

THE CARE ACT 2014

Developing the Prevention Strategy

Phase One Engagement Report

February 2015

LONDON BOROUGH OF RICHMOND UPON THAMES



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1. EXECUTIVE SUMMARY

<u>Context</u>

From 1st April 2015 the Care Act (2014) will come into effect, placing a number of new duties on local authorities to provide preventive services for all adults, to help prevent or delay people developing needing care and support..

In response, Richmond Council and Richmond Clinical Commissioning Group (CCG) are developing their first Adult Prevention Strategy.

The engagement process with local residents regarding this Prevention Strategy took place between December 2014 and February 2015.

<u>Findings</u>

- Respondents acknowledged they have a responsibility to look after their own health and wellbeing but that the council also has a role in supporting people to do this.
- Respondents are generally unaware of the preventive services currently available.
- Money, time, motivation and caring commitments were highlighted as common restrictions to people keeping healthy and well in the borough.
- Most carers and adults with care and support needs reported that services they currently use are 'helpful' and 'easy to access'; notable exceptions to this were 'direct payment support', 'counselling services' and 'exercise classes'.
- Greater need for advertising of available services and improved signposting were highlighted as key areas for improvement.

Conclusions & Recommendations

Respondents suggest that residents in the borough are generally healthy and well and are predominantly happy with their ability to access preventive services. The key recommendations are:

- Advertise available services by producing up-to-date public information and leaflets
 Developing an easily accessible council website is essential in this
- Ensure staff are fully aware of the existing community services in order to improve signposting to services
- Explore the potential for new technologies to help develop preventive services
- Establish one, single point of contact to provide information and advice and support services at the Council, where residents can speak to the same person every time.
- Extend **partnerships with other council departments** (such as education, housing and environment) to broaden the scope of the preventive work and embed the prevention strategy into future work across the council.



2. BACKGROUND

The Care Act passed into law in May 2014. It represents the biggest change to Adult Social Care in over 60 years and will reform the law relating to care and support for adults and their carers. The Care Act (2014) emphasises the importance of a shift in service provision towards preventive services, with the aim of preventing, reducing and delaying the need for care.

The promotion of wellbeing and the maintenance of independence lie at the heart of the Act. This acts as a timely reminder that health and wellbeing are influenced not only by people's choices or the health and social care services that we provide, but are under the impact of much wider forces that ultimately encompass the environment and communities in which people live their lives.

The Care Act makes clear that local authorities must provide or arrange services that help prevent people developing needs for care and support or delay people deteriorating further, such that they would need more specialist or ongoing care and support.

The London Borough of Richmond upon Thames Local Authority (LBRuT) and Clinical Commissioning Group (CCG) are committed to working in partnership to deliver our first integrated three year Adults' Prevention Strategy to improve the health and well-being of our population and to support people to remain independent.

Prevention means many things to many people. In its broadest sense, prevention includes a wide range of services and activities that are designed to:

- Promote wellbeing and independence
- Preventing people from developing poor health and care and support needs in the first instance (Prevent)
- Prevent or delay the deterioration of people's wellbeing as a result of ageing, illness or disability (Reduce)
- Delay the need for more costly, intensive and long-term care and support services (Delay)

We need to enhance the effect that we can have on shaping the environment, which can be achieved through recognising the importance that legislation, housing, employment, transport infrastructure, recreational areas, community safety, access to high-quality information and interventions have on ensuring that people are empowered to make healthy choices where possible.

This has shaped our vision as such:

Enabling residents to take responsibility for their own health and wellbeing in a safe and supportive environment



2.1 Scope of the Strategy

The Adult's Prevention Strategy is for all adults in the London Borough of Richmond upon Thames, whether or not receive services from the council or NHS.

The recognition of **eight key client groups** across our population will allow the strategy to be shaped in an equitable fashion. These client groups are as follows:

- All borough residents, aged 18+, without current adult social care needs
- Older people (aged 65+)
- Carers
- Adults with physical, sensory and other disabilities
- Adults with learning disabilities
- Adults with Mental Health problems
- Adults with autism
- Transitions (young people in transition from Children's services to adulthood)

2.2 Purpose of the report

This report describes the Council and CCG's approach to engagement to inform the Adult's Prevention Strategy and analyses the feedback received from the various activities carried out. The information gathered will be used in combination to develop the draft Adults' Prevention Strategy for the borough of Richmond upon Thames.

Key stakeholders will be asked to provide critical feedback on the draft strategy at a later date.

3. METHODOLOGY

As part of Richmond's engagement process, the Council organised a number of activities designed to reach as many of the eight key client groups as possible. The activities are set out below.

3.1 Prevention Strategy Consultation

Target group: All borough residents aged 18+ without current adult social care needs **Approximate Numbers:** 45 responses were received for the survey.

Details: A questionnaire was created to collect information and opinions from members of the public with a focus on health and wellbeing. The questionnaire underwent extensive consultation before approval for consultation.

The Prevention Strategy Consultation survey was hosted on the council's consultation portal for six weeks and promoted via the council's Care Act external newsletter and Care Act website; Richmond CCG's twitter account, and through the CCG's Community Involvement Group. Paper copies were also distributed at the Care Act Event hosted by Healthwatch Richmond.

Areas discussed: Primary prevention Information and Advice Health and Wellbeing



3.2 The Care Act Survey: Prevention, Information and Advice

Target group: Older people, Adults with social care needs and Carers **Approximate Numbers:** 46 people responded to the survey.

Details: The survey was hosted as a private link on the council's consultation portal for three weeks. The link to the survey was emailed to the following partner organisations and council staff who distributed this to their clients via mailing lists: *Healthwatch Richmond, Richmond Mind, Richmond Carers Centre, Rebecca Swist (Autism Specialist Worker).* Paper copies were available from the Council upon request; 18 were sent. Paper copies were also distributed at the Care Act Event hosted by Healthwatch Richmond and at the outreach session with Richmond Mind.

Areas discussed: Experiences with current services Preventing, reducing and delaying the need for adult social care and support Gaps in service provision Information and Advice

3.3 The Care Act Event hosted by Healthwatch Richmond

Target group: Public event: members of the public, adults with care and support needs, carers, voluntary sector professionals. **Approximate Numbers:** 60

Details: Healthwatch Richmond hosted a public event regarding the Care Act on behalf of the council. The event included a presentation outlining the main changes of the Care Act, given by Director of Adult and Community Services, Cathy Kerr. Additional presentations were given by Care Act Programme Manager, Gill Ford; and Head of Early Intervention, Prevention and Rehabilitation, Janet Cole. Round table discussions were then facilitated.

Areas discussed:

Experiences with current services Preventing, reducing and delaying the need for adult social care and support Gaps in service provision Information and Advice

3.4 Outreach Sessions

Target group: Older people, Adults with adult social care needs and Carers **Approximate Numbers:** 35 over 2 sessions

Details: The outreach sessions took place at Sheen Lane Day Centre and the Carers Support Lunch held by Richmond Mind. The outreach sessions included a briefing and discussion. The discussions explored the same questions as The Care Act Survey: Prevention, Information and Advice.

Areas discussed: Experiences with current services Preventing, reducing and delaying the need for adult social care and support Gaps in service provision Information and Advice



3.5 Engagement Timeline

	Week Commencing								
			2014	2015					
Engagement Activity	15- Dec	22- Dec	29- Dec	05- Jan	12- Jan	19- Jan	26- Jan	02- Feb	09- Feb
Prevention Strategy Consultation									
The Care Act Survey									
The Care Act Event									
Outreach Sessions									

4. PREVENTION STRATEGY CONSULTATION

Detailed responses to all of the above questions can be found in Appendix 1.

4.1How happy are you with the following in your life, your health and yourself?

23 people were quite happy, 4 very happy and 1 very unhappy with their health. When asked about being happy with themselves 28 were happy, 7 very happy and none were very unhappy.

4.2 Keeping healthy and well

Over half reported that eating healthily, drinking within safe limits of alcohol per week, staying in touch with family and friends, and learning new skills were mechanisms for keeping themselves healthy and well. Over half had never had a NHS health check and none had used the Smoking service. Maintaining a healthy weight indicated a mixed response.

Cost, time and motivation were frequently selected as preventing people from keeping healthy and well.

The majority of respondents thought it was at least important to take steps to help maintain their health and wellbeing. However, the majority of respondents also reported that they thought the council did have a role in helping them to stay healthy and well.

4.3 Accessing services in the borough

The majority of respondents were very satisfied with the access to parks and green spaces. A few respondents were dissatisfied with the availability of information and activities to keep them healthy and well. Overall, respondents were satisfied with the quality of the footpaths, transport links and feeling safe in the community.

When asked to explain why they were dissatisfied/very dissatisfied, 16 people responded – these are broken down in Appendix 1.



Many respondents have not heard of most of the council services provided. However, people think health walks should be available. 3 people have used the expert patient programme but the majority have not heard about it. This shows similar findings for the Weigh2Lose service. 29 people had heard about the smoking service but do not need to use it. 23 people had never heard of the live well service.14 people had not heard of the befriending service but think that this should be provided.

The majority of respondents did not state how helpful the services they had used were and most of the remaining reported it was not applicable. The few respondents that did answer the question reported that the services were helpful to them.

4.4 Other Comments/ Suggestions

22 people provided other comments or suggestions about how the council and CCG can help people stay healthy and well – responses are broken down in Appendix 1.

5. CARE ACT SURVEY: PREVENTION, INFORMATION AND ADVICE

The results from the Care Act Survey: Prevention, Information and Advice are summarised below. A full report of the results is available in Appendix 2.

5.1 Information and Advice

24 of the 46 respondents had accessed information or advice from the Council or other organisation.

Similar numbers of people (ranging 12-17) had used each of the methods of communicating information – telephone services, face-face or drop-in, websites and leaflets. Telephone services were reported as most helpful; websites and leaflets were reported as less helpful to people. Face to face or drop-in services were recorded as the easiest to access, with the lowest number of people reporting leaflets as easy to access.

Of the services available, at least one resident reported to have accessed each. Direct payment support was the most frequently used service, with Employment Support being used by the least number of respondents (1). In relation to the number of users, Direct payment support and Independent living services were reported as not very helpful to people. Direct payment support and a Resource directory were reported as not easy to access by those who had used these services.

5.2 Leisure or education activities and classes

Of the 46 respondents, 34 had accessed local leisure or education activities or classes in the borough.

Libraries were reported to have been used the most (24), followed by adult educational classes (16). Day centres (3) and IT/Computer training (6) were utilised least often. In relation to the number of users, all the services offered were reported as helpful by almost all users. However, exercise classes and art classes were reported to be difficult to access.

5.3 Support Services

34 people who answered our survey had used one or more types of support service in the borough.

Notable use of Support groups (20) and Counselling Services (15) were reported. Respite care and Mobility services were reported as helpful most often in relation to the number of users of these services; however, these services were also reported as not easy to access



by users. Despite notable use of Counselling Services, over half of users reported this service was not easy to access.

5.4 Help to live independently at home

16 of the 46 respondents had received support to help them live independently at home from the council or other organisation.

Equipment (6) and Small adaptations to your home (6) were the services used most by our respondents. All services within this category were reported as helpful by all those who had used them. However, services in this category all scored poorly in ease of access.

5.5 Transport

7 people had used a transport scheme to help them get around.

The blue badge scheme was used by 6 people, all of whom found the service helpful and the majority found it easy to access (5). Of the 3 minicab service users, all found this service helpful and 2 found this easy to access. Greenwood Centre Hampton Hill and Taxi Card services were named as other transport schemes utilised in the borough.

5.6 Richmond Card

13 people have used the Richmond Card to access discounts.

5.7 Problems accessing services

21 responses were recorded for the question: 'If you have ever had problems accessing any of the services mentioned above, please explain why'. Responses are broken down in Appendix 2.

5.8 Staying healthy and independent

23 responses were recorded for the question: 'Which other services would help you to remain healthy or independent?' Responses are broken down in Appendix 2.

5.9 Use of technology

42 people currently use computer or mobile technology. In overall terms, PC or laptop recorded modal usage (38) followed by mobile phone (28), smart phone (22) and finally tablet (16). Daily use was reported by most respondents, with PC or laptop's being used by 32 respondents daily. Mobile phone (21) and Smart phone (18) also recorded a notable amount of daily use.

14 of the 46 people who reported currently using computer or mobile technology thought apps such as 'Pill reminder' could help them stay independent.

There were 15 responses to the question: 'If yes, what kind of apps do you think could help and why?' Responses are broken down in Appendix 2.

5.10 Other Comments

28 people provided comments or suggestions about local social care services. Responses are broken down in Appendix 2.



6. OUTREACH SESSIONS

The outreach session discussions can be divided into five topic areas. Several themes emerged under these headings:

Topic:	Theme:
Accessing Information and Advice	 Delivered by professionals/ trained staff Independent of the council Voluntary Sector Websites GP – gatekeeper Employment Support Paper-based information
Accessing leisure or education activities or classes	 Meditation, Reiki/massage Exercise activities – tennis, health walks Discounted beauty therapy/ hairdressing at RACC Day trips – essential to "open up people's worlds" Need to adapt some leisure activities to meet needs of elderly/frail e.g. mini-health walks Day Centre/Organisation-led activities e.g.Cooking classes
Support Services Accessed	 Day Centre/Organisation field activities e.g. cooking classes Support groups Support workers at home Support workers in day centres Counselling Befriending Services Online support Peer Support Wellbeing Services Out-of-hours support services needed in times of crisis
Help to live independently at home	 Optician visits, Hairdresser Support workers at home Support for carers needs to be recognised too – e.g. domestic support in times of crisis
Transport	 Free mini-bus provided to access day centre Lack of access to public transport due to poor mobility Lack of access to appropriate transport restricts activities Transport links across and out-of-borough not frequent enough – makes visits to hospitals very time-consuming
Use of technology	 Mixed response from elderly – some will not engage no matter what Online shopping I-pad classes available through organisations Condition-dependent Good use amongst carers

Detailed summaries of the two sessions can be found in Appendix 3.



7. THE CARE ACT EVENT HOSTED BY HEALTHWATCH RICHMOND

Healthwatch Richmond hosted a public event regarding the Care Act on behalf of the council. 60 people attended the event, with individuals providing representation for carers, adults with care and support needs, members of the public, voluntary organisations, provider organisations and representatives from neighbouring borough Councils.

A number of themes emerged during the round table discussions on prevention:

7.1 What do you do to keep yourself healthy and well?

- Eating healthily
- Taking regular physical activity
- Staying in touch with family and/or friends
- Volunteering or helping someone in your community
- Leisure Activities
- Council/Voluntary Sector Support
- Mental Wellbeing
- Other
- Do nothing

7.2 What prevents you from keeping fit and healthy?

- I do not have the time (care commitments)
- I do not have the time (other)
- It costs too much
- Poor physical health or disability
- Feeling anxious or depressed
- Feeling lonely or isolated
- Difficulty staying motivated
- Lack of information about how to keep healthy and well
- Lack of knowledge of what is on offer to keep healthy and well
- Difficulty accessing services
- Other, please specify

7.3 Do you use computer technology?

- Computer/Laptop
- Mobile phone/ Smartphone
- Tablet
- Internet
- I do not use it
- Other including RHP (Richmond Housing Partnership) scheme, Telecare, Family use technology

7.4 What kind of apps or websites do you think could be helpful?

The groups expressed concerns about the increasing use of technology to communicate with residents, particularly elderly residents who are not as comfortable using new technologies. One suggestion towards helpful apps/websites was given.

A full breakdown of the responses collated at the Healthwatch event can be found in Appendix 4.



8. DEMOGRAPHIC INFORMATION

Full details can be found in Appendix 5.

8.1 Gender: 30 respondents were male and 80 were female.

8.2 Age: Of the answers received, 15 were aged 18-34; 59 were aged 35-64; 33 were 65-74; 5 people were 75-84 and 7 were aged 85+.

8.3 Ethnicity: The majority of the people (103) reported as White. Other ethnicities represented in this survey are Mixed/Mixed British (4), Asian/Asian British (6) and Black African/Caribbean/Black British (2).

8.4 Target Groups: Respondents were asked which of target groups they identified with most. Carers were the largest group represented (78), followed by Older person (60). Child moving from children's services to adulthood were least represented, with 0 respondents.

8.5 Postcode Breakdown

Respondents reported to live in a number of localities within the borough including: TW, TW1, TW2, TW3, TW4, TW7, TW9, TW10, TW11, TW12, SW13, SW14, SW15, KT1, KT2.

9. ANALYSIS

9.1 General Public

Most of the respondents are very happy with their health and themselves. All of the respondents reported that looking after their health and wellbeing was important. The majority of the respondents reported that they used different approaches for looking after themselves. However, some reported that they did not always remain a healthy weight. Money, time and motivation were key factors in enabling people to keep healthy and well.

It was acknowledged that individuals have a responsibility for keeping themselves healthy and well but that the council also has a role to play in supporting people to do this. Many were unaware of the services that are presently available to support people to improve their health and wellbeing and were therefore suggesting initiatives.

The survey highlights that we can see patterns even though small in numbers. This cannot be taken as a blueprint for commissioning but themes emerge which highlight important factors. These are:

- To promote the existing information /services to a wider audience particularly weight management programmes
- Celebrate the fact that people are taking responsibility for their health and wellbeing and that they think this is important
- The council has a role in supporting people to improve their health and wellbeing
- Support people to overcome the barriers to improving their health and wellbeing (money, time, motivation)

9.2 Adults with care and support needs and their carers

Most carers and adults with care and support needs reported that the services they currently use are helpful and easy to access. 'Leisure and educational activities' and 'Support



services' are used by the greatest number of people. Notable challenges arose with accessing 'direct payments support', 'counselling services' and 'exercise classes'.

Whilst respondents acknowledged the financial challenges that both council and voluntary providers face, the negative impact of the closure of services on people with care and support needs and their carers was a salient concern amongst many.

Respondents highlighted the need for greater advertising of the services available; with a lack of good signposting to reliable information and advice services a principal barrier to people accessing the help they need.

The engagement process has mainly reached individuals already in contact with service providers and cannot be said to represent all adults with care and support needs and carers; however some important themes for the future development of preventive services through adult social care provision have emerged. These are:

- To improve signposting to information and advice from a broad range of council- and voluntary-led services.
- There is potential for apps and new technologies to help in this field, but consider that this method of communication is not suitable for all groups (e.g. elderly, condition-specific).
- To ensure the council is providing consistent support to people with adult social care and support needs, and that services are delivered in a timely manner.
- To support carers to overcome the barriers preventing them from keeping healthy and well (commitments associated with caring role, time, and money).
- Work to minimise the gap in support if a services has to close.

9.3 Next Steps

Based on the themes emerging from the two fundamental client groups above, Richmond Council and Richmond CCG should consider the following suggestions when developing the Prevention Strategy:

- Establish accessible information and advice services, where the information is kept current and is available in a range of formats
 - Developing the council's website, by making it more accessible and easy to read, is a key part of this work.
- Fully utilise and advertise the existing community services to help people overcome the common restrictions to keeping healthy, well and independent
- Identify unmet demand for certain types of service and develop a strategic plan for health and wellbeing, with the CCG, to address these differences
- Expand preventive services where gaps in provision emerge e.g. vouchers for gym services/exercise classes
 - This includes exploring the opportunity for investment in new technologies to help develop preventive services
- Establish partnerships with other council departments (such as education, housing and environment) to broaden the scope of the preventive work and embed the prevention strategy into future work across the council e.g. developing safer cycle routes.



10. CONCLUSIONS

In conclusion, residents in the London Borough of Richmond upon Thames are generally healthy and well. Respondents are predominantly happy with their ability to access services, with common restrictions being the associated costs, time and motivation needed to keep healthy and well and independent.

Better access to information and advice across all three levels of preventive services, for all adults is essential to prevent, reduce and delay the development of adult social care and support amongst residents.

The findings in this report will be used in conjunction with the findings of the mapping of local services to inform the draft Adult's Prevention Strategy. This draft report will be taken to a number of council- and voluntary-led providers later in the year for consultation.

11. RECOMMENDATIONS

The findings from this report generate a number of recommendations for the development of the draft Adult's Prevention Strategy:

- Advertise available services by producing up-to-date public information and leaflets
 Developing an easily accessible council website is essential in this
- Ensure staff are fully aware of the existing community services in order to improve signposting to services
- Explore the potential for new technologies to help develop preventive services
- Establish one, single point of contact to provide information and advice and support services at the Council, where residents can speak to the same person every time.
- Extend **partnerships with other council departments** (such as education, housing and environment) to broaden the scope of the preventive work and embed the prevention strategy into future work across the council.



12. APPENDICES

Appendix 1 – Prevention Strategy Consultation: Results

Very happy How happy are you with 4 23 7 8 1 Quite happy your health? Not sure Quite unhappy How happy are you with 7 28 4 203 your self? Very unhappy Not Answered 0% 20% 40% 60% 80% 100%

Q1: How happy are you with the following in your life, your health and yourself?

Q2: Which of the following do you do to keep yourself healthy and well? *Please tick all that apply*







Q3: What prevents you from keeping healthy and well?

Q4: Do you think that taking steps to help maintain your health and wellbeing is important?



Q5: Do you think that the Council has a role to play in helping you maintain your health and wellbeing?







Q6: How satisfied are you with each of the following in the borough?



Q7: If you ticked 'Dissatisfied' or 'Very dissatisfied' above, please can you tell us why you are dissatisfied?

Theme:	Response:
Poor cycling provisions	 Facilities for cyclists travelling between areas are poor - e.g. from Sheen to Richmond or Sheen to Kingston upon Thames when the Park is closed and along Clifford Avenue (to cross the railway safely). The provision of clearly marked cycling routes throughout the borough is appalling, often there is none. Cycling parking in Richmond town centre is inadequate. Also, cycling parking at all the entrances of Richmond park is essential. I can't believe there isn't any. Traffic is congested making it dangerous for cyclists. Cycling routes to schools should be introduced. Public transport in Ham is poor. The K5 should be extended around Riverside Drive from the Dysart all the way to Ham House to make this attraction more reachable by public transport and to provide people living in Ham easier access to Kingston. The towpath between Ham and Richmond needs to be improved so it's not muddy and stony. The path along Church Road between Latchmere Lane and Ham Gate Avenue needs 'gravelling' or similar so it can be used at all times. Mostly it's a mudpath making it impassable. A proper pedestrian pathway needs to be made along Church Road between Latchmere Lane and St Andrews church - currently there is nothing, verges to walk on or a mud path.
Traffic/ Congestion	 Cars queue across the junction at Sheen Lane / Upper Richmond Road and when the traffic lights turn red - the traffic often continues to cross which makes this unsafe for pedestrians. Would a yellow box make this
	safer for pedestrians?
Cost – too expensive	 More physical activities offered by the borough via affordable prices There is a wide range of activities in the Borough but many are very expensive. There should be free access to Gym for elderly. Costs need to be as low as possible for all.
Poor quality of footpaths	 Sloping pavements, cars extended over pavements and endless broken paving stones= very unsafe for pedestrians. All of a car, not just the wheels should fit into the 'front garden space 'Brisk walk on uneven footpaths is dangerous for elderly. Footpaths, particularly of the side roads are often in very poor condition. 'Holding' repairs are done for health and safety issues but the basic problems are there such as tree roots raising the pavements and repeat repairs so the paths are generally not safe for the elderly and those less able mobile. I use a wheelchair. Some of the high streets are well maintained but pavements in side streets are poor. Lack of parking enforcement especially at street corners and pavement drop downs makes the problem more difficult. The provision of clearly marked cycling routes throughout the borough is appalling, often there is none. Cycling parking in Richmond town centre is inadequate. Also, cycling parking at all the entrances of Richmond park is essential. I can't believe there isn't any. Traffic is congested making it dangerous for cyclists. Cycling routes to schools should be introduced. Public transport in Ham is poor. The K5 should be extended around Riverside Drive from the Dysart all the way to Ham House to make this attraction more reachable by public transport and to



	 provide people living in Ham easier access to Kingston. The towpath between Ham and Richmond needs to be improved so it's not muddy and stony. The path along Church Road between Latchmere Lane and Ham Gate Avenue needs 'gravelling' or similar so it can be used at all times. Mostly it's a mudpath making it impassable. A proper pedestrian pathway needs to be made along Church Road between Latchmere Lane and St Andrews church - currently there is nothing, verges to walk on or a mud path. Footpaths need repairing but when they are repaired they are sometimes worse!! Time taken to repair can be very long so pedestrians have to walk on road or cross over. Lots of inactive periods when the footpath is supposed to be repaired
Poor environment	• What is happening to a replacement for Meadows Hall - it is still empty! The Twickenham Age Concern building is welcome but unsuitable for many of its activities.
Concerns about safety	 I don't feel safe in my neighbourhood, because of poor street lighting, people (incl teenagers) drinking outdoors in the evenings and at night, dangerous cycling on the towpath, people taking drugs / dealing near Richmond Lock.
Poor access to information and advice	 The council could run more activities such as walking groups; these need to be promoted well, and run well. I use the internet to search out what activities are available and when and where. The info is often out of date or not there in the first place. All services need to be advertised even more. As regards transport I find the councils refusal/reluctance to police the Taxicard and Comcab most frustrating. Information health ought to be discreet, not public knowledge, but activities are under-publicised. Constant reminders of health are annoying but lack of going out ideas are boring. I have not been sent any information about these areas
Lack of services	 There isn't really a leisure centre etc. near me. I have ME and advice to prevent my condition worsening is not available from the Council. We are a local support group and would welcome a local service to advise people newly diagnosed with ME on the importance of rest and pacing. "Normal" preventative advice re: exercise is counterproductive for someone with ME (also known as CFS).



Q8: Below are some examples of services the council run to help you look after yourself and keep healthy and well. Please indicate which statement applies most to you for each service:



Q9: If you selected 'Have used it' for any of the above services, please provide some feedback on how helpful this was for you.

LiveWell Richmond:	1x This was somewhat helpful
Liveweil Richmond:	3x This was helpful for me
Weigh2Lose:	2x This was helpful for me
Exercise Referral Programme:	2x This was helpful for me
Health Walks:	3x This was helpful for me
	1x This did not help me
Expert Patient Programme:	2x This was helpful for me
Health Trainer:	1x This was somewhat helpful
	1x This was helpful for me
Befriending Programme:	1x This was helpful for me
Walking away from Diabetes:	1x This was helpful for me



Q10: Please tell us if you have any other comments or suggestions about how we can help you keep healthy and well in the borough.

Theme:	Response:
Improving cycling provision/ traffic congestion	 Vastly improve cycle lanes. I live on a busy main road. Most of the traffic is school runs as there are 7 schools within the mile. I see very few children cycling to school which we all know benefits health and the environment. It worries me that cars are given precedence here. Actually, the only cycle lanes locally are on wide parts of roads where they are completely unnecessary and have been a waste of our money. Cycling proficiency training for adults? Improvements to road infrastructure to encourage a safe cycle commute. Cycling paths that are safe to use (i.e. safe from cars/trucks). Traffic calming measures/road improvements for pedestrians and cyclists.
Physical activities	 Discounted or free gym membership/pool access/classes? Beginners running clubs in the parks? (Weekends) More affordable physical activities for families I.e. community centres with activities to do indoors. Lower rate / concession rate for pensioners for exercise classes. Teddington's Elleray Hall is an excellent provider of classes at very reasonable rates for pensioners. eg Zumba Gold at Elleray Hall is 50p per session per week. At Age Concern Twickenham the rate for the same class is £4.00 per session per week. Both organisations require a yearly membership fee in addition to the session fees My GP referred me to the Active Fitness Class at Teddington Pool which is a real help in keeping my muscles strong and my body flexible. NICE has reviewed exercise referral schemes and found them ineffective; some of this was because of the ways GPs etc used them - half-heartedly, and with little or no back-up, or follow-up support. More gyms affordable to all.Decent salaries for gym personnel. Fair prices at gyms Keep Teddington Pool and the sport and fitness centres in the public sector to keep them reasonably priced and accessible to all residents Promote and support parkrun - free 5km timed runs on Saturday morning. There is one in Richmond Park and it is a fantastic way of improving health and wellbeing I suspect from recent experience with some of the voluntary sports organisations there is room for referral particularly for older residents to activities such as lawn bowls etc
Information and Advice	 I support that there are some services in the borough for helping to keep people healthy. It would help if the NHS would give my medical diagnosis although I have been advised that this is due to my condition. I would also like to know more about the Expert Patient Programme in Richmond. I would be interested in taking the course as I have a long term medical condition and it would help in my care. There may also be an issue of what activities may be available for residents to do in the borough. At the moment all the activities I attend are for old people and I would like to find something where I am more similar to the people in the group.



	 More advertising of 'fun' events which encourage participation. Better communication of available services. I have MS so am fortunate to have wonderful MS nurse to refer me to services but many friends have no knowledge of helpful services. Taking personal responsibility for our health and wellbeing is crucial in so many ways, not least the survival of our priceless NHS. I think information about the above services should be provided as a matter of course to people who have NHS health checks. GPs / nurses are not proactive enough. Yes, they are probably overstretched, but that does not help me and my health. I was treated for cancer 2 years ago and lost my income (I am self-employed). Finding myself on benefits I would have benefited from some of these services, if I had been told and pointed in the right direction. It's all very frustrating. Provide information via different outlets eg Streetlife, FB, adverts in papers, in doctors surgeries, libraries etc.
Access to	 More flexible opening times for all services. Eg teddington pool closes
services	at 9.30pm, I return from work approx 8.30pm.
	 I think there is a need for people over long holiday breaks when they
	cannot access their GP or Dental services
	 Better emergency arrangements for elderly people and their carers. I have heard of a number of instances recently where elderly people have fallen in their homes and the only option is to call an ambulance, which can put significant pressure on the ambulance service and result in a wasted A/E attendance, very stressful for both the cared for and the carer. I have experienced this myself. We need a team as part of the integrated care programme which can attend such instances, assess the individual and sort out the immediate problem. An ambulance is not required in so many instances; just personnel who can pick the patient off the floor and get them back on their feet, into bed etc. Many older people will fall without sustaining any significant harm; it is just a result of their frailty. All the carer requires is a little emergency support with a rapid response. Please see above. Relaxation/meditation courses and very gentle therapeutic yoga can help people with moderate ME but it is difficult to sustain a course because many members are unable to attend regularly.
Environment	• As previously mentioned earlier in the consultation, a clean & tidy environment, e.g. litter free and grafitti free, really can reassure residents and help prevent anxiety. Also anti-social behaviour by other residents can be a real worry to some people.
Community	 Encouraging local shops and community activities
Other	 Don't know. My GP is in Hounslow so I often have to use services there. The mental health staff can be harassing with outdated records and over-attention for recovered or never ill patients and food poisoning cases were channelled to the wrong health service. Might be worthwhile to investigate food quality. There are incidences of dizziness and diahorrea from local eateries, the malice behind which I cannot comprehend



Appendix 2 – The Care Act Survey: Prevention, Information and Advice – Results

Question 1: Have you ever accessed information and advice from the Council or other organisation to help you live independently?

Response	Total
Yes	24
No	22

Question 1b: How did you access this information and what was your experience?

Service	No. that have used this service	No. who found this service helpful	No. who found this service easy to access	
Telephone Service	17	12	9	
Face to face or	16	11	12	
drop-in				
Websites	13	7	7	
Leaflets	12	6	3	

Question 2: What kind of information and advice services did you access and what was your experience?

Service	No. that have used this service	No. who found this service helpful	No. who found this service easy to access
Independent living service	8	4	6
Resource directory	5	4	1
Direct payments support	10	3	3
Employment Support	1	1	0
Welfare benefits advice	4	4	4
Money management	4	3	3
Debt advice	2	2	1
Crime Prevention or Security Advice	2	2	1
Other*	4	-	-

*Other included: Carers Centre, Counselling, Fire alarm/ Smoke detectors, Help with caring – agencies, Me Too & Co, Three Wings Trust, Carer Support, Family relationships



Question 3: Have you ever accessed local leisure or education activities or classes?

Response	Total
Yes	34
Νο	12

Please tell us which services you have used and what your experience was:

Service	No. that have used this service	No. who found this service helpful	No. who found this service easy to access
Libraries	24	22	20
Day centres	3	2	2
Exercise classes	8	8	5
Adult educational	16	13	13
classes			
IT/Computer	6	6	5
training			
Art classes	8	6	5
Other*	5	-	-

*Other included: Laughter therapy (brilliant), Psychotherapy, Swimming Pool, Carers in Mind, If you cannot move from your home or even toilet not much help

Question 4: Have you or anyone else in your family ever used any support services e.g. counselling, befriending services and what was your experience?

Response	Total
Yes	34
No	12

Which of the following schemes have you used and what was your experience?

Service	No. that have used this service	No. who found this service helpful	No. who found this service easy to access
Support groups	20	16	14
Counselling	15	12	6
services			
Befriending	5	4	2
services			
Mobility services	3	3	0
Sensory loss help	1	3	0
Good neighbour	0	1	0
schemes			
Respite care	5	6	3
Other*	2	-	-

*Other included: Hestia (for my son), Useless if you cannot leave your home or toilet



Question 5: Have you ever received support to help you live independently in your own home from the Council or other organisation?

Response	Total
Yes	16
No	30

Please tell us which services you have used and what your experience was:

Service	No. that have used this service	No. who found this service helpful	No. who found this service easy to access
Home maintenance	3	4	2
Gardening services	1	1	0
Hot meals	1	1	0
Frozen meals	1	1	0
Equipment	6	6	3
Careline	3	3	1
Telecare	2	2	0
Sensory equipment	1	1	0
Small adaptations	6	6	4
to your home			
Mobile hairdressing	1	1	0
Other*	2	-	-

*Other included: Help with personal care, Nothing offered - no idea how to access not appropriate

Question 6: Have you ever used a transport scheme to help you get around?

Response	Total
Yes	7
No 38	

Please tell us which services you have used and what your experience was:

Service	No. that have used this service	No. who found this service helpful	No. who found this service easy to access
Blue Badge Scheme	6	6	5
Minicab services	3	3	2
Other transport e.g. Super Shopper Bus	1	1	0
Other*	2	-	-

*Other included: Greenwood Centre Hampton Hill, Taxi Card

Question 7: Have you ever used the Richmond Card to get discounts for services?

Response	Total
Yes	13
No	32



SECTION 2

Question 1: If you have ever had problems accessing any of the services mentioned above, please explain why.

Theme	Response
Problems contacting/ communicating with services/ organisations	 I tried to access care and support as a main carer for my mother who has dementia. Social Services delayed in assessing her and I could not cope, they did not really help or support us. Telephone lines on hold, on answer with no way to leave a message, long periods unmanned. In crisis this seems the last straw. Unavailability of email addresses Unreliability of telephone message services Delays in responses Constant staff and system changes Lack of direct e-mail addresses and phone extensions, and use of call centre, obstructs direct access. Constant changes of staff and systems delays and hinders communication, and means that leaflets etc tend to be out of date. I requested a Finance Assessment Form from the Access team but that request was forwarded to a Social Worker who then contacted me to say I should ring the Finance Team. Too many steps and too long to achieve outcome.
Availability of Information & Advice	 I am responding to this questionnaire as a carer and have not had difficulty although the person I care for would need assistance in many instances. He is a mental health service user. Lack of openness about criteria being used to ration services puts applicant at a disadvantage I am not aware of any. Direct payments system set up and no help or advice given for the first year? No assistance given in relation to long term housing planning The procedures to access services were hard to find out It took a long time to find ASCA. Other organisations did not understand that although I was not the substance abuser I was the one that needed help. I nearly gave up trying as I met so many closed doors or blind alleys. I had not heard the term 'carer' 'til I came to ASCA. People looking for help may well not be familiar with the jargon that that service/area of expertise uses. When I originally became a mental health carer (2000) I was not directed to Carers in Mind. I believe, and hope, this situation has been rectified as it is an invaluable service.
Finances and times to access leisure services	 As a Carer I do not have the finances or time to access leisure services
Quality and availability of services	 Unreliability and poor quality of some contracted-out support services They don't exist. My son has autism. He is moderately intellectually disabled but we are not eligible for respite. Do you



have any idea how hard it is to get? How high the threshold? I have asked for respite at every review for five years! There are NO day centres, you closed them. Thanks very much. Parents are asked to do hours of unpaid admin to hire their own staff with all that it involves-for what? For people like my son to sit in a shopping mall with a bored worker?? Oh, you also closed the sheltered employment. Unless a service is specifically for people with autism it's not accessible. Stop having fantasies about people with autism doing water skiing with their PAs. My son is a lonely figure in mainstream groups, unable to make friends and conspicuous, miserably aware he isn't wanted. He wants to go to
a group for friendship, work, activities but you closed them. He'd love to go away for a holiday with a group of young people with autism such as Bendrigg, but that's been stopped. This idea is the council "signposts", not provides.
 Long waiting list for counselling, so in the end got it from Richmond Carers charity.
 Not always disability friendly or enough extra support Taxi card service. Erratic service, taxi doesn't turn up or very late Richmond council is and always has been in denial about
Asperger's Syndrome. They betrayed me as a child and the betrayed me as an adult. They are unfeeling and uncaring for anyone vulnerable. My mother sincerely hopes they all rot in hell
 Tried the taxi card but this service was very unreliable, (black cabs mainly) and expensive

Question 2: Which other	services would	help you to remair	n healthy or independent?

Theme:	Response:
Additional nursing/ care support	 Independent supported living for autistic adult child. Night time care Carer's one off annual grant A stair life for my husband who will be 80 years of age in May and for myself too as we both have COPD and he has many other illnesses and climbing the 13 steep steps to our first floor home can be a nightmare, furthermore I care for our daughter who is disabled and coming to visit us is pretty painful for her. A buddying service. Support when carers on holiday. Reliable service when contracted by Council to private agencies Sheltered employment. Actual respite More support and access to mental health specialists, particularly for learning disabilities. More awareness and support from GPs. More physical support to motivate me to take care of myself. District Nursing Chiropody/podiatry Respite care for my son so I can have a break and get some time with my husband as a couple
Support in a crisis	Effective and accessible crisis response services
Increase in leisure/ educational activities	 Day centre for young people with a good activities program Activities for young people with autism Fitness and exercise groups, during the day, weekdays, with



Information & Advice Help arranging care & support	 other similar people. Exercise classes More day centres needed! Exercise group/ reduction in fees A health champion and proper guidance with monitoring and follow up by dietician and doctor. Parents not expected to do the hiring/payroll etc of helpers they scrape up themselves, and then think of what on hearth the PA
	and their children to do given the closures.
Consistency in care giver/ support	 Someone regular and permanent to care. Taxi scheme to be more reliable and less expensive I think any Richmond Social Services as I live in this area. I thank Rebecca Swist who is a learning disability team seeker who has been a help to me in the past when I have had a bank problem with staying in balance. I have been at risk with that for a while.
Provision of informal services	• More of the kind of informally accessible, caring and imaginative services provided by organizations like Richmond Mind (and their Carers in Mind service in particular) Services directed at Autistic adults eg dentists etc who understand the problems

Question 3: Do you currently us a computer or mobile technology?

Response	Total
Yes	42
No	4

Question 3b: What kind of computer/mobile technology do you use and how often?

Technology	No. who use this Daily	No. who use this once a week or more	No. who use this less often	Total
Mobile phone	21	2	5	28
Smart phone	18	3	1	22
PC or laptop	32	6	0	38
Tablet	9	5	2	16
Other*	2	-	-	-

*Other included: The person I care for does not. Only a very simple mobile; My only link to the outside world

Question 4: Do you think apps such as these could help you stay independent?

Response	Total
Yes	14
No	20



Question 4b: If yes, what kind of apps do you think could help and why?

Theme:	Response:
Information & Advice	 I don't really know enough but I do have access to a few apps which I find useful Possibly to gain useful information/ meeting reminders and local events services/activities available in the area Notice of Discounts & concessions for disabled people. Up to date information re services and facilities available and how to access them Local information Are websites not sufficient for most things? I can see for some apps could help Advice services available for very elderly people with mobility problems. More taxi card journeys needed - not enough provided per annum because Dial-a-Ride does not take you for long journeys which are essential. Some apps could perhaps help me keep well informed but Carers in Mind do this well already
Medication/Health	 Medication alerts, news items, games for memory Basic health checks i.e. temperature, blood pressure. First Aid, access to medical help advice in emergency
Reminders	 Reminders/ motivators Events reminder & booking Appointment reminder. Notes from counselling session - key points - reminders key areas needing work. Pills reminder, password reminder
Managing Care	 Running total of care payments made for annual budgeting & monitoring
Other	 Don't have a phone with Apps! Ok for IT aware people but for someone over 80 who has not used computers is of no use whatsoever!



Question 5: Please tell us if you have any other comments or suggestions about local social care services.

Theme:	Response:
Assessments	 Social services were too slow in assessing my mother and it resulted in a crisis. When the crisis came they still did not help. Having been a main carer for my mum with little support when I needed it, it was not there. It was very much they wanted to know how much her contribution would be before getting involved. They were not quick enough to assess her in hospital to prevent a breakdown in the caring role. As a carer I was on my own. Throughout my son's childhood I was refused a carers assessment or an assessment for him on the grounds that he has a diagnosis of PDD (NO5) - close to Asperger's & therefore doesn't have learning difficulties. This was while various friends with far less challenging children were getting an assessment and services - children who were easy-going, could cope with school, weren't ever violent I had no respite care, which I really needed, as he was home-educated just short sitting/befriending periods through Three Wings Trust's sitting service, which I paid for. I realise resources are very short but I think it would be fairer to give assessments & work out whether an individual child needs help, not refuse on the grounds of a diagnostic label. (I realise this isn't your department!) My contact with Adult Social Services, through Rebecca Swist, has been great, very helpful!
Contacting staff/ services	 I had an issue with social services, the person I wished to get through to was on leave, the person I spoke with stated that she would leave a message but he never called back. It was a transport problem. I believe that all your departments to not liaise with each other. There is a lack of communication and conflicting information. The merger between Kingston and Richmond seems a disaster and the departments and agencies are constantly changing names and for me "Mrs Jo Public" it is hard to keep track of the changes. ASCA is a charity-funded organisation. Not only did Richmond's facilities not point me towards ASCA, but had none of their own facilities which could support me. If ASCA didn't exist I would have received no help. ASCA's support is keeping me sane, and helping me to find a solution to my problems. In the long run it may also result in an adult seeking help for drug abuse and resolving that person's problems too.
Education and Leisure activities	 I think more should be done for older people to access leisure and exercise classes. Make it more attractive financially. It will prevent age related illnesses and disabilities and = cut costs to NHS etc. As an example we used to sue the free swimming card which was unfortunately abolished
Availability of services	 Hate the use of technology to bypass human beings. Need a human being to talk to when problems hit. The closure of mental health drop in centres is inevitably causing isolation and more work for carers. This can lead to ill health both for the cared for and the carer. More specialist support and more access to such support, for learning disabilities.



	 More discussion groups on family relationships It is a shame some have closed down when outside support is so valuable. More holiday and daytime activities required - when you work it's difficult to settle you SEN child for a day's activity - too fragmented with what's available.
Quality of services	 Don't feel that social services are very helpful. carers are left isolated Dementia carers support services very helpful, See comments already made above about Mind in Richmond - as an example of the benefits of effective service-commissioning and a contrast to the commissioning of low-quality & unreliable services from some local private care agencies. They don't offer hardly anything concrete. They don't have enough money to do so. I think they are outstanding with my experience but efforts should be concentrated on the families of people that we support to understand the recent changes in legislation particularly CQC and Care Act. I look forward to my AutenRichmond Social Group Meeting - as his carers my wife and I have noticed a change in {NAME of son} since he has been attending this club I use Richmond Carers in Mind for information, support, respite a lot and find them extremely good Being a carer I don't personally access many social care services other than Carers in Mind. However we have used Ruils and help with benefits - very effectively. I have attended Job Centre with my son and taken information from them. Carers in Mind provide excellent information, support and respite days out.
Cost of services	 The increasing charges for care service is detrimental to me commissioning sufficient support to keep me safe & well. Blue Ribbon 'nurses' charge elderly people £15 per hour BUT if the carer is with the person LESS than an hour they still charge £15 - for people who are on pension credits ONLY this is really robbery since the person for whom I was a carer was very unimpressed by their service
Use of technology	 Please remember that not everybody has apps or is on email. Whereas these might well be useful for some it does not negate the need for paper copies and one to one help Apps require reading, a difficult thing for me. Only use PC or laptop to look for work.
Other comments re: current services	 It would be wonderful for our daughter who has MS to have a younger person. Since 24.12.2014 my husband and I have been ill unable to cope, I as their Registered Carer but this last month has left me feeling absolutely useless. Can anyone assist her? These are my answers as a carer, obviously my sons views would be of more use, as he's the one accessing the services (or not). Don't feel this survey is very specific and doesn't not really cover supported living or learning disability and mental health in particular Get some money by taxing the rich - this will never, ever happen in Richmond. They had to go to Kingston-upon-Thames to ask about Asperger's syndrome for the 2009 Autism Act response to central



government. They are tory and what do Torys Do? Answer: Absolutely nothing. They believe if freedom for greed. They are now hitching up with Wandsworth "A penny in the pound council tax" by the heiress of Tesco who is still lying about her wealth. All the Wandsworth children poured over the boundary for state education. This is the ideology that the Tory's want. We are all doomed.

• The sooner the council increases council tax the better as it could then increase the level of care provided for those who need it. We are a rich borough and an increase in council tax would not be harsh for a large majority of people living in the borough.





Appendix 3 – Outreach Session Findings Outreach Session – Sheen Lane Day Centre

Themed Feedback

Торіс:	Theme:	
Accessing leisure or education activities or classes	 Discussions with staff highlighted the difficulty their attendees have in accessing services via public transport due to problems with mobility. These problems make attending a wide-range of services impossible for many people who use the day centre The entertainment in the day centre is reported as good and varied. Does not use other services on days off. Attendees are able to take part in a wide range of activities – some designed for entertainment i.e. singing, some designed for education too e.g. iPad sessions, cooking classes. Volunteers 3 days per week at the day centre. She takes part in cooking meals and distributing teas and coffees for attendees. She also helps to clear away after meal and break times. 	
Help to live independently at home	 Hairdresser Makes good use of services within her own home – for example an optician visits her at home and also offers low-cost glasses She stated she can get many things she needs doing done in her own home. Support worker who visits home. The support worker has taught her to cook meals, such as Shepherd's Pie, and clean her room. Lives alone and has no help at home Poor health – lives at home but cannot get out without assistance like that provided by day centre mini-bus service 	
Transport	 All attendees are driven to and from the day centre via minibuses to ease access Discussions with staff highlighted the difficulty their attendees have in accessing services via public transport due to problems with mobility. These problems make attending a wide-range of services impossible for many people who use the day centre 	
Use of technology	 I-pad sessions have mixed response – some attendees really engage and enjoy learning how to do this. Others will not engage with the new technologies no matter what. Some attendees unable to engage with the technology or classes due to their conditions. Enjoys many of the classes held in the day centre – especially the iPad classes. The lady has attended 5 classes up to now and she is currently using how to do online shopping. 	



Outreach Session – Carers Support Lunch at Richmond Mind

Themed Feedback

The group consisted of around 30 carers of mixed ages. Facilitated aided by Kim Willson.

Topic:	Theme:
Accessing Information and Advice	 Delivered by professionals/ trained staff Independent of the council Voluntary Sector Websites GP – gatekeeper to accessing information, advice and services Employment Support Paper-based information Bipolar website Carers in Mind Richmond Carers Centre Do not want misinformation/ lack of information
Accessing leisure or education activities or classes	 Good diet important to keeping healthy and well Meditation – David Lynch Foundation Reiki/massage Dog walking Exercise activities – tennis, health walks Discounted beauty therapy/ hairdressing at RACC Day trips – essential to "open up people's worlds" Need to adapt some leisure activities to meet needs of elderly/frail e.g. mini-health walks
Support Services Accessed	 Support groups Support workers at home Support workers in day centres Counselling Mentoring 1:1 support Access to care coordinator WRAPs (Wellness Recovery Action Plan) Employment support – Twinings Befriending Services/ Buddying Online support Peer Support Wellbeing Services/ E plus Out-of-hours support services needed in times of crisis Create social contact for people – when the cared for person is placed out of borough i.e. in a mental health hospital, the support available for carers is very difficult to access as they spend much of their time travelling Acute carers recovery worker
Help to live independently at home	 Acute carers recovery worker Support for carers needs to be recognised too – e.g. domestic support in times of crisis
Transport	 Transport links across and out-of-borough not frequent enough – makes visits to hospitals very time-consuming Cood use amongst servers
Use of technology	Good use amongst carers



Appendix 4 – Healthwatch Event - Prevention Findings

Care Act Proposals Event 21st January 2015, Clarendon Hall, York House, Twickenham – Prevention Data

Attendee's total: 60

Groups identified:-

Carer: 19 Service users: 2 Members of the public: 15 Voluntary representative: 17 Provider organisations: 3

Council employee: 3 Councillor: 0

Feedback and questions put to LBRuT panel at the final feedback and questions session

- We need people to help coordination
- Information to be earlier from the council and voluntary sector
- One stop for information with continual staff
- Need for knowledge on care homes and finance
- What will happen when I need care?
- We want people for advice
- Where they would go would be different for everyone depending on needs
- GPs are they key gate keepers and must sign post in all areas
- Better use of voluntary sector who are experts
- Need a selection of support for individual needs
- Help accessing care



Question 2: What do you do to keep yourself healthy and well?

Theme	Response
Eating healthily	Eat and exercise properlyEat well
Taking regular physical activity	ExerciseI cycle and am a cycle and walks trainer
Staying in touch with family and/or friends	We need to keep the freedom pass so that people can stay well and engagedPeople use their connections
Volunteering or helping someone in your community	 Volunteering- Need to make this easier for people. The council needs to make this easier for organisations and not cut back. Volunteers are the backbone of organisations but difficult to support as their numbers grow with only ½ paid workers. Office space is an issue. More work needs to be done, volunteering helps everyone especially disabled
Leisure Activities	PubFree time for yourself
Council/Voluntary Sector Support	 Social services Government service Carers Centre- Connections CAB - They are under pressure
Mental Wellbeing	Not worry
Other	Keep warm
Do nothing	 I do nothing Most people do not know how to look after themselves they do not know right from wrong



Question 2: What prevents you from keeping fit and healthy?

Theme	Response	
I do not have the time (care commitments)	 I don't have time as I am a carer Cannot consider prevention as a carer As a full time carer cannot look after myself Not a priority as I am a carer x3 Lack of support for my son who I care for 	
I do not have the time (other)	My basic survival is my priority and my leaking roof	
It costs too much	 Finance is an issue and clients have to contribute to care e.g. can't have good food etc Acknowledge money is an issue. Finance- having to contribute to own care leaves less money for other areas such as eating well 	
Poor physical health or disability	 Need to focus on those with low to moderate needs, this group is neglected. Need active representational body to assist them before things deteriorate. Council good with low level help i.e. equipment but not the other areas. People need help e.g. from the voluntary sector to flag up needs. Social workers don't do much as their involvement is time limited and people's needs change. Health needs Having someone giving you care and support 	
Feeling anxious or depressed	 Prevention is a safety net for people – anxiety about how much responsibility to provide this is being taken away from the state and placed on the individual. 	
Feeling lonely or isolated	 Shyness Need befrienders to take you there for the first time Need to pay people to identify people who are isolated. Job for jobseekers? Long distance relatives 	
Difficulty staying motivated	Therapies support - need encouragement to exercise	
Lack of information about how to keep healthy and well	 People to keep well and should be made easier Council does not use voluntary sector enough they have more expertise with specific 	



	 conditions and can flag people up for help. Housing associations should also flag up tenants who need help. Some assistance should also apply to carers who are under pressure and need help. Maybe a hotline? Information and advice relating to prevention needs to be clear In the long-term where are the resources to sustain information and advice provision going to come from? Demand outweighs the resources available to supply this. GPs are gatekeepers for prevention information – need a signposting role but are overstretched as it is – how will this work?
Lack of knowledge of what is on offer to keep healthy and well	 Current services such as live well are not well publicised, organisations and the public are not aware of these. Directory in future will help. Need to signpost to organisations around problems such as drinking, drugs and debt to prevent deterioration of mental or physical health GPs often lack the experience and knowledge to deal with Mental Health, causing inappropriate referrals and often leading to an escalation for the situation before the problem is picked up e.g. sectioned
Difficulty accessing services	 Difficult issue of prevention and accessing social services especially people with low/moderate needs No disabled gyms are accessible in the borough only at hospitals, the gym at St Marys university is not advertised Those with mental health issues have a different process and access is not the same. Adult service and MH service should have contact especially Occupational Therapists. DFCR grants are difficult to get physical and mental health closely linked. Demand is greater than supply of these services Particularly in relation to mental health – barely enough services to provide the counselling needs to those with mental health problems – where is the support for their family and friends? Family and friends wellbeing is affected too
Other, please specify	 Lack of social workers- Cases closed too early and no involvement over time so people deteriorate. Access team is there to assist some people staff don't have much involvement Social services do not look at long term needs only now. I.e. long term adaptations.



- In terms of Mental Health for young people how are LBRuT planning on increasing prevention in this area? Particularly for teenagers?
- Concept of wellbeing is a focus in the Care Act, but wellbeing is not an individual concept it is dependent on family and friends and the environment surrounding the person.

Question 2 continued: Do you use computer technology?

Theme	Response		
Computer/Laptop	 Computer is well used, communal computers in sheltered housing is good ie RHP properties 4 old people very good scheme managers very useful and helpful I use a computer but wouldn't use it for that Use computer not a laptop 		
Mobile phone/ Smartphone	Mobiles		
Tablet	• Ipads		
Internet	 Not online - vulnerable people might not use 		
Other	 RHP technology schemes excellent. They refer to social services and assist tenants if not a health provider then voluntary sector should be used Telecare My mum does, my daughter does Most useful thing is someone 6 yes 2 no 		



Question 2 continued: What kind of apps or websites do you think could be helpful?

• Apps that can photograph things e.g. menus and speak them back to the hard of hearing. Should be available to other groups such as dyslexics. Care line should also be available more extensively this should be funded not all self-funded

• Not everyone is bracing the digital age. Not everyone does. A written resource is very useful which brings all of the information together not just different leaflets and the council should fund the voluntary sector to do this as they are the best placed. The issues over technology need to be asked. Meetings are useful so those attending can spread the information around.

• Need to ensure clients are comfortable with types of technology and its right for them and adapted to their needs.

• Do not use Apps

General discussions

- Prevention of that and the gender are very important and the table waiting supporters face
- Important to be clear about who is eligible for services/who these preventative services are targeted at
- Some members of the group made a general observation that the councils policy to publish consultations online makes it difficult for people to find them; for example majority of the group had not heard of these current consultations although they started in December
- The group said they use the website to look at consultations on the online consultation finder but would like to be alerted or informed of these more proactively currently feels like you come across something but often miss important consultations



Appendix 5: Demographic Information

1. Are you male or female?



2. What was your age at your last birthday?



3. How would you describe your ethnic group?





4. Which of the following best describes you?



5. What is your postcode?

Postcode	Total
TW	2
TW1	15
TW2	6
TW3	3
TW4	1
TW7	1
TW9	6
TW10	14
TW11	12
TW12	12
SW13	4
SW14	8
SW15	1
KT1	1
KT2	1