

scrumptious ('skrʌmpʃəs) *adj.* *Inf.* very pleasing; delicious — 'scrumptiously *adv.*

scrumpy ('skrʌmpɪ) *n.* a rough dry cider, brewed esp. in the West Country of England.

scrunch ('skrʌntʃ) *vb.* **1.** to crumple or crunch or to be crumpled or crunched. — *n.* **2.** the act or sound of scrunching.

scruple ('skrʌ:pəl) *n.* **1.** a doubt or hesitation as to what is morally right in a certain situation. **2.** *Arch.* a very small amount. **3.** a unit of weight equal to 20 grains (1.296 grams). — *vb.* **4.** (*obs.* when *tr.*) to have doubts (about), esp. from a moral compunction.

scrupulous ('skrʌ:pjʊləs) *adj.* **1.** characterized by careful observation of what is morally right. **2.** very careful or precise. — 'scrupulously *adv.* — 'scrupulousness *n.*

scrutinise or **-nize** ('skrʌ:tɪnaɪz) *vb.* (*tr.*) to examine carefully or in minute detail. — 'scruti**niser** or **-nizer** *n.*

scrutiny ('skrʌ:tɪni) *n.* **1.** close or minute examination. **2.** a searching look. **3.** official examination of votes [from Latin *scrūtīnium* and *scrūtārī* to search even to the rags, from *scrūta*, rags, trash.]

scuba ('skju:bə) *n.* an apparatus used in skindiving, consisting of a cylinder or cylinders containing compressed air attached to a breathing apparatus.

scud (skʌd) *vb.* **scudding, scudded.** (*intr.*) **1.** (esp. of clouds) to move along swiftly and smoothly. **2.** *Naut.* to run before a gale. — *n.* **3.** the act of scudding. **4. a.** a formation of low ragged clouds driven by a strong wind beneath rain-bearing clouds. **b.** a sudden shower or gust of wind.

scuff (skʌf) *vb.* **1.** to drag (the feet) while walking. **2.** to scratch (a surface) or (of a surface) to become scratched. **3.** (*tr.*) *U.S.* to poke at (something) with the foot. — *n.* **4.** the act or sound of scuffing. **5.** a rubbed place caused by scuffing. **6.** a backless slipper.

scuffle ('skʌfl) *vb.* (*intr.*) **1.** to fight in a disorderly manner. **2.** to move by shuffling. — *n.* **3.** a disorderly struggle; the sound made by scuffling.

scull (skʌl) *n.* **1.** a single oar moved from the stern of a boat to propel it. **2.** one of a pair of handed oars, both of which are pulled by the same person. **3.** a racing shell propelled by a single oar. **4.** an act, instance, period, or distance. **5.** to propel (a boat) with a scull. — 'sculler *n.*

scullery (skʌləri) *n., pl. -leries.* *Chiefly Brit.* a small part of a kitchen where kitchen utensils are kept.

scullion ('skʌljən) *n.* **1.** a mean or despicable person employed to work in a kitchen.

sculpt ('skʌlp) *vb.* **1.** variant of **sculpture**. **2.** to carve. — *n.* **3.** also: **sculp.**

(*fem.*) **sculptress** *n.* a female sculptor.

sculpture ('skʌltʃə) *n.* **1.** the art of making a three-dimensional work of art by carving wood, stone, or metal, etc. **2.** works of art in this medium.

by natural processes. — *vb.* (*mainly tr.*) **4.** (*also intr.*) to carve, cast, or fashion (stone, bronze etc.). **5.** to portray (a person, etc.) by means of sculpture. **7.** to decorate with sculpture. — 'sculptural *adj.*

scumble ('skʌmbəl) *vb.* **1.** (in painting and drawing) to soften or blend (an outline or colour) with an upper coat of opaque colour, applied very thinly. **2.** to produce an effect of broken colour on doors, panelling, etc. by exposing coats of paint below the top coat. — *n.* **3.** the upper layer of colour applied in this way.

scunner ('skʌnə) *Dialect, chiefly Scot.* — *vb.* **1.** (*intr.*) to feel aversion. **2.** (*tr.*) to produce a feeling of aversion in. — *n.* **3.** a strong aversion (often in **take a scunner**). **4.** an object of dislike.

scupper¹ ('skʌpə) *n.* *Naut.* a drain or spout allowing water on the deck of a vessel to flow overboard.

scupper² ('skʌpə) *vb.* (*tr.*) *Brit. sl.* to overwhelm, ruin, or disable.

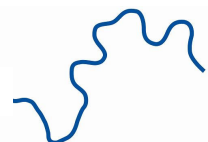
scurry ('skʌri) *vb.* **-rying, -ried.** **1.** to move about hurriedly. **2.** (*intr.*) to whirl about. *n., pl. -ries.* **3.** the act or sound of scurrying. **4.** a brisk light whirling movement, as of snow.

scut (skʌt) *n.* a small animal, esp. one of animals such as the deer or rabbit.

scuttle¹ ('skʌtl) *vb.* **1.** to move quickly. **2.** *Dialect chiefly Brit.* to move quickly, esp. to move vegetables, etc. **3.** to move quickly, esp. to move quickly behind the back. **4.** to run or move quickly. **5.** to run or move quickly. **6.** to run or move quickly. **7.** to run or move quickly. **8.** to run or move quickly. **9.** to run or move quickly. **10.** to run or move quickly. **11.** to run or move quickly. **12.** to run or move quickly. **13.** to run or move quickly. **14.** to run or move quickly. **15.** to run or move quickly. **16.** to run or move quickly. **17.** to run or move quickly. **18.** to run or move quickly. **19.** to run or move quickly. **20.** to run or move quickly. **21.** to run or move quickly. **22.** to run or move quickly. **23.** to run or move quickly. **24.** to run or move quickly. **25.** to run or move quickly. **26.** to run or move quickly. **27.** to run or move quickly. **28.** to run or move quickly. **29.** to run or 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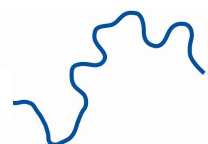
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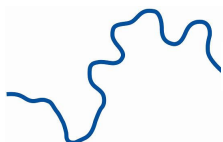
FOREWORD

The Health, Housing and Adult Services Overview and Scrutiny Committee requested that a Task Group be set up to look into the proposals put forward by the Cabinet Member for Adult Social Care to see whether other proposals could be brought forward which would more fit a user perspective, their care needs, transport requirements and lead to a longer term strategy for Adult Social Care within our Borough.

I would like to thank all those members who took part so enthusiastically, gave of their time and got so immersed in this extremely interesting task group.

Councillor Sue Jones

Chair of the Health, Housing & Adult Services O&S Committee



INTRODUCTION

I present this Task Group Report to all Cabinet Members in the hope that the recommendations we make will build on those already envisaged by both members and users of Day Centres in the Borough. Our main driver was to save £315,000 from the budget as proposed by the Cabinet Member. It has become clear over the 5 day length of this task group, that much more consultation should have been carried out with our voluntary sector colleagues, who have a wealth of skill, knowledge, expertise and drive to work with the local authority to provide high standards of care in our day centres.

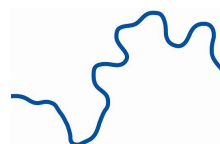
No longer should it be the prerogative of the local authority to provide such services and indeed in Richmond upon Thames we are extremely lucky in having such a thriving voluntary sector, who we ignore at our peril. I would like to thank all those witnesses who came forward from all areas of the local authority and voluntary sector to aid us in our deliberations, their support and knowledge was invaluable.

It became obvious from the earliest meeting that we needed to look at the present structure and see how fit for purpose it was, how we could, at the same time as saving money, over time build a robust structure for present and future users. We therefore have several recommendations about alterations to the present structure and out sourcing of delivery, which presents interesting possibilities and further investigation should be carried forward.

I would like to give my thanks not only to all task group members but the excellent support given by Bernadette Lee, Health Scrutiny Adviser and Louise Hall, Democratic Services Officer, without whose assistance this report would not be before you today.

Cllr Sue Jones

Chair of the Intensive Day Care Centres Scrutiny Task Group



EXECUTIVE SUMMARY AND RECOMMENDATIONS

1. Intensive Day Care Centres (IDCCs) for vulnerable older adults are part of a range of community services to enable these people to maintain or improve their well-being and independence. They act as a bridge between community and full nursing care and provide an essential support to carers who are often elderly and less physically able as well. The Task Group was impressed by the quality and provision provided by the IDCCs and by the high regard in which they were held. In the current economic climate the Task Group acknowledged that the overall usage of the centres had been declining and the need for the Borough to address this and develop a more cost effective service.

2. **A Strategic Vision**

The Task Group would like to see a longer term strategy for the provision of community care and support for vulnerable older adults being developed as part of the proposals for reducing the costs of providing this care. This should capitalise on the resources, expertise and desire that exist in the borough, across the statutory and voluntary sector, to continue to provide high quality services for this client group. The proposals in the 2008 Review of Older Person's Day Care and Support should also be re-visited.

(Recommendations 1 , 2, 13, 16 & 17).

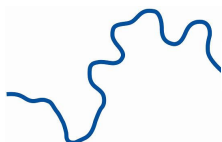
3. **Short Term Savings**

The potential to make short term savings to the current the running costs of the Intensive Day Care Centres should be further investigated including costs for staffing, overheads, transport and meals.

(Recommendations 3 & 4).

4. **Intermediate Term Savings**

The potential for Twickenham IDCC to be run in collaboration with the voluntary sector and to widen the client group who could be supported there should be explored.



The possibility of Tangley Hall IDCC either being run in partnership with the voluntary sector or outsourcing it to another suitable organisation, with lower running costs should be considered.

(Recommendations 5 & 6)

5. Revenue Generation

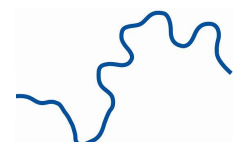
The IDCCs are very highly thought of facilities and they could be promoted even more both to potential Richmond users and those in neighbouring local authorities. This should include ensuring that all those who are in contact with this clients group being made aware of them. There is also the potential for their use by a wider client group, particularly people with functional mental illness.

(Recommendations 10, 11 & 12)

6. Working in Partnership

The Task Group would like to see the further development of the good partnership working that exists with our health partners and together to look at the opportunities that exist in the IDCCs for re-ablement work.

(Recommendation 16)



PART I – ROLE AND FUNCTION OF THE TASK GROUP

BACKGROUND TO THE TASK GROUP

7. At the meeting of the Health, Housing & Adult Services Overview and Scrutiny Committee on 11 November 2010 it was agreed to set up the Task Group. At the initial meeting on 23 November 2010 the group established the following terms of reference:
- i) To consider the Budget Review implications for the Intensive Day Care Centres in the Borough and for their users and carers.
 - ii) To consider the closure of Tangle Hall and Twickenham Intensive Day Care Centres and consider the savings identified in the Adult Social Care budget by the proposed closures and attempt to identify the same savings through other means.
 - iii) To make recommendations to the Cabinet meeting on the 24th January 2011 on alternative ways to make the required savings.
 - iv) To report back to the Health, Housing & Adult Services Overview & Scrutiny Committee on the 6th of January 2011.

8.

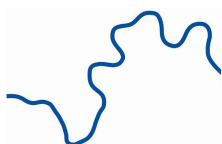
TASK GROUP MEMBERSHIP

Cllr Sue Jones
–
TG Chairman

Cllr Meena
Bond

Cllr Frances
Bouchier

Cllr Liz Jaeger

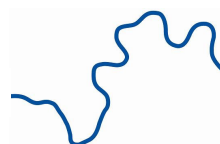


PART II – FINDINGS

OUTLINE OF THE PROBLEM

Proposals for Intensive Day Care Centres in LB Richmond upon Thames

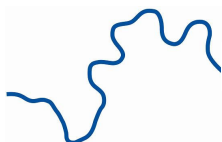
9. The proposed budget reductions and efficiencies for Adult and Community Services following the Base Budget Review in response to the expected public sector funding decreases and the Council's aim of minimizing Council Tax included a proposal to reduce the number of Intensive Day Care Centres from four to two from April 2011. It was hoped that this would generate a budget saving of £315,000 over the next three years.
10. The proposal is for Tangle Hall and Twickenham Intensive Day Care Centres to be closed and to continue to provide a service for all those eligible at Ham & Sheen Lane Intensive Day Care Centres. The rationale for the closure is based on a decreased demand for these services over the last three years and the centres not being used to capacity. Service Users, Carers and staff at the centres were being consulted on these proposals as well as those for changes in the Self Directed Support (SDS) Contributions Policy and the Eligibility Criteria for Adult Social Services. The consultation was closing on the 10th of December and an initial report was due on the 20th of December.
11. The Intensive Day Care Centres (IDCCs) provide support for older people in the Borough and respite for their carers. Sheen Lane & Twickenham IDCC are for older people who are physically frail and Tangle & Ham IDCCs for older people with a diagnosis of dementia.
12. In addition to these four centres the Borough funds eight social day centres across the borough run by voluntary organisations for people with lower levels of need.



13. The proposals for the reconfiguration of the IDCCs were considered with the other budget proposals at a special Health, Housing & Adult Services Overview & Scrutiny Committee meeting on the 15th October 2010. At the Health, Housing & Adult Services O&S meeting of the 11th November the committee decided to create a short Task Group to consider the proposed closures of Tangley Hall and Twickenham IDCCs and attempt to identify other means of achieving these savings. They would report back to the committee in time for their recommendations to go to the Cabinet meeting on 24th January 2011 where the decision on the proposals would be made.
14. The Task Group had a very short timescale in which to work and that imposed limitations on what could be undertaken. Members of the Task Group considered its work to be a starting point for looking at alternative ways to achieve the savings required in the current economic situation and would like the opportunity to extend their work further and consider the issues in much more detail. Whilst a great deal of ground was covered there was insufficient time to arrange a comprehensive list of witnesses and to engage expert social care input.
15. The committee acknowledge the extensive work already undertaken by Adult Social Care on the proposals for reconfiguring the IDCC service and the time and effort they have put into providing the Task Group with information and advice. The results of the consultation work undertaken by Adult Social Care on the proposals will also be considered at the Overview & Scrutiny Meeting on 6th January 2011.

Why should this issue be of concern to the Council?

16. The Health, Housing & Adult Services Overview & Scrutiny Committee (H,H & AS O&SC) heard the concerns expressed by users of the service and their carers as well as members of the public over the proposed closures of two of the IDCCs. Members of the committee had also been contacted individually by concerned individuals and by members of the voluntary sector in the Borough. There was sufficient disquiet about the

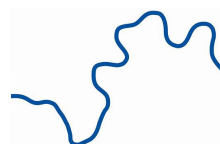


proposals and ideas being put forward for alternative ways of making savings for the committee to decide on establishing a Task Group.

17. The concerns being raised with the committee included: the loss of well regarded Borough facilities; increased travel times for users of the IDCCs; less accessible facilities and the consequent loss to service users and their carers and the affordability of these services pricing out some service users. The committee were very conscious that these client groups were amongst our most vulnerable members of the community and their carers were often elderly themselves and required supporting.

Strategic Vision for Intensive Day Care Centres

18. The Task Group understands the requirement to reduce costs for Adult social Care in the current economic climate. However the Task Group has a vision for the IDCCs which could see them enhance the provision for these client groups and make savings in their running costs through more innovative approaches to how this care is provided. Increased life expectancy is going to increase not decrease the need for community day services and the Task Group wishes to see their development to meet this growing need.
19. Savings should be viewed in terms of maintaining, stabilising and supporting vulnerable older people and their carers and reducing the risk of the need for more expensive crisis care and support for this client group. For a number of years now the direction for service development has been that services should be provided closer to home and that users should have more choice and control in the services they use.
20. The Task Group considered short and medium term ways the required savings could be achieved. They acknowledge that their work is a starting point in this process and would wish for the Task Group to be able to extend its work with the help of more expert input and look in more detail at alternative ways these savings could be made.



21. The Task Group would like the development of services for vulnerable older people and their carers to move forward in partnership with the voluntary sector and capitalise on the wealth, expertise and desire to be involved that exists in this borough in the voluntary sector.
22. The vision is for these day care services to be open to everyone who needs them and that they lose any stigma they currently may have as Adult Social Care run centres. They should become more inclusive community care centres serving a wider variety of need and helping to address the unmet need that exists in the community. This fits in with the Government's recent 'Vision for adult social care' (Nov 2010) which encourages care and support to be delivered in a partnership between individuals, communities, the voluntary sector, NHS and councils.

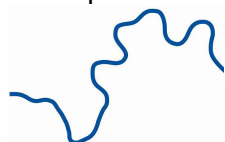
Recommendation 1: That cabinet defer the decision relating to proposed closures of Intensive Day Care Centres in order that a longer term strategy for the IDCs can be developed.

This strategy should seek to work in partnership with the voluntary sector to expand and enhance the services that are available to frail older people and those with dementia and their carers. Through developing a longer term strategy it is hoped that current unmet need for older people who would benefit from expanded day care provision would be addressed.

Recommendation 2: That Cabinet be encouraged to continue to work closely with Scrutiny in any future developments of Intensive Day Care Centres.

Short Term Savings

23. The Task Group heard evidence from one of the Intensive Day Care Centre Managers on ways in which there could be immediate savings to running costs, these included staffing costs, provision of meals, and overheads. They expressed a desire to be able to work together on the need for substantial



savings with Adult Social Care and to be more closely involved with the service re-design.

Staffing Costs

24. There are currently 2 vacant assistant manager posts across the IDCCs, which have been vacant for several months, the manager's opinion was that they could continue without filling these posts, potentially release savings in the region of £60K per year if they were removed as part of a review of the management roles and responsibilities within the IDCCs.

Overheads

25. The Task Group heard that the re-structure of the Borough should lead to a reduction in centralised services, which should reduce centralised charges eg for IT, Web Team, ACS Administration etc. The current cost of these services for the four centres is £314K and there was potentially scope for more of these services to be devolved to the Managers. A conservative estimate of £50K of potential savings per annum was put forward.

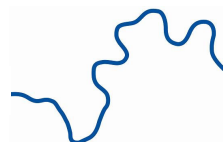
26. A range of other possible cost saving measures and income generation ideas were also suggested for discussion by the Day Centre Manager

Meals

27. The Manager expressed interest to take over responsibility for the provision of meals at the IDCCs and produce freshly prepared meals on site. They anticipated a saving could be made in the region of £20K per year (see separate section below).

Recommendation 3: *That officer's work with the IDCC Managers to look at potential savings that could be made in current running costs.*

Recommendation 4: *That the IDCC Managers are more actively involved in the current and future proposals for the IDCCs.*



Intermediate Term Savings

28. The Task Group heard a range of expressions of interest from the Voluntary Sector indicating they wish to be involved in working with the Borough to develop the IDCC services, this ranged from working in partnership through to taking over services to run them independently.

Twickenham Intensive Day Care Centre

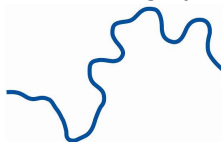
29. The organisers of Elleray Hall Day Centre, in Teddington, have indicated they would be willing to accept Twickenham Intensive Day Centre members, provided their carers also attended, they are not in a position to provide formal carers, but would welcome most older people.

30. The Task Group would like to see the possibility of a merger between Elleray Hall and Twickenham IDCC being explored, as they understand Elleray Hall would welcome better facilities and are interested in a proposal of this nature. There is the potential here to develop a day centre for a wider group of clients, with input from Local Authority staff. It is likely that it would not be suitable for all who currently attend Twickenham IDCC and some clients with more extensive needs may have to access services at Shene IDCC.

31. Other proposals suggested to Richmond LINK included the use of Linden Hall Day Centre, Hampton, they have indicated they have the space and capacity to cater for more people with physical disabilities and Meadows Hall, Richmond, which could possibly run a joint service catering for people with higher support needs.

Tangley Hall

32. The Task Group heard from Homelink, a popular, successful, day respite centre in the Borough that provides services for a range of clients with physical and mental disabilities, including dementia sufferers. It is a nurse led service with a team of paid professional staff that also has a very active volunteer input, who assist with transport, running the centre and providing activities. As it is a charity and has this large volunteer base it has lower running costs than an IDCC such as Tangley Hall and the cost to the user is consequently much lower (£30 per day



for new users as opposed to a maximum charge of £58, including transport for the IDCCs).

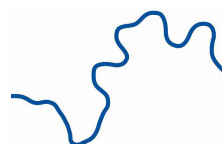
33. Homelink has the capacity to use one of their days for more severe dementia sufferers and would also be open to discussions with the Borough on the voluntary sector taking over keeping Tangle Hall open.
34. Richmond LINK have collected evidence from the community which suggests the proposed closures will create disruption and reductions in care to vulnerable people. They presented options for continuing the services at reduced costs that they felt had not yet been explored, innovative ways in which local organisations could be part of running these services. Amongst these was an expression of interest in Tangle Hall being a 4-way consortium dementia service run by the Friends of Barnes Hospital, FiSH, the Alzheimer's Society and ACRuT.

Recommendation 5: *That alternative ways of keeping Twickenham IDCC are explored with a view to creating a centre for a wider group of clients, but still providing support for people with a high level of physical need, through working in partnership with the voluntary sector.*

Recommendation 6: *That transferring the running of Tangle Hall either by outsourcing it through commissioning to a suitable organisation such as Homelink, with much lower running costs or by running it in partnership with the voluntary sector be investigated.*

Transport

35. The Task Group heard from a range of witnesses the difficulties that exist with transport services for the clients of the IDCCs, in particular the long journey times and the concern that these times would increase even further if the closure proposals go ahead. Currently the service level agreements stipulate that people should be travelling for no longer than one and a half hours and the service is not currently always meeting these standards.



36. Evidence submitted by the Alzheimer's Society stressed the significant impact particularly on people with dementia of relocating clients from Tangle Hall to Ham Day Centre. This would result in distress and agitation which could negate the positive benefits of day centre attendance. It is generally regarded as bad practice to have a person travelling to a day centre any longer than strictly necessary. This may result in people with dementia and their carers being unwilling to try the day centre as a result of this and in their opinion this would be a further deprivation of their rights and benefits and a total deprivation of choice.
37. The IDCC Manager was of the view that more cost effective ways could be found and that savings in the region of £50K could be made on the current transport budget of £470K for the four IDCCs.

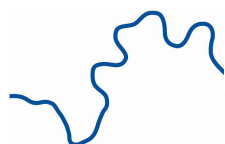
Recommendation 7: *That a review of the transport system takes place with a view to developing a more cost effective efficient service, this should include outsourcing the service, the use of volunteer organisations and looking at alternative models elsewhere.*

Meals

38. The meals for the IDCCs are currently provided by Apetito, providing a hot two course meal, they have a three year contract but it was uncertain if this contract had been signed yet. The Task Group heard evidence that there was dissatisfaction with the meals and evidence of this had been heard at the Overview & Scrutiny Meeting on the 14th March 2010. The meals were considered to be expensive at over £8 each currently and there was a desire expressed to take over responsibility for them and prepare them on site at the IDCCs. A potential saving of approximately £20K was thought to be possible and the quality could be increased.

Recommendation 8: *That the contract with Apetito be re-looked at and the potential to produce the meals using IDCC staff be explored with a view to both saving money and improving the quality of the meals.*

Management Costs



39. The Task Group considered the wider management structure for the IDCCs and considered that there was an opportunity to look at a flatter management structure, as is happening elsewhere across the Authority. This could enable more responsibility for front line decision making to be devolved down to the IDCC managers as well as reducing costs. Pairing up of the management of the IDCCs, such that staff could work more flexibly across two centres, could also help, as is happening in the library service efficiency review.

There is a central fund for redundancy costs and therefore there would not be a pressure on the ASC budget for these costs.

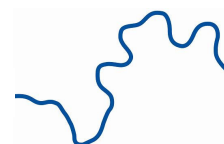
Recommendation 9: *That Adult Social Care review the management structure for the IDCCs with a view to flattening the management structure and increasing the responsibilities of the IDCC managers.*

Revenue Generation

40. The Task Group heard a range of ideas on increasing the revenue for the IDCCs and a key theme was increasing their uptake both from Richmond residents and residents in neighbouring Kingston and Hounslow.

41. There was concern that numbers had been decreasing thus increasing costs per place, an increase in uptake could make all the centres more viable. Evidence from a range of witnesses suggested that it wasn't lack of demand for the services these centres offered but their increasing cost, particularly to those moving to self-directed support budgets, and a lack of knowledge about their existence from potential users, particularly among the 80% + of the borough elderly who do not come into contact with social services. We are aware of carers at both Tanglely and Ham who are willing to pay the full rates, but who only found out about the service by chance rather than through any referral process.

42. The Alzheimer's Society, Richmond LINK & Friends of Barnes Hospital amongst others all cited increasing costs as a barrier to uptake. People with dementia in general pay more for care than others with any other disabilities and care needs because of the complexity of their condition and care needs. As fees have increased the voluntary sector have seen an increasing number of inappropriate



referrals to their day centres, which are much less expensive, who they are unable to accept. Costs were creating a barrier for self funders and recipients of funding through SDS, making them less likely to choose IDCCs. There is concern that decreasing uptake of these services will lead to increasing costs elsewhere for health and social care services as more crises occur for clients and their carers. Evidence for maintaining social care spending to prevent increased NHS spending in long term care was highlighted by a recent Nuffield Trust Report.

43. Representatives of the voluntary sector highlighted the need for more provision of day care for people with functional mental illness and other clients they are unable to support currently in their day centres. There is also other potential unmet need for evening and possibly night time respite care and the IDCCs may be able to play a role in this.

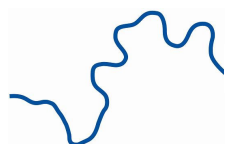
44. The image of local authority run day centres was also seen as a barrier to their use by some clients in a way voluntary sector day centres aren't and thought needs to be given to a 're-branding' of their image, making them more appealing to a wider group in the community. The Task Group heard evidence that the IDCC were not widely know about and there appeared not to have been pro-active marketing of the service both to users and health and social care professionals until more recently. They welcomed the leaflets that had now been produced and saw this as a step in the right direction.

Recommendation 10: *That the IDCCs are more actively promoted to potential users and their carers and their profile is raised with health and social care professionals so clients are give more choice.*

Recommendation 11: *That officers make contact with neighbouring local authorities to ascertain the level of demand there might be from non-Richmond residents.*

Recommendation 12: *That the borough works with the voluntary sector and NHS colleagues to look at the provision of places for people with functional mental illness.*

Consultation



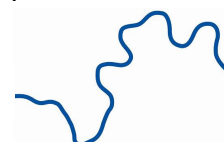
Scrutiny in Richmond upon Thames

45. The Task Group were concerned that the consultation on the proposals was primarily aimed at users of the services and they received feedback from a range of voluntary sector representatives who expressed a view of feeling excluded from this process. There was great willingness from the voluntary sector to respond to the consultation and be in dialogue with the borough.
46. The Task Group had finished before any of the findings of the consultation had been released, but these will be duly considered by the H,H & AS O&SC on the 6th of January.

Recommendation 13: *That the borough makes note of the disappointment expressed by some representatives of the voluntary sector about their lack of inclusion in the consultation.*

Dementia Care Strategy

47. The National Dementia Strategy includes the need for early diagnosis and early intervention with “care and support provided as needed” and the Task Group heard evidence of how re-investment in alternative sources of less expensive care for people with dementia and their carers could be provided through a range of services from the voluntary and statutory sectors. The Alzheimer’s Society (South West London Office) are concerned about gaps in the current provision in Richmond for the earlier and moderate stages of dementia requiring investment. Most people with dementia are in the moderate stage and practical help and support here helps keep people in the community and provides support to their carers.
48. Friends of Barnes Hospital raised the issue of the prospect of less inpatient care for dementia sufferers and the emphasis on community care leading to the need for more services not less. They also saw opportunities for the voluntary sector to be part of developing new ways of working. The potential role for the NHS was highlighted so that day care services for people with functional mental health problems (currently very under-provided for) could also be addressed. A more holistic service could be developed at Barnes Hospital, where in patients services



are under threat of closure, which could include inpatient, respite and day care for more intensive and moderate clients with dementia and mental health problems.

Recommendation 14: *That the Dementia Care Strategy be re-visited with our NHS and voluntary sector partners and the potential for expanding the range of services locally, particularly for the early and moderate stages of dementia, in the IDCCs be investigated.*

Recommendation 15: *The review of the IDCCs presents an opportunity to address the needs of these client groups more holistically and those of vulnerable older people whose needs are not being picked up sufficiently ie those with functional mental illness. The Task Group would like to see the service reviewed in this light in partnership with the NHS and the voluntary sector.*

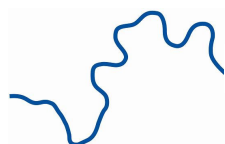
Working with our Partners

49. Good partnership working between health and social care services in Richmond is a priority for both sectors and many examples of good practice exist, the Task Group sees the IDCCs as an area where this could develop even further. The recent NHS settlement has made provision for monies to be transferred from the NHS to local authorities for re-ablement and the Task Group whilst not looking at this in great detail saw the potential for the development of wider work re-ablement work by the IDCCs.

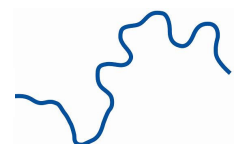
Recommendation 16: *That the development of re-ablement services looks at the potential for expanding this work at the IDCCs.*

2008 Review of Community Day Care Centres

50. The Task Group were aware of the 2008 review of Older Person's Day Care and Support Services which made a range of recommendations to further improve the service as it was then and bring it up to the expectations of a modern service for adults needing support. It saw clear opportunities for working with the voluntary sector and reducing costs. The Task Group was disappointed that they were unable to find any evidence that the recommendations of this report had been taken forward.



Recommendation 17: *That the 2008 Review of Community Day Care Centres be re-visited and the proposals put forward for developing the day centres be re-evaluated.*



CONCLUSION

51. This is an interim task group report as the Task Group hopes with the approval of the Health, Housing & Adult Services Overview & Scrutiny Committee to continue their work in the New Year. They wish to build on the relationships with LA officers, the Voluntary Sector, service users and carers and local health bodies in order to produce a sustainable long term strategy for older vulnerable adults. They understand the current financial constraints and the need for new and different ways of providing these services. The Task Group would hope to be involved in producing a policy which reflects this and meets the needs of users and carers.

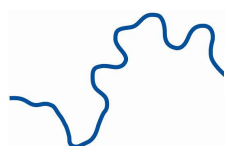
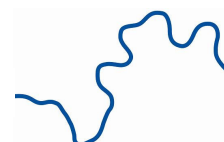
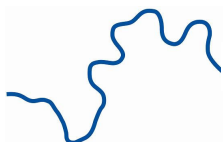


TABLE OF RECOMMENDATIONS

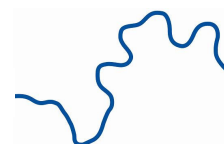
Rec No	Recommendation	For action by:
1.	<p>That cabinet defer the decision relating to proposed closures of Intensive Day Care Centres in order that a longer term strategy for the IDCs can be developed.</p> <p>This strategy should seek to work in partnership with the voluntary sector to expand and enhance the services that are available to frail older people and those with dementia and their carers. Through developing a longer term strategy it is hoped that current unmet need for older people who would benefit from expanded day care provision would be addressed.</p>	LA Vol Sec
2.	That Cabinet be encouraged to continue to work closely with Scrutiny in any future developments of Intensive Day Care Centres.	Cabinet H,H & AS O&SC
3.	That officers work with the IDCC Managers to look at potential savings that could be made in current running costs.	LA
4.	That the IDCC Managers are more actively involved in the current and future proposals for the IDCCs.	LA
5.	That alternative ways of keeping Twickenham IDCC are explored with a view to creating a centre for a wider group of clients, but still providing support for people with a high level of physical need, through working in partnership with the voluntary sector.	LA Vol Sec
6.	That transferring the running of Tangle Hall either by outsourcing it through commissioning to a suitable organisation such as Homelink, with much lower running costs or by running it in partnership with the voluntary sector be investigated.	LA Vol Sec
7.	That a review of the transport system takes place with a view to	LA



Rec No	Recommendation	For action by:
	developing a more cost effective efficient service, this should include outsourcing the service, the use of volunteer organisations and looking at alternative models elsewhere.	
8.	That the contract with Apetito be re-looked at and the potential to produce the meals using IDCC staff be explored with a view to both saving money and improving the quality of the meals.	LA
9.	That Adult Social Care review the management structure for the IDCCs with a view to flattening the management structure and increasing the responsibilities of the IDCC managers.	LA
10.	That the IDCCs are more actively promoted to potential users and their carers and their profile is raised with health and social care professionals so clients are give more choice.	LA NHS
11.	That officers make contact with neighbouring local authorities to ascertain the level of demand there might be from non-Richmond residents.	LA
12.	That the borough works with the voluntary sector and NHS colleagues to look at the provision of places for people with functional mental illness.	LA Vol Sec NHS
13.	That the borough makes note of the disappointment expressed by some representatives of the voluntary sector about the consultation process and looks at ways in which this could be enhanced in future.	LA
14.	That the Dementia Care Strategy be re-visited with our NHS and voluntary sector partners and the potential for expanding the range of services locally, particularly for the early and moderate stages of dementia, in the IDCCs be investigated.	LA Vol Sec NHS
15.	The review of the IDCCs presents an opportunity to address the needs of these client groups more holistically and those of vulnerable older people whose needs are not being picked up sufficiently ie those with functional	LA Vol Sec NHS



Rec No	Recommendation	For action by:
	mental illness. The Task Group would like to see the service reviewed in this light in partnership with the NHS and the voluntary sector.	
16.	That the development of re-ablement services looks at the potential for expanding this work at the IDCCs.	LA NHS
17.	That the 2008 Review of Community Day Care Centres be re-visited and the proposals put forward for developing the day centres be re-visited.	LA



SELECTED READING

Social care and hospital use at the end of life, Martin Bardsley, Theo Georgiou, Jennifer Dixon. Nuffield Trust 2010

[The Nuffield Trust - Publications](#)

A vision for Adult Social Care, Department of Health, November 2010

[A vision for adult social care: Capable communities and active citizens : Department of Health - Publications](#)

Budget Review, Adult & Community Services, October 2010

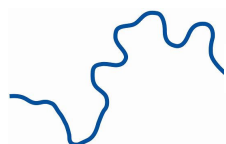
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Living well with Dementia: A National Dementia Strategy , Department of Health February 2009

[Living well with dementia: a National Dementia Strategy : Department of Health - Publications](#)

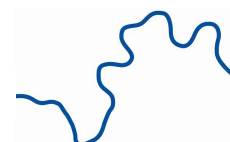
Older Person's Day Care and Support Services July 2008

<http://cabnet.richmond.gov.uk/mgConvert2PDF.aspx?ID=16578>



GLOSSARY OF TERMS

ASC	Adult Social Care
IDCCs	Intensive Day Care Centres
LBRuT	London Borough Of Richmond Upon Thames
SDS	Self Directed Support
O&S	Overview and Scrutiny (Committee)



APPENDICES

Appendix A – Timetable of Meetings

Date	Who attended	Issues discussed
23 rd November 2010	Cllr Sue Jones Cllr Meena Bond Cllr Frances Bouchier Cllr Liz Jaeger Margaret Dangoor	Terms of Reference for Task Group Strategic Direction for IDCCs
1 st December 2010	Cllr Sue Jones Cllr Meena Bond Cllr Frances Bouchier Cllr Liz Jaeger Chris Martin – Manager Twickenham Intensive Day Care Centre	IDCCs
7 th December 2010	Cllr Sue Jones Cllr Meena Bond Cllr Frances Bouchier Cllr Liz Jaeger Kathy Sheldon – Chair, Friends of Barnes Hospital Michael Derry – Richmond LINK Marie Martin – Richmond LINK	Voluntary Sector views on proposals and their ideas for alternative ways of providing IDCC services
8 th December 2010	Cllr Sue Jones Cllr Meena Bond Cllr Frances Bouchier Cllr Liz Jaeger Aderemi Alaka – Day & Community Services Manager Brian Castle – Assistant Director, Adult Social Care Sarah Broad - Sue Hodder - Homelink	Proposals for reconfiguration of IDCC services, background to proposals Homelink Services
14 th December 2010	Cllr Sue Jones Cllr Meena Bond Cllr Frances Bouchier Cllr Liz Jaeger	Report

