additional flexibility is offered by the older person having choice as to where they receive the service: in the last financial year 322 older people received the service in their own home. Funding has been committed to expand the service further.

### 2.2.7 Universal access to all Council Services

• Day opportunities for older people have to be seen in the wider context of what is available in local communities, provided by the voluntary sector and by different parts of the Council. Services such as Sport, Parks and Countryside and Libraries are all developing their services to make them more accessible to people with social care needs. There will be an increasing expectation that leisure and social activity opportunities are accessible to everyone.

### 2.3. Current Day Care provision

- 2.3.1. The Adult Social Care day service for older people is currently provided by the Day Centres for Older People (these are listed in Appendix 4a). There are eighteen mainstream centres. These centres vary in size having between twenty and thirty-five places available. This represents a total capacity of some 570 places. However, the number of places available day to day fluctuates because opening patterns also vary. One service, the Peripatetic Unit, provides a service from different sites across the week (more details about the Peripatetic Unit are included in Appendix 4b).
- 2.3.2. There are four specialist centres for older people with dementia. In view of the needs of the older people they support these centres are smaller having fifteen or twenty places and three of the four open seven days per week. The four centres are:
  - The Green, Bailey's Lane, Seacroft, Leeds14.
  - Middlecross, Simpson Grove, Armley, Leeds 12
  - Siegen Manor, Wesley Street, Morley, Leeds 27.
  - Woodhouse, Pennington Street, Leeds 6.
- 2.3.3. Since the previous February 2007 Executive Board report a number of new service developments have taken place in this part of the service. POPPS has enabled service improvements at Middlecross, Siegen Manor and The Green increasing the range of services available on these sites. Outreach services have been developed using the in-house community support service to support older people and their carers both at home and in the local community.
- 2.3.4. Two of the mainstream centres have a dual role, providing a service for people with dementia on two days per week. These are Calverlands in Horsforth and Firthfields in Garforth.
- 2.3.5. Expenditure on the Day Centres for Older People in the last financial year was over £8.9m. Over fifteen hundred older people receive the service. The traditional focus of day centre programmes has been on social activities. They are also able to assist with personal care. The centres provide a building-based service with the majority of staff time devoted to providing support within the building in group settings. There is little opportunity to enjoy a broadly based activity programme.
- 2.3.6. In line with other social care services, since 2005 admission to day centres has been subject to 'Fair Access to Care Services' eligibility criteria established through an individual assessment of need. This has focused the service on service users with more significant care needs.

- 2.3.7. This combination of factors, including the availability of other options and signposting to other services, has resulted in an overall reduction in the number of older people commencing attendance. The changing expectations of older people themselves are believed to be a factor. This is in turn reflected in the current overall occupancy figure for all the mainstream centres of 63% with wide variations between centres. This represents a reduction of 15% over the last three years.
- 2.3.8. The occupancy level in the specialist service for people with dementia is significantly higher an overall average of 95%. This confirms the importance of developing more opportunities for specialist care provision.
- 2.3.9. With regard to day services for older people in Leeds provided by external organisations, it is important to highlight Methodist Homes' dementia service at Bay Tree Resource Centre in Leeds 17 and the Leeds Jewish Welfare Board provision at 'The Hub', also in Leeds 17, which is a good example of services for older people well integrated with other community provision.

### 3. Case for Change

3.1 There is ongoing consultation with older people and carers in addition to specific consultation events that took place in February 2006, June 2007 and November 2007. Throughout people have expressed a desire for more local and flexible services better tailored to meet their needs.

"Older people have changing interests, changing needs, are not an homogenous group so please individualise"

"Need help to know where to go, it is an information nightmare"

"I need more support to care for my husband who has dementia, I need a centre to look after him for a while so I can do other things and have a rest."

"I cannot push the wheelchair to take her out, but it would be good if someone could come to help us so we can do things together – like going to the shops – like we did before. Now the visit to the day centre is the only time she gets out of the house."

- 3.2 The concern about the ill health and loss of independence which older people experience argues for a day service which, working closely in conjunction with other services, is more proactive in assisting older people at those times in their lives when they most need it, for example:
  - to support recovery after a period of difficulty;
  - to enable older people to make the best of their abilities as their care needs increase;
  - to assist them with managing a long term health condition.

It must have an overall approach of helping service users to remain as independent as possible.

3.3 In this context Adult Social Care should provide extended support to those older people whose health and social care needs and personal circumstances warrant a day service which offers a professional and co-ordinated approach to their support and is able to make a significant contribution to maintaining them in their own home PRage 252

and community. In this way the best use will be made of Adult Social Care's skilled and experienced workforce and its ability to work effectively with partners, particularly health.

- 3.4 It has already been noted that needs which have in the past been met by a service user attending a day centre are going be met in a wider variety of ways through accessing local community provision or through more individualised arrangements. The greater flexibility of individual budgets will accelerate this trend. It is therefore anticipated that the overall level of occupancy will tend to fall further.
- 3.5 The increased uptake of Direct Payments illustrates this trend. The number of older people receiving a Direct Payment which enables them to purchase a service of their choice has quadrupled from 77 to 309 in the year from March 2007 to March 2008. New investment of £2m is going into Direct Payments in financial year '08 '09 to support further development in this area.
- 3.6 Adult Social Care in Leeds is well placed to respond to these changes because of its investment in preventative services and the progress it is making with new service developments and initiatives. Work which is being done by other parts of the council such as Sport and Libraries to make their mainstream services more attractive and accessible to people with care needs including older people is also an essential part of the overall approach.
- 3.7 New service developments tested out through the preventative programmes such as Telecare and the Partnership for Older People's Projects ('POPPS', which is undertaking the redesign of services for older people with mental health problems) are grant funded initiatives. Their future will depend on them being successfully incorporated into the mainstream Adult Social Care budget setting process which will require adjustment of existing service and investment patterns.
- 3.8 There is concern that the existing pattern of specialist dementia provision does not provide sufficient capacity nor does it provide adequate geographical spread across the city. This results in long journeys for older people. This is unhelpful for this user group and has the potential for delays in being allocated a specialist place.
- 3.9 As part of the work on the future day service model three early implementers have been developed in the East, South and West areas of the city. The experience so far is that older people and their carers are very aware of issues relating to health and care needs and welcome efforts to develop a more flexible day service which will be proactive in addressing these in a personalised way. They also want to see agencies working more closely together at a local level.
- 3.10 Considered in this wider context the overall size and cost of the current network of Day Centres for Older People there is the need to review this service. Comparative data shows that Leeds is spending nearly seven per cent of its total older people's services budget on its day centres. The average figure for the top performing authorities is just over four per cent. A rebalancing of investment over time will ensure that Leeds responds positively with the further development of a broader base of services offering more choice.
- 3.11 Spare capacity in the day centre sector presents an opportunity to unlock resources which can be used to address investment to develop services more in accord with older people's wishes. This would enable for example:

- Further enhancement of capacity in the voluntary sector to meet the needs of older people with more straightforward needs.
- The promotion of self directed support. In order to meet the minimum performance standard laid down by the Department of Health, Leeds must at least double the number of people utilising direct payments to access services they require to meet their assessed needs.
- Investment to develop centres of excellence capable of delivering high quality and innovative day services with partners.
- Investment in telecare and other preventative services.

### 4. The Vision

- 4.1. It is clear that a modern day service will enable older people to remain as active citizens, provide the specialist support they need and support their carers effectively. The overriding principle is that physical, mental or sensory impairment should not be a barrier to social inclusion and services should be focused on enabling people to remain active within their families and communities.
- 4.2. This will mean developing high quality resource centres in each area where a range of agencies and a pro-active and well supported voluntary sector will provide information and support that is easily accessible for older people and their carers. Such centres will also provide or enable easy access to effective recovery and enablement services, high quality local and accessible dementia and other specialist provision.

### 5. The future model of service

5.1. **A continuum of provision for older people.** Adult Social Care, working with other parts of the Council and external partners, needs to ensure that there is a continuum of provision which makes available a broader range of day time opportunities for older people. Within this overall approach a day service will have an essential role. After extensive consultation it is clear that the new model of service should have the following key elements. For reasons already given Adult Social Care as a service provider will have a particular focus on those elements numbered 3, 4 and 5 in the table.

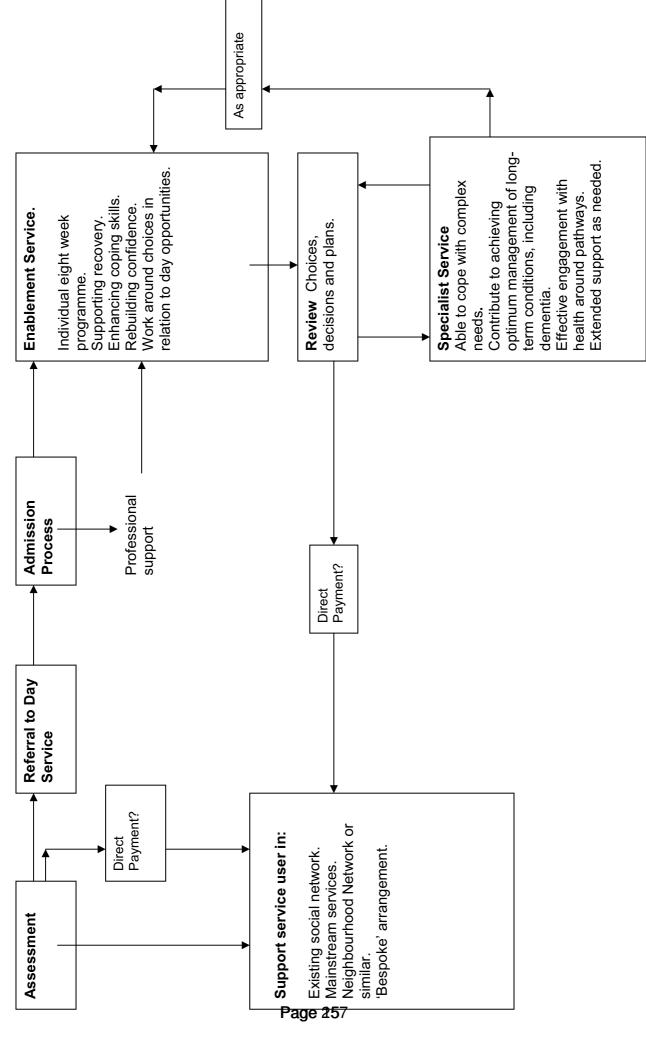
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Service	Type of activity	Aims / Outcomes	Potential Partnerships
1.Individual choice	Supporting service users in using mainstream services such as libraries and leisure centres. Enable users to remain part of their own friendship groups and keep up with their interests. Use of Direct Payments and Personal Budgets/ volunteers to support this.	Access to the same opportunities as other members of the community. Enhancing choice and flexibility.	Voluntary Sector. Other Council services.
2.Community based	Involvement of service users in local opportunities, particularly Neighbourhood Networks. Provides companionship but also contributes to health and well being. For example, through gentle exercise and dance. Opportunities to learn new skills for example using a computer.	Engagement in activities catering for needs and interests of older people. Stimulating mix of activities.	Voluntary Sector. Environment and Neighbourhoods.
3. Day Service: Resource Centre and Recovery and Enablement Service	Collaboration with partners to provide a variety of information and preventative services under one roof. Use of centre base for work with service user and for going out into different situations. Individual, time limited programme to support recovery and enable the older person to be as independent as possible. Rebuild confidence after a difficult time. Help user to develop skills so that they cope as well as possible with their care needs, for example in relation to mobility or personal care. Support carers.	Achieving optimum degree of independence. Support to access satisfying day opportunities.	Voluntary Sector. PCT Leeds Partnership Foundation Trust Council services
4. Day Service: Specialist – physical frailty and long term conditions	More intensive personal support. Use of centre base and outreach. With input from health professionals assist service user in managing their health problems for example in relation medication, diet, exercise. Respite and Carer support.	Achieve optimum management of long term conditions. Support to access satisfying day opportunities.	PCT Hospitals
5. Day Service: Specialist – dementia	Dedicated specialist provision for older people with dementia Respite and Carer support	Achieve optimum management of dementia. Support to access satisfying day opportunities.	Leeds Partnership Foundation Trust

### 5.3. A service model for Adult Social Care's day service.

A service model, which reflects modern social care principles, is required to deliver the Adult Social Care day service components of this continuum of provision. This will be a service for older people with eligible social care needs and this will include the most vulnerable older people. This service will:

- Offer a purposeful, outcome focused and flexible service. This means working out individual programmes with service users and agreeing the changes in the user's life which the service will promote. It also means the service having the capacity to support service users in different settings. In this way support follows the user into the situations where they need it.
- <u>Actively support service users in relation to day opportunities.</u> This is more than providing a service on a particular day. It is about helping users to work out arrangements in relation to day opportunities across their week, in line with their needs and preferences.
- <u>Support recovery and independence</u>. This will be a key feature of the service's overall approach. But it also means being able to provide a structured, time limited recovery and enablement service with an individual programme, goals and Care Manager and / or Therapist oversight. This will be the service normally offered first to older people, unless this is not appropriate because of individual needs.
- <u>Engage with partners</u> It is important to take advantage of opportunities for collaboration in relation to the care pathways which service users follow, more integrated service delivery, better use of buildings and improved access to services.
- <u>Provide support to carers.</u> As well as respite, this might be informal, ad hoc support, for example around day to day issues relating to the service user's care or through planned information sessions and groups.
- <u>Provide specialist services.</u> This is support for older people who are likely to have complex needs arising from long term conditions, including dementia. The day service may well provide one element in a more extensive Care Plan and / or meet needs relating to carer respite. As necessary long-term support can be provided.
- <u>Depend less on building based routines.</u> In order to achieve the flexibility to support service users in a wider range of settings staff will have to be deployed differently. This will mean moving away from the current fixed routine of that day's group of service users all coming in to the centre in the morning and going home together in the afternoon.
- <u>Fit well with the development of Self Directed Support.</u> The day service itself must be personalised and offer real choice, but it must also provide a supportive bridge to other Self Directed Support arrangements. In this context the potential role of an enablement service is being recognised in national guidance.



# Older People's Day Service Pathway

### 6. Phased Implementation

- 6.1 A phased approach is clearly needed to manage these changes.
  - **Phase 1**: Establish a city wide, locality approach to service provision with the centres assuming more differentiated roles to deliver the different aspects of the service model. Create capacity through the re-alignment of some existing resources in ways which closely reflects existing and future demand. Develop a more detailed project plan to take forward these changes.
  - Phase 2: As personalisation rolls out, continue this organic process by refocusing remaining resources thereafter. Fully develop opportunities for working collaboratively with partners. Undertake regular review to ensure resources are appropriately targeted. Develop a capital and workforce development programme to ensure we develop the highest quality service. (A key responsibility for the Chief Officer – Support and Enablement.)
- 6.2 Phase 1 will enable local authority run centres to start to move into their new functions as outlined in Appendix 4b. In doing so it will be possible reduce spare capacity and release resources for investment to support continued modernisation of the service.
- 6.3 In the context of this overall approach it is proposed that day services will no longer be provided by Richmond Hill and the Peripatetic Unit - with the exception of the Peripatetic Unit's provision in Otley where continued local service is needed until a more appropriate way of providing a local service can be achieved. The release of resources will support service development. Appendix 5 provides detail on how continuity of service will be provided to those service users affected.
- 6.4 Fully realising the aspirations of this new city wide approach to day service provision will require a wide ranging programme of work which will take several years to complete. It will also require successful engagement with partners. For example, this will be the case in developing modern, innovative, high quality Resource Centres.
- 6.5 In the new service model the centres will have differentiated roles, providing the key components of the new service model. A centre may have more than one function and be a venue for a different service on different days of the week. There will be more emphasis on the staff teams in neighbouring centres collaborating to provide the service to a locality. Because of the change in the service model Adult Social Care will provide more outreach to service users and where this happens the added benefits of enabling closer collaboration through sharing buildings with partners will be explored. For example, Neighbourhood Networks sometimes struggle to find good quality venues for their activities.
- 6.6 Work is well under way to develop first phase locality plans. This work identifies how different centres will play more differentiated roles to achieve a number of key organisational changes:
  - Re-alignment of resources in line with the identified needs of communities.
  - Allocation of the dedicated capacity to provide an enablement service.

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- Achievement of the appropriate balance between provision for service users with dementia and those whose needs relate to other long term conditions and / or physical frailty.
- Identification of the centres best placed to begin providing outreach.
- 6.7 It is clearly important in managing these changes to have regard for the position of current users of the service and their carers. If changes affect existing care arrangements then service users will be offered a comparable service within the same centre or in another centre in the same part of Leeds, as appropriate. The importance of significant friendship groups is well recognised. Information about other service options will be provided and explored with service users, thus maximising personal choice.
- 6.8 There is experience in the service of successfully managing changes by working them through carefully with staff, service users and carers, for example the change of function at Siegen Manor which now provides a dedicated dementia service.
- 6.9 The plans currently being developed will set out how in each locality these key building blocks of the future service model will be put in place and the contribution which the different day service staff teams will make to this and how different centres will be used.
- 6.10 POPPs has already made it possible to establish outreach capacity in the specialist dementia service and developing this more widely in other parts of the service will build on that experience.
- 6.11 The emphasis in the planning process at this stage is on working within the available resource base (both staff and buildings), taking account of financial plans which, as already indicated, envisage some realignment of resources in order to release investment for other priority areas.

### 7 Implications For Council Policy And Governance

- 7.1 The overall approach being taken to promoting day opportunities for older people with care needs is consistent with the principles laid out in the White Paper, "Our health, our care, our say" and "The Vision for Leeds". It is socially inclusive and seeks to ensure that the benefits of the city are extended to people who might otherwise easily be marginalised.
- 7.2 It is also important to emphasise that this requires a one Council approach. Other parts of the Council such as Libraries, Sport, Parks and Countryside are working to improve the access to their services for socially excluded groups. It is important that a socially inclusive approach to day opportunities is promoted and that there is effective collaboration at a strategic level in the Council and between frontline staff and managers across the different service areas.
- 7.3 Progress with day services modernisation has implications for performance in Adult Social Care, specifically the key performance indicators relating to supporting people at home, Direct Payments and choice.
- 7.4 The approach outlined in this report is also intended to ensure service improvement is in line with Best Value.

### 8 Legal and Resource Implications

- 8.1 The specific proposals detailed in Appendix 4b of this report are completely consistent with the overall approach being taken in Adult Social Care to realign investment plans to support a new configuration of services in line with the drivers which have been detailed.
- 8.2 The proposals set out in this report will reduce expenditure on the Day Centres for Older People by £300k which will contribute towards the plans to invest further in the voluntary sector, Direct Payments and the development of specialist day service provision, with the emphasis on equitable provision for all parts of the City.
- 8.3 The proposals will also require a realignment of transport arrangements as the service becomes more bespoke and focused on enabling active involvement.
- 8.4 The proposals in this report will have an impact on the staff in the individual centres. This process will be managed in the appropriate way in line with Council's Workforce Change policy.
- 8.5 A key aim of rationalising the building base will be to ensure that all those centres which continue in use are attractive and well equipped and have internal layouts which are suitable for delivering the new service model. Asset management plans will need to be developed as appropriate. There will be close collaboration with the Council's asset management section in relation to both current work and longer term implications.
- 8.6 The approach set out in this report is intended to ensure the best use of Council resources in this service area in line with the needs of the people of Leeds and strategic priorities in Adult Social Care.
- 8.7 Consultation with those affected will continue within the statutory framework. The outcome of consultation will be reported to members where required.

### 9 Specific implications for Ethnic Minorities and Disability Groups.

- 9.1 The development of the day service will take full account of the needs of black and minority ethnic communities. The proposed service model places an emphasis on a more individualised service and on the development of close working relationships with local community provision. Older people from minority ethnic groups should be able to access services that reflect their cultural and religious backgrounds as well as their care needs.
- 9.2 Leeds already has a range of specialist provision for black and minority ethnic communities, both in-house and commissioned. These will be included in the modernisation process as the other centres. These centres have good links with representatives of the particular communities which they serve. It will be important to use these partnership arrangements to ensure effective engagement of stakeholders in the change process.

### 10. Summary and Conclusions

10.1 The vision is to enable older people with care needs to be supported in pursuing day opportunities in line with their preferences and interests and in ways which are socially inclusive. This overall approach will require much greater emphasis on

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working out individualised arrangements with service users. (see examples at Appendix 6)

- 10.2 The proposals outlined in this report will enable reinvestment in the service to provide enhanced day opportunities and to contribute to the development of a day service better able to meet the changing needs and aspirations of the older people of Leeds.
- 10.3 In order to secure for older people in Leeds an appropriate range of both care and day opportunities, in line with differing preferences and needs, a continuum of provision is required. This will include care and support for the most vulnerable older people.
- 10.4 Leeds is well placed to deliver this because of its investment in preventative services, the progress it is making with new service developments and initiatives and the work it is doing to make its mainstream services more accessible. There is an excellent opportunity to build on this good work.
- 10.5 This approach to day opportunities for older people with care needs will have to be reflected in reshaping services and investing in arrangements such as Direct Payments which enhance flexibility and service user choice.
- 10.6 In this context a day service for older people with eligible needs has a key role to play in providing a service which is flexible and which enables service users to be as independent as possible.
- 10.7 In the Day Centres for Older People occupancy in the mainstream part of the service is already below two thirds and is expected to fall further as more individualised ways of meeting needs are used more extensively. Adult Social Care therefore recognises that there is an immediate need to divert investment into a model of day service and into other services that give users greater choice and control.
- 10.8 It is therefore necessary in the light of both the strategic direction and financial plans in Adult Social Care to begin reshaping the service and manage some reduction in the building base. This report makes specific proposals to begin this process in a way which is intended to maximise the opportunity to improve the service overall and work with partners.
- 10.9 At the same time work to modernise the day service provided by the Day Centres for Older People will continue and this will include ongoing work with service users and other stakeholders in the different areas of the city.

### 11 Recommendations

- 11.1 Members are asked to endorse the model of a flexible, individualised and socially inclusive approach to the provision of day opportunities for older people with care needs and note the work now underway to modernise the day service for older people in Adult Social Care.
- 11.2 Members are asked to agree the phased approach which forms the basis of further work with stakeholders in relation to planning and implementation for each area of the city.
- 11.3 Members are asked to agree that the programme is developed with the involvement of Local Members and their Area Committees thus ensuring effective and efficient local implementation.

- 11.4 Members are asked to agree that the Phase 1 proposals set out in this report are adopted as a basis for consultation and ongoing work. This includes the specific proposed reprovision detailed in respect of Richmond Hill, and the Peripatetic Unit in para 6.3. Members are asked to receive a report on the outcome of the consultation relating to the future of those units by November 2008.
- 11.5 Members are asked to receive further reports in 2009 on the outcome of the wider consultation about locality plans and the results of the ongoing work as the modernisation of older people's day services progresses.

### APPENDICES

1.Older People's population by ward showing incidence of limiting long term illness.

2.Neighbourhood Network coverage.

**3.Examples of the work of the Neighbourhood Networks.** 

4a. Adult Social Care Day Centres: Summary map and table showing the existing day centres.

4b. Adult Social Care Day Centres: Options for Future Configuration.

5.Day Centres with the capacity to offer alternative places to service users affected by the proposals.

6.Different ways of meeting older people's needs in relation to day opportunities.

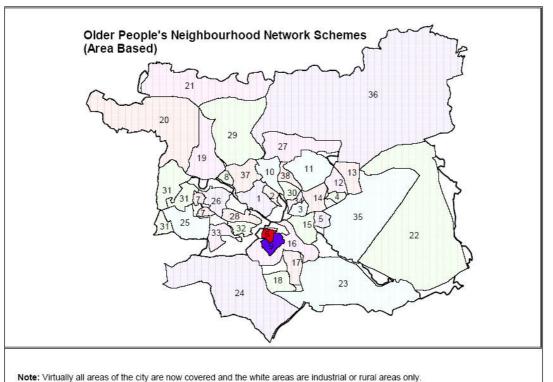
# Appendix 1 Older People's population by ward (including indicator of degree of deprivation) showing incidence of limiting long term illness.

			All persons aged 65-84 years		All persons aged 85 years and over	
		IMD 2007				
		Number of				
		SOAs				
	Tatal	ranked in				
	Total number	most		Number		Number
	of	deprived 10%	All	with	All	with
Ward	SOAs	nationally	people	LLTI	people	LLTI
Adel & Wharfedale	12	0	3104	1219	298	205
Alwoodley	14	2	3577	1619	406	296
Ardsley & Robin Hood	12	0	2048	1075	209	150
Armley	16	5	2800	1450	369	275
Beeston & Holbeck	14	6	2887	1457	408	296
Bramley & Stanningley	16	4	2835	1445	295	232
Burmantofts & Richmond						
Hill	16	13	3013	1699	363	261
Calverley & Farsley	14	0	3043	1431	337	244
Chapel Allerton	13	6	2391	1317	209	164
City & Hunslet	12	9	1781	1083	238	181
Cross Gates & Whinmoor	15	1	3854	1949	351	251
Farnley & Wortley	16	5	3263	1619	340	251
Garforth & Swillington	13	0	2931	1520	342	250
Gipton & Harehills	16	14	2592	1478	337	240
Guiseley & Rawdon	16	0	3221	1428	409	297
Harewood	13	0	3174	1270	389	282
Headingley	14	0	906	454	161	127
Horsforth	14	0	3159	1364	406	275
Hyde Park & Woodhouse	13	2	1293	790	213	167
Killingbeck & Seacroft	17	10	3509	2005	407	274
Kippax & Methley	14	0	2477	1353	276	210
Kirkstall	14	1	2729	1508	388	300
Middleton Park	17	11	3316	1916	317	249
Moortown	14	1	3248	1554	503	373
Morley North	14	0	2560	1264	257	205
Morley South	14	0	2581	1308	357	270
Otley & Yeadon	13	0	3048	1439	405	283
Pudsey	15	0	3181	1571	405	313
Rothwell	15	0	3055	1527	344	260
Roundhay	17	1	3206	1415	515	341
Temple Newsam	13	4	2726	1298	302	229
Weetwood	16	0	3386	1592	485	355
Wetherby	14	0	3241	1319	375	246
Leeds	476	95	94135	46736	11416	8352

### Key to abbreviations:

SOA	.Super Output Area
IMD	Index of Multiple Deprivation
LLTI	Limiting Long Term Illness





**Older Peoples Neighbourhood Network Schemes** 

### Key to Map References

- Older Active People 1
- Caring Together in Woodhouse & Little London 2
- 3 Burmantofts Senior Action
- South Seacroft/Brooklands Good Neighbours Scheme 4
- The HOPE Project Halton Moor & Osmondthorpe 5
- Holbeck Elderly Aid 6
- 7 Stanningley & Swinnow Live at Home
- 8 Hawksworth Wood Elderly Care Project
- 9 Hamara
- Meanwood Elders Neighbourhood Action Team Community Action for Roundhay Elderly 10
- 11
- North Seacroft Good Neighbours Scheme 12
- Swarcliffe Good Neighbours Scheme 13
- Action for Gipton Elderly (AGE) 14
- 15
- Richmond Hill Elderly Aid South Leeds Live at Home Scheme Belle Isle Elderly Winter Aid Middleton Elderly Aid 16
- 17
- 18
- Horsforth Live at Home Scheme 19
- 20 Aireborough Voluntary Services (AVSED)
- 21 Otley Action for Older People
- 22 Neighbourhood Elders Team
- 23 Rothwell Live at Home Scheme
- 24 Morley Elderly Action
- 25 Pudsey Live at Home Scheme
- 26 Bramley Elderly Action
- Moor Allerton Elderly Care 27
- Armley Helping Hands 28
- Older People Active in their Locality (OPAL) 29
- 30 Leeds Black Elders Association\* & West Indian Family Counselling Service
- North Pudsey/Farsley Live at Home 31
- 32 Wortley Services (through Armley Helping Hands)
- 33 Neighbourhood Action in Farnley, New Farnley & Moor Top
- 34 Montague Burton Resource Centre
- 35 Crossgates Good Neighbours Scheme
- 36 WISE (Wetherby & Surrounding Area)
- 37 Supporting The Elderly People
- 38 Chapel Allerton Scheme (under development December '06)\*

\* area services for black and minority ethnic (BME) elders,

which also provide services beyond area boundaries.

There are other schemes operating across wider areas or city-wide.

Further information on all above and on the services for BME communities is available in the Older People's Neighbourhood Network Scheme Booklets.

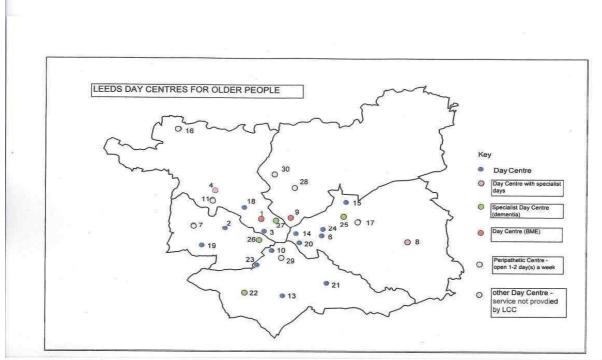
### Appendix 3. Examples of the work of the Neighbourhood Networks.

These are some of the ways in which Neighbourhood Networks are helping with day opportunities for older people in their areas.

Basic computer lessons	Arts and crafts
Book and talking tape lending library	Befriending service
Coffee mornings	Coffee morning
Craft group	Day trips
Friendship group	Education project
Men's group	Shopping bus
Shopping trips	Social group
Singing group	Exercise group
Loan of wheelchair	Dancing and gentle exercise
Friendship group	Stroke club
Gentle exercise	Swimming
Lunch club	Coffee mornings
Trips and outings	Library service
Theatre group	Reminiscence
Bereavement support	Singing
Stroke club	Bereavement support
Support for carers and carers' group	Tai Chi and therapeutic massage Mental
Shopping trips	health support group

# Appendix 4a. Adult Social Care Day Centres: Summary map and table showing the existing day centres.

(Some services not provided by LCC also included: see no's 28-30)



Leeds Day Centres for Older People

Map Ref	Establishment	Postcode	Service
	Apna	LS6 3BJ	Elderly
2	Bramley Lawn	LS13 3RG	Elderly W/E
	Burley Willows	LS4 2HE	Elderly W/E
4	Calverlands	LS18 5LA	
6	Doreen Hamilton	LS9 0NH	Elderly W/E
7	Farfield (Wed, Fri)		Elderly
8	Firthfields		Eld Spec
9	Frederick Hurdle	LS7 3EZ	Elderly W/E
10	Holbeck		Elderly W/E
11	The Willows (Mon)	LS18 5DY	Elderly
13	Laurel Bank		Elderly W/E
14	Lincoln Fields	LS9 7SG	Elderly
15	Naburn Court		Elderly W/E
16	Otley (Thur)	LS21 3AG	
17	Pendas Way (Tues)	LS15 8LE	
18	Queenswood Drive		Elderly
19	Radcliffe Lane		Elderly W/E
20	Richmond Hill		Elderly
21	Rose Farm	LS26 ORA	
22	Siegen Manor	LS27 9EE	
23	Springfield		Elderly W/E
24	Wykebeck Valley		Elderly
25	Green		Eld Spec
26	Middlecross	LS12 1QG	
	Woodhouse		Eld Spec
	Jewish Welfare Community Centre		faith
29	Potterdale Resource Centre		Mental Health OF
30	Bay Tree Resource Centre		Dementia

## Appendix 4b. Adult Social Care Day Centres: Options for Future Configuration

Centre	Time limited Recovery and Enablement Service .	Specialist – Physical frailty and long term conditions	Specialist Dementia	Capacity Release	Comment
North East					
Frederick Hurdle (LS7)		0	0		BME provision – see note
East					
Lincoln Fields (LS9)		0	0		
Firthfields (LS25)		0	0		Already provides 2 days dementia service.
Naburn Court (LS14)	0	0			
Wykebeck (LS9)	0				Resource Centre early implementer.
Doreen Hamilton (LS9)		0			
The Green (LS14)			0		Already full time dementia service.
Richmond Hill (LS9)				0	See note
Pendas Way (Tuesday) (LS15)				0	Peripatetic unit – see note
South					
Rose Farm (LS26)	0	0			
Laurel Bank (LS10)		0	0		
Springfield (LS11)		0			
Holbeck LS11)	0	0			
Siegen Manor (LS27)			0		Already full time dementia service.
North West					
Calverlands (LS18)		0	0		See note. Already provides 2 days dementia service.
Burley Willows (LS4)	0	0			
Queenswood Drive (LS6)	0	0			
Apna (LS6)		0			BME provision
Woodhouse (LS6)			0		See note. Already full time dementia service.
Willows (Monday) (LS18)				0	Peripatetic unit – see note
Otley (Thursday) (LS21)					Peripatetic unit – see note
West					
Radcliffe Lane (LS28)	0	0			Already providing recovery and enablement
Bramley Lawn (LS13)		0			
Middlecross (LS12)			0		Already full time dementia service.
Farfield (Wednesday and Friday) (LS28)				0	Peripatetic unit – see note

### Appendix 4b (cont.)

### Notes on the table:

- North East. It should be noted that specialist dementia provision in North East is augmented by the commissioned service at Bay Tree (provided by Methodist Homes) and there is also the new fully functioning inter-generational resource centre provided by Leeds Jewish Welfare Association.
  However, work will still be needed over time to manage a shift of staffing resources in favour of North East to achieve an appropriate level of service. As already happens, some centres in adjoining areas will also provide coverage of North East.
- Woodhouse, Calverlands and plans for North West. Woodhouse which is a specialist dementia day centre is regarded as being geographically not well placed, necessitating too much travelling for service users. The preferred plan is to transfer the specialist dementia function to Calverlands in Horsforth. Given current occupancy levels there and elsewhere in North West and the implications of the Willows being made surplus, fully achieving this change of function will require careful management over a significant period of time. However, once this has been achieved, then Woodhouse could be wound down as a building based provision and the staffing capacity transferred to North East.
- The contribution of other day service providers. It is important to note that this table is focused on Adult Social Care day centres and does not attempt to capture the services of other providers. There is a range of day service provision for older people in Leeds, particularly with a focus on the needs of the black and minority ethnic and faith communities. Some of this provision is commissioned by Adult Social Care. The valuable contribution made by this sector is well recognised. The need for effective links and good co-ordination with these providers around the delivery of the service model is one of the things which will be addressed as the locality plans are developed in more detail.

### Richmond Hill

The surplus day centre capacity in Leeds 9 provides an opportunity to improve the range of services in the East through increased collaboration with the voluntary sector. The building is over thirty years old and its basic, open plan interior does not lend itself to the provision of a quality service. Occupancy at Richmond Hill is the lowest at 45% with attendance ranging between 17 and 6 across the week against a capacity of 25 and a lack of new referrals. 30 older people receive a service. Five of the service users at Richmond Hill already attend other day centres in the area.

The Richmond Hill site adjoins the Butterfield Manor site which is already surplus. The advice from the Development Agency is that the marketability of the Butterfield Manor site would be significantly enhanced if the Richmond Hill site was added to it.

### • The Peripatetic Unit

The Peripatetic Unit is the only part of the day service which does not have a single base. The staff team rotates around a number of venues in different parts of Leeds in the course of the week as follows:

Farfield, Farsley, Leeds 28 on Wednesday and Friday. The Willows, Horsforth, Leeds 18 on Monday Penda's Way, Crossgates, Leeds 15 on Tuesday. Civic Hall, Otley on Thursday. This service is provided in halls or community rooms. There are concerns about the limitations of the facilities at these venues which comprise a single large room. This lack of private space does not lend itself to providing an individualised service. The quality of the environment provided does raise issues of service user dignity. There are no bathing or laundry facilities. All venues lack additional adaptations such as hoists and so these venues are not suitable for providing day services to older people with more significant care needs. As a consequence it is not possible to see a future for them in the context of the plans being made for Adult Social Care day services.

Referrals to this service are declining and service users can all be offered alternative places at nearby purpose built centres.

There is no day centre in or near to Otley and the existing arrangement will need to be maintained, pending a more detailed review in North-West Leeds. The aim will be to find a voluntary sector partner and decide on the most appropriate option for the future of this arrangement. There will also be discussions with the NHS to explore the potential for a joint approach to local provision for older people with more complex needs.

### Appendix 5.

# Day Centres which can offer alternative places to service users affected by the proposals.

Day Centres affected by the proposals		Alternative Day Centres			
Name and location	Average no. of service users attending each day + total on register.		Name and location	Current occupancy level.	Total no. of places .
Richmond Hill, (LS9)	Mon Tues	16 12	Doreen Hamilton, Leeds 9.	58%	30
	Wed 6 Fri 17 Total on register 30		Lincoln Fields Leeds 9. Wykebeck Valley, Leeds 9.	58% 51%	25 30
The Peripatetic Unit.					
Farfield, Farsley, (LS28)	Wed 16 Fri 12		Radcliffe Lane, Pudsey, Leeds 28	51%	35
	Total o	n register: 17	Bramley Lawn, Bramley, Leeds 13.	40%	30
The Willows, Horsforth, (LS18)	Mon	23	Calverlands, Horsforth, Leeds 18	65%	35
	Total o	<b>n register:</b> 26	Queenswood Drive, Leeds 6	80%	30
Penda's Way, (LS15)	Tues 7		Naburn Court, Leeds 14	48%	35
			Firthfields, Garforth, Leeds 25	64%	30
			Doreen Hamilton, Leeds 9	58%	30
	Total o	<b>n register</b> : 10	Wykebeck Valley, Leeds 9.	51%	30

### Appendix 6. Different ways of meeting older people's day service needs.

Social workers are now addressing the needs of older people in relation to day opportunities in ways which fit closely with individual needs and preferences. These two examples both relate to older people with dementia.

Mrs A has a diagnosis of Alzheimer's disease and has lived alone since her partner was admitted to residential care approximately one year ago. She has one son who visits as often as he can. She receives a package of community support to assist with personal care and meals. To enable her son to go on holiday, Mrs A has respite care within a residential setting.

Mrs A is a very sociable woman but as her dementia has progressed she often uses bad language and that can offend other people. It was not felt that Mrs A required specialist EMI day services. The social worker explored the possibility of a Family Placement Scheme carer offering a day care service and Mrs A now visits the carer once a week in her home. The carer is able to spend time pursuing activities that Mrs A enjoys, e.g. baking and walking. Mrs A and her son are very happy with this arrangement and feel that it meets her needs very well.

Mrs B lives with her daughter, who has a young family. Mrs B has severe dementia but is physically very active. Day care in a specialist setting was provided for Mrs B to enable her daughter to pursue a university course. However, although Mrs B's daughter has been happy with the service provided, she feels that her mother requires one to one stimulation.

The use of direct payments has been explored with Mrs B's daughter to employ a personal assistant. It is envisaged that Mrs B will be supported to pursue and enjoy the activities that she could when she was independent, such as dancing and visiting museums. It will also provide respite for her daughter so she can spend time with her family.