

**REPORT FOR: CABINET**

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**Date of Meeting:** 19 July 2012

**Subject:** Harrow Mental Health Day Services Review

**Key Decision:** Yes

**Responsible Officer:** Paul Najsarek, Corporate Director  
Community Health and Wellbeing

**Portfolio Holder:** Councillor Margaret Davine,  
Portfolio Holder for Adult Social Care, Health  
and Wellbeing

**Exempt:** No

**Decision subject to  
Call-in:** Yes

**Enclosures:** Appendix 1: Equalities Impact Assessment  
Appendix 2: Consultation Summary Report

## **Section 1 – Summary and Recommendations**

This report sets out proposals to modernise day services for people with mental ill health. This is intended to deliver a step change in the quality of services and assist people to achieve better outcomes and greater levels of wellbeing, as well as delivering services within a constrained budgetary situation.

This is a key improvement priority for Margaret Davine, the Portfolio Holder for Adult Social Care, Health and Wellbeing.

### **Recommendations:**

Cabinet is requested to agree the new service model described in section 2.5.3, and specifically to:

1. Agree to the closure of Marlborough Hill day service
2. Agree to implement a “Hub” resource and mixed-use community space for people with mental ill health, which at least initially will be at The Bridge
3. Agree to the continued use of Wiseworks service as a vocationally-focused service for adults requiring support to develop new skills in a safe, supportive and recovery focused environment
4. Note the development of a marketplace of community-based services for people with personal budgets delivered through Shop4Support
5. Authorise the Corporate Director for Community Health and Wellbeing in consultation with the relevant Portfolio Holder(s) to: -
  - Agree and implement the appropriate route of securing the Hub service, whether by a tender, via the section 75 Agreement with CNWL, or by direct provision
  - Agree and implement the appropriate route of securing services at Wiseworks, whether by a tender, via the section 75 Agreement with CNWL, or by direct provision

### **Reason: (For recommendation)**

To enable the creation of a new model for mental health day services in Harrow that improves outcomes for service users.

## **Section 2 – Report**

### **2.1 Introduction**

Day Services play a critical role in community based mental health services. They offer a safe space for people experiencing crisis or distress, particularly for those who suffer discrimination and anxiety in the wider community.

Through providing a range of therapeutic, social and vocational services, they help people to recover from acute periods of illness, maintain their wellbeing in the community, learn new skills and develop social networks.

Changes are not made easily in such services, particularly in circumstances where people have used them for a long time and rely on them for staying safe and well.

However, Harrow's services have faced challenges for some time and this review has been required to put forward new options to improve quality, reduce cost, lay a path to the full roll-out of personal budgets in mental health services and address the existing concerns of service users.

Since late 2010, a Day Services Steering Group has worked together to discuss proposals for a new model of mental health day services in Harrow. The group includes Harrow Council, Central & NW London NHS Foundation Trust (CNWL), service users, carers and a voluntary sector representative.

The options set out in this report were developed following consultation and engagement with service users and carers, and have benefited from the regular input and scrutiny of the Steering Group. The consultation is described in detail in section 2.7 below

Capital considerations are an important part of this review. This report notes that officers will commence activity and planning to identify a suitable, long-term site should the Area Action Plan mean that an alternative to The Bridge be required to continue delivery of high quality facilities that can house services which are critical to the wellbeing of people who experience mental ill health.

Harrow's strategic vision of personalisation, delivering high quality services, of recovery, reablement and supporting people to be active members of the community has informed these plans for the future of day services.

## 2.2 Current situation

There are currently five mental health day services funded by adult social care. They are all managed by, or commissioned by, Central & North West London NHS Foundation Trust (CNWL) under a Section 75 agreement with overall funding of £1.05million (see table below).

The main services are three building-based day services: The Bridge, Wiseworks, and Marlborough Hill, with other complementary services being offered through voluntary sector providers such as Mind in Harrow.

Services delivered under the Section 75 are as follows:

Service	Provider	Sector	Description	Annual Net Cost
The Bridge	CNWL	Statutory	Building-based service for people with mental health problems who are FACS	£368,000

Service	Provider	Sector	Description	Annual Net Cost
			eligible. Activities include art, pottery, exercise groups, key-working.	
WiseWorks	LB Harrow	Statutory	A pre-vocational work centre for people with mental ill health sharing a site with Marlborough Hill drop-in. Activities include computers, photography, woodwork and horticulture.	£250,000
Marlborough Hill	Family Action	Voluntary	Drop in Service opening 5-days per week. Offering cooked meals, art, groups and outings.	£252,000
Befriending Stepping Stones	Mind in Harrow	Voluntary	Support for individuals to access training and community facilities via Stepping Stones project and befriending.	£51,000
Sneh	Sneh	Voluntary	Asian specific day service for people with mental health problems offering social contact, gentle exercise, outings and lunch	£26,000
<b>Total</b>				<b>£947,000</b>

Though many people with Personal Budgets use their funding to access Wiseworks or The Bridge, 27 people (around 6% of the people using all day services) have taken their Personal Budget as a cash Direct Payment and buy services or activities from different providers. Those budgets add up to around £100,000 per year, bringing the overall budget to £1.05m.

In addition there are a number of other groups and activities that people with mental health problems access, including Ekta, a group for people from South Asian community (activities include: outings, discussions, shared meals, dancing, singing) and Haayan, a project focussed on people from the Somali community (supports approx 50 people with severe mental health problems through counselling, befriending and peer support).

Non-funded groups and services include Rethink Mental Illness' Harrow Rethink Support Group, Harrow Community Choir & The Other Group (TOG) for service users & carers.

Up until 2010/11 Marlborough Hill and the Bridge were partly funded by NHS Harrow, however this funding was terminated through an earlier savings round.

At the moment, the majority of people who use services from The Bridge, Wiseworks, Mind in Harrow and Sneh Care have substantial or critical needs

as set out in the statutory guidance on eligibility criteria for adult social care England 2010 (“Prioritising need guidance”). Throughout this report reference is made to “FACS eligibility” (FACS stands for Fair Access to Care Services), as this is the term commonly used and understood by those working and receiving services. FACS relates to the previous statutory guidance, however the criteria has not changed in the more recent Prioritising Need Guidance.

Clients using the services and groups of Marlborough Hill, Haayan and Ekta do not have to be FACS eligible. These have a mix of clients who are FACS eligible and others who are not, though may have been at an earlier time.

## **2.3 Statutory Framework and Guidance**

Under s.29 of the National Assistance Act 1948, persons who are suffering from a mental disorder of any description, amongst other persons, are entitled to non residential services. The Secretary of State has made directions in respect of s.29 services, including the LAC(93)10 directions. At paragraph 2(1)(c) local authorities are directed to provide, whether at centres or elsewhere, facilities for occupational, social, cultural and recreational activities. This can include day centres, workshops, recreational and educational activities, as well as art, sport and drama.

Under s.2 of the Chronically Sick and Disabled Persons Act 1970 the local authority has a duty to provide services to those who are assessed as eligible. These include recreational services and educational facilities.

In 2006, best practice guidance was published by the Department of Health, “Commissioning guidance on day services for people with mental health problems” (“the Commissioning Guidance”). This highlights the importance of considering the diverse range of needs and experience of people requiring support and the need to ensure that people with mental health problems do not remain apart from the rest of the community, by living, working and spending their leisure time in a range of specialist mental health provision, as this limits both opportunities for those with mental health problems and the wider communities’ understanding of and ability to accommodate them. The Commissioning Guidance recommends that resources be directed towards promoting inclusion rather than maintaining exclusion.

The Commissioning Guidance states that day services should be focused on the following:

- Promote recovery
- Focus on community participation
- Reduce social isolation
- Offer opportunities for people with mental health problems to provide support to each other and to run their own services
- Maximise choice and self-determination
- Meet the needs of diverse groups
- Ensure that services are accessible to people who are more seriously disabled by their mental health problems
- Involve users and carers

- Increase diversity of provision
- Improve cross-sector working

The Commissioning Guidance recommends that day services should fulfil four key functions:

- Provide opportunities for social contact and support
- Support people to retain existing social roles, relationships and existing social/leisure activities that they value
- Support people to access new roles, relationships and mainstream social/leisure opportunities of their choosing
- Provide opportunities for people with mental health problems to run their own services

In 2010, best practice guidance was published by the Department of Health on setting eligibility criteria for adult social care (“the Prioritising Need Guidance”). This guidance is published in the context of promoting personalisation and choice and makes clear that this will only be appropriate when support is put into universal services and early intervention and prevention. It also highlights the importance of utilising all relevant community resources, including the voluntary sector.

## **2.4 Why a change is needed**

Although Day Services for people with mental ill health in Harrow have been reviewed a number of times, a new model has not been developed. The guidance referred to above and the increasing use of personal budgets means that a review is required to ensure that resources are used in the most appropriate way.

Though there is some duplication and fragmentation, good work exists at the current services and can be built on for the future. There have been a number of major changes since the current model of services in addition to the personalisation of adult social care, including the impacts of the recession on the employment market and the welfare system, the funding cuts to local government and the local decision by the health service to withdraw block funding in 2010. This review gives opportunities to modernise the services and update their role in the local mental health system.

There is a need to have flexible services due to increasing demand for services. Over the period up to 2015, the ‘Projecting Adult Needs and Service Information’ project, forecasts a 2.5% growth in the numbers of 18 to 65 year olds with mental illness needing support in the community. These increases are expected to continue in future years.

In common with many places, few people with mental ill health are moving on to employment, which needs addressing as employment is a key indicator of social inclusion and helps build confidence and self esteem. A re-vamped service model could support people to increase their independence, confidence and skills which impacts on health and quality of life, but also on people’s ability to start or restart volunteering or employment, which improves mental health and supports a key Council priority.

The rolling out of personal budgets in mental health services requires the current services to be redesigned to reflect the stronger voice of users and the variable nature of income levels. The council has created a flexible market of services through the award winning Shop4Support which enables people to find and buy services that are tailored to their needs.

The conclusion has been that there is a need to modernise the mental health day services because there is an opportunity to:

- improve value for money;
- establish evidence-based models of service
- focus on recovery outcomes;
- improve the co-ordination of care pathways;
- improve equity and access for the most vulnerable

## **2.5 Options considered**

Officers have sought to identify the options that would meet the objectives of the review and achieve the outcomes identified as most important by users and carers through the provision of high quality services within the available budget.

Officers had discussions with neighbouring boroughs about potential for joint work on mental health day services, but there have not been potential partners at a similar point to engage with in a joint project.

The options below are based on three common elements: -

1. All services in the new service model would be redesigned and recreated with new targets and objectives, and new ways of monitoring their performance and quality, including an active role for users and carers
2. The building-based offer would be centred around a 'Hub' service, which would be characterised by; -
  - a. An open-access building with support for people with mental health problems, regardless of whether they are FACS eligible
  - b. Availability during evenings and weekends
  - c. Proactively getting other groups to use the building and facilities
  - d. Supporting people to exit the service when they are ready and to get back into the community
  - e. Have a working kitchen and café
  - f. Be focused on making peer support really work
3. A new offer around community-based services which would be -
  - a. Funded via personal budgets and therefore available to people who are FACS eligible
  - b. Focused on developing skills and experiences, strongly focused on recovery and improved quality of life
  - c. Aiming at participation in wider society
  - d. Chosen by service users to meet their individual support needs and to develop their abilities and interests

Within each of the options, services currently provided by Sneh and Mind would be considered as part of the 'community based' offer.

We consider there to be 4 options for Cabinet to consider: -

1. Retain all three day services (Marlborough Hill, Wiseworks, The Bridge)
2. Retain Marlborough Hill and Wiseworks, but close the Bridge
3. Retain the Bridge and Wiseworks, but close Marlborough Hill
4. Retain the Bridge, but close Wiseworks and the Marlborough Hill

All the buildings have both strengths and aspects that can be improved as part of a wider modernisation project. We have discounted options of retaining only Wiseworks, or only Marlborough Hill, as they would mean reducing access to building-based services to a level below that which is considered viable.

Evaluation of the options considered has been outlined below:

### **2.5.1) Retain all three day services**

#### ***Description***

- Marlborough Hill would be the open-access Hub,
- There would also a limited satellite service at The Bridge offering higher levels of care and support for older clients with secondary physical health needs
- The Bridge and Wiseworks would focus on providing services funded through personal budgets.

#### ***Analysis***

The use of Marlborough Hill brings challenges as it is not accessible to people with mobility problems; the delivery of wellbeing services to people with physical health conditions is limited. Though partly used at the moment, the configuration of the upper floors of the building reduces it's attractiveness as a place to rent out space in – which reduces opportunities for generating revenue and permitting community groups to use it.

Efficiencies could be found by reducing duplication or improving co-ordination of elements such as cooking, gardening and woodwork where there are facilities at both The Bridge and Wiseworks.

Sustaining the current levels of activity and staffing would not be possible, so services would still be required to combine or merge and reduce staffing levels. This would particularly affect Wiseworks and The Bridge which would see funding reductions of up to 40% in this option.

The services could only be sustainable if additional funding would be attracted. This would need to be generated from trading activity and/or external grant and contract funding. A social enterprise or Community Interest Company are the likely models for this.



Maintaining the three buildings would leave very limited funding for people with personal budgets to get new services in the community, such as Confidence for Life, 'Bridge Builders' or direct employment of personal assistants. This would not significantly advance the personalisation agenda, or help people to exercise choice and control over their lives.

### **2.5.2) Retain Marlborough Hill and Wiseworks, but close the Bridge**

#### ***Description***

- Marlborough Hill would again be the administrative base for both services and the open-access Hub for all users, including those currently using the Bridge.
- Wiseworks would provide vocationally focused services for people with personal budgets and those participating as part of a social enterprise structure

#### ***Analysis***

The issues in 2.5.1 above about Marlborough Hill increase in this option. The move of Bridge clients would change the character and programme at Marlborough Hill. Marlborough Hill does not have the space or accessibility to fully take on the expanded role. It may be very difficult for a number of the more frail users of the Bridge to take on board the switch in settings. These factors would put at risk the successful delivery of change.

Materials and equipment might be transferred from the Bridge to Wiseworks in order to continue some of the current activities, though there could be a cost.

One staff team could operate across both buildings, enhancing integration between the sites. The limited space at the buildings would mean a greater proportion of personal budget funding would be spent out in the community.

### **2.5.3) Retain the Bridge and Wiseworks, but close Marlborough Hill**

#### ***Description***

- The Bridge would act as the Hub / open access space, utilising its accessible space and capacity to make a vibrant centre with a range of organisations running sessions and activities for all sections of the community.
- Some funding would be required to reopen the public Aztec café.
- Both sites would offer personal budget services as part of a linked programme across the two, with Wiseworks more vocationally focused providing meaningful and stimulating activities.

#### ***Analysis***

The Bridge would need to be 'refocused', changing its culture to bring back enthusiasm, entrepreneurship and an outward looking focus.

The staff teams could be merged in order to make the most of the resource available and reduce risks around financial sustainability.

This option would not create significant levels of additional funding for community services as it is expected that the majority of people with personal

budgets would probably be drawn into the building based services, based on current patterns of service use. However, the space at The Bridge could be used to accommodate sessions from a much wider range of groups.

There is a gymnasium-type room at the Bridge that would allow for increased options around physical health-focused sessions such as Tai Chi, Zumba, reflexology or meditation classes. The proximity to the leisure centre offers scope for partnering.

Wiseworks would be more entrepreneurial, generating income to help ensure the sustainability of the site and give meaningful vocational development and stimulating day occupations to service users, including those who could develop their skills and increase their opportunities to move into the wider labour market.

#### **2.5.4) Retain the Bridge, and close Wiseworks and Marlborough Hill**

##### ***Description***

- The Bridge would operate as the Hub and the base for personal budget services, again with a range of organisations able to operate from the site.

##### ***Analysis***

Again, the services and culture would need to be re-set to bring the building back to life. The other benefits set out above regarding the Bridge apply to this option also.

Equipment and materials from Wiseworks may be able to be transferred to the Bridge.

This option gives the largest level of funding for community based services operating outside of the day services. This would enhance opportunities for a range of activities including support to community groups and funding for outreach services. The majority of this would be delivered through personal budgets.

### **2.6 Recommended Option**

After careful consideration of the options it is suggested that Option 2.5.3 provides the most effective mix of value for money and opportunities to improve outcomes. This option is to **redesign mental health day services, based from The Bridge and Wiseworks buildings, but to close the Marlborough Hill building as a mental health day service.**

The bases for this recommendation are that:

- Marlborough Hill does not meet the access requirements that are required for providing services to people with mobility issues. Opportunities to make the building more accessible are limited and may be highly expensive
- We do not believe that we would be able to meet needs and improve outcomes with any single building of the three. By having two buildings we will be able to encourage community participation within the

services and to focus on a range of structured employment, skills, wellbeing and social care related activities

- There is significant community support for the retention and use of Wiseworks as a service that supports people to maintain their mental health, develop employability skills and move on to employment
- The equalities impact assessment (EQIA) demonstrates a clear case for the retention of the Bridge as it is the only current building that can fully cater for people with physical disabilities, and for older people with physical and mental social care needs
- This option would enable us to achieve the Medium Term Financial Saving (MTFS) of £250,000 per year to be achieved without the scale of disruption to vulnerable services users that would be expected if we were to reduce from three buildings to one
- Retaining a preventative 'Hub' alongside the statutory provision supports the Prioritising Need Guidance evidence, which suggests that only supporting those with a high level of need without adequately funding preventative support may lead to increasing demand for services in the longer term. This also contributes to a wide range of other Council objectives such as increasing employment and addressing health inequalities

The retention of Wiseworks in the new service model provides opportunities for new ways of working in the future. In particular there is a strong possibility that the service could offer support to adults with a variety of needs in addition to mental health to support them to gain pre-employment skills and vocational qualifications in the future. There is potential to increase income from commercial activities at the site, expanding on the graphic design service already used by the Council into areas like printing, subject to any necessary investment in facilities being identified and secured.

Clearly, the Council will need to continue to review service configuration in the future. Changes may be needed, either as a result of Area Action Plan proposals enabling a move to a new site, or because of changing service needs.

## **2.7 Consultation and Equality Impact Assessment**

The Council has carried out statutory consultation over a sixteen-week period from December 2011 to April 2012.

In this consultation we:

- Held a number of events to support people to be involved in the consultation process and speak to them face to face about their views.
- Held an event in each of the three main building-based day service in the borough
- Held sessions with South Asian, Somali and CNWL's Early Intervention Team's clients (young people aged 19-24 attended)
- Issued a questionnaire to all 3,600 people known to CNWL in Harrow as well as carers and other stakeholders, from which we had 368 responses, 55% of which were from current day service users.

We wanted to find out the things people wanted to get from services (outcomes) and how to arrange them to achieve that (model).

A report of the consultation results is attached at Appendix 2.

### **Challenges**

Throughout the consultation we received a number of criticisms about the process, and the questions asked. Many of these stemmed from the fact that the Steering Group had not seen the questionnaire used prior to its release.

Throughout the consultation period a number of questions were raised by local mental health organisations in relation to the process being undertaken, and assurances sought that the consultation would be extended to reach all local mental health service users.

As a result of these concerns, the consultation was extended for a further four weeks with a mail out to everyone known to mental health services in the Borough.

In arriving at the recommendations made in this report we have sought to reach a consensus which enables the steering group, and the wider mental health community, to support recommendations. However it is possible that there will continue to be questions raised at cabinet about the consultation process and the way that recommendations are implemented.

### **Proposed Model**

The proposal was to change the day services that we currently have in the Borough, in order to have two different types of day services:

- a **Community Bridge Builder** service, providing coaching and support to develop life skills and take part in community life
- a building-based **Hub** providing drop-in and activities with a recovery drive

### **Response**

Appendix 2 contains a detailed summary of the feedback and full consultation responses are available as background papers. A summary of issues raised and the outcomes and priorities arising from those are set out below.

- Anxiety about change and fear at losing a current resource or service, which may lead to isolation
- People value having a place to go to meet with people that understand their experiences
- The people, groups and activities were the things that were most important to people
- Wiseworks was referred to most out of the current services
- People with experience of mental illness were best placed to understand and respond to the needs of others and peer support was crucial, but many felt it was important to share responsibility with others when getting involved in running services to reduce stress,
- Support in the community which was needed included help with practical tasks and practical support, help making difficult phone calls, sorting out benefits, increasing confidence in using local transport

- Quality of staff was absolutely key
- Carers' views and needs should be more recognised
- Outcomes should include increasing confidence, employability, reducing the need for medication, reducing isolation and ensuring services are joined up
- Service provision should be flexible with longer opening hours, drop in sessions, services for people who work, places to meet and include and inform families
- Some participants suggested utilising Marlborough Hill/Wiseworks for new services given close proximity, but others felt that the Bridge was important, including a petition of 58 names requesting that the Bridge was kept open
- Other services such as Sneh Care should be available on more days than currently and the model should learn from other services such as Mind's Befriending or Confidence for Life
- Current services are not used by a number of groups, including some racial groups and younger people. Other voluntary support groups such as Ekta and Haayan were happy to use new facilities and work with other services
- For younger people, youth friendly services and a link to general youth services was needed, as well as a good website, peer support and access to volunteering
- Important role that day services play in prevention and that at least some services should not be dependent on eligibility, and be available for all. Prevention and early intervention keep people out of hospital and speed up recovery
- Users of Marlborough Hill may not go out if the centre closes, as some have had bad experiences in the community
- Review lacks focus about how day services could be more personalised and linked to personal budgets

When asked about the proposed service model **68% said they agreed** that we need to have a building-based hub or hubs and a "bridge builder" service helping people integrate into the wider community.

When questioned about the elements of the model, people were strongly supportive:

Question	"Strongly Agree" or "Agree"
<b><i>Must there be a building based hub to provide a place for people to drop in?</i></b>	85%
<b><i>Must there be a Community Bridge Builder Service to provide a service in the community?</i></b>	81%

There were some interesting variations to the level of agreement to the model amongst different groups. For example:

- Women were more positive than men about the proposals (75% agreed with the model)

- People who identified themselves as disabled were more positive (72% agreed)
- Carers were least positive (61% agreed)
- Responses were largely consistent across different ethnic groups
- Though fewer in number, young people aged 16 to 24 were much more positive about the proposed changes (93% agreed)

### 2.7.1 Equalities

Section 149 of the Equalities Act 2010 created the public sector equality duty.

Section 149 states:-

- (1) A public authority must, in the exercise of its functions, have due regard to the need to:*
- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;*
  - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;*
  - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.*

When making decisions in relation to service provision and in particular changing policies and the way services are provided, the Council must take account of the equality duty and in particular any potential impact on protected groups.

A small sub-group of the mental health steering group has developed the full Equalities Impact Assessment. The key impacts identified via the full Equalities Impact Assessment are:

- (Race) The consultation results show that the current services are not meeting the needs of particular racial groups. A potential positive impact of the proposal is to design services that allow specific existing community groups to use the Hub; members of Haayan and Ekta indicated that they would be interested in using space in the Hub increasing the presence of people from Black and Minority Ethnic Communities in this space. In addition, officers will ensure that the needs of Black and Minority Ethnic Communities are addressed in the detailed service specification for the future mental health day services. **A range of specialist, yet inclusive services will be available and will be co-located and/or work in partnership together to avoid separation of people in separate service provision.**
- (Disability) There are a significant number of older and frail service users within current services and accessibility was a concern. In addition to their severe mental illness many of these people have physical and/or sensory needs. The Commissioning Guidance states that one of the key functions for day services to ensure that services are accessible to people who are more seriously disabled by their mental health problems. To mitigate we will ensure that support is available without time limit and is focused on supporting and promoting

independence. There is a potential adverse impact on physically disabled people if Marlborough Hill is chosen as it is not as accessible as the other buildings. A mitigating measure will be to ensure that the buildings chosen are accessible to people with a range of physical disabilities, the Bridge and Wiseworks are most suitable to this requirement. **The choice of building will ensure the access needs of these individuals are met.**

- (Disability) There is a concern that people currently using Marlborough Hill will not use other services and may become isolated due to poor experiences in the community in the past. There is a potential adverse impact on some users with mental health if services are delivered in a different way and these users do not use them. A mitigating measure will be to ensure during the implementation stage that proper assessment and transitional provisions take account of these users and help them to access alternative provision. **The implementation plan will include a communications strategy to inform existing users and carers, any necessary client reviews will be undertaken and individual transfers of support will be an important part of the implementation plan.**
- (Age) There is an under-representation of service users under the age of 40 in all current day services. Whilst some individuals will be accessing the Early Intervention Service (14-35 years) this provision only support service users for a three-year period and therefore the numbers of younger people in services would be expected to be higher than it is. Younger People have told us that they are not accessing services as they do not meet their needs. We will ensure that services are provided more flexibly to provide opportunities for people who work to access them and to ensure that the services are located and provided in ways to make them accessible and sensitive to age, gender, ethnicity, religion, sexuality and disability. There is a potential positive impact on younger people as the future design of services can better address their specific requirements. **The detailed service specification will set out requirements to tailor delivery to this group, for service providers to work more closely together and will be closely monitored to ensure it happens.**
- (Sex/Gender). There is an under-representation of female clients in two of the current day services (Marlborough Hill and Wiseworks). Women make experience additional inequalities that may lead directly to an increased risk of poor mental health. These may include: A high demand placed on women by virtue of their multiple roles which may involve part time/full work as sole breadwinner or surviving on benefits; being a single parent; caring for elderly and disabled relatives. There is a potential positive impact of the proposals on women as the future design of services can better address their specific needs. **The detailed specification for the new services will address the under-representation of women and require providers to develop services that attract female service users and work with other providers of women's services, e.g. Yakeen (an Asian women's counselling service)**

### **2.7.2 Outcomes and priorities from the Consultation**

Feedback has identified the following areas that the reconfigured services need to address:

#### **Flexibility of service provision**

- a) Take into consideration the changing nature of wellbeing and recovery
- b) Be available for those who have day time commitments such as employment, education or family / caring responsibilities

#### **Peer Support and Service User Opportunities**

- a) Incorporate peer support and involve service users more in planning and delivering services;
- b) Listen to, and respect, the voices of their service users.

#### **Information**

- a) Have a central 'hub' of information available in person and on-line than can be accessed by all, including those with literacy difficulties
- b) Offer consistent, transparent and useful information for users and carers
- c) Ensure that people with mental ill health are able to access good quality information about all services available in the community for them to use

#### **Activities / opportunities at the Hub(s)**

- a) Provide a wide range of activities and opportunities based on the needs, expectations, interests and abilities of service users and focussed on achieving outcomes;
- b) Provide space for a wide range of groups and organisations e.g. Haayan, TOG etc.

#### **Barriers**

- a) Be accessible including meeting cultural need and be sensitive to the needs of those with caring and / or parental responsibilities;
- b) Be based within accessible locations;
- c) Take a role in reducing stigma and discrimination within local communities;
- d) Services that are joined up and not fragmented.

#### **Attitudes of staff**

- a) Listen to and respect the needs of people using services: including physical health care needs and the need for psychological interventions;
- b) Take into account individual circumstance, background and the social impact of distress;
- c) Be sensitive to the individual and fluctuations in their mental health;
- d) Identify need to train staff in recovery focussed working

#### **Outcomes**

- a) Have clear, measurable outcomes to improve lives (including using the outcomes developed with the steering group);



- b) Be accountable to commissioners, service users and other key bodies e.g. Healthwatch.

### **Role of the Community services and the hub(s)**

- a) Clearly define the Community Bridge Builder role and its fit with the pathway in Harrow, ensuring there is no duplication of roles;
- b) Ensure that the hub(s) and bridge building work closely together.

### **Family and Carer support and involvement**

- a) Consider the involvement of families and carers;
- b) Allow service users to determine who is their carer and how they should be involved.

These areas will be addressed in the detailed services specification to be developed in conjunction with the Steering Group after a Cabinet decision on the shape of future services.

There were a variety of questions raised about the Bridge Builders model. As a result of these and given the negative experience of some other boroughs implementing a service of the same name, it was decided to move to a broader description of community-based services in the final recommendations.

## **2.8 Implementation process**

Following a Cabinet decision about the future shape of services officers will take the next steps to manage the implementation of changes. This implementation will be a complex procedure given the number of organisations involved, the vulnerable nature of the service user group, and the legal and financial constraint upon making changes to roles and services.

This will include the following steps:

- Officers will inform providers, users, carers and stakeholder of the final decisions. Information and FAQs will be shared and relevant groups/services engaged to ensure support for people through any change.
- Providers will begin consultations with their existing staff. When the procurement/implementation strategy is finalised, current providers will prepare to transfer towards new arrangements. New provider arrangements will be created, e.g. tender / restructure.
- Any necessary client reviews will be undertaken. When providers are selected and ready to begin formal planning, their implementation plans will be signed off by the Council once satisfactory and the detailed process of establishing new services will begin.

Key milestones from the outline timetable are: -

- August 2012: Communications plan developed
- September 2012: Approach to securing future service provision developed (e.g. tender, provide or negotiate). Transitional

support model for current service users agreed with current providers and users.

- January 2013: Secure the arrangements for new provision; complete revised implementation plan
- April 2013: Go live with new model
- June 2013: Complete all individual transfers of support and end project

Throughout the implementation process, the Steering Group and existing users of services affected will be involved in the detailed development of new arrangements and the successful transition in to them.

These steps necessarily take time. It is not expected that the full financial savings will be achieved until 2013/14, but the implementation plans will set out where partial delivery of savings will be achieved as the new model is created through 2012/13. The Council and CNWL are working together to maintain a balanced budget in 2012/13.

As a result of the Harrow and Wealdstone Area Action Plan, officers will consider alternatives to the Bridge site should it no longer be made available for mental health services in the medium to long term. These considerations will involve service users and carer's in their development and agreement. Should there be any changes it would be essential that there is a seamless transition, in which services do not cease to operate until alternative premises are ready for use.

We will be seeking to make links with Corporate and external projects where there are mutual benefits, particularly around employment, in order to maximise impact.

### **3. Implications of the Recommendation**

#### **3.1 Financial Implications**

##### **3.1.1 Capital**

All the buildings would require some capital expenditure.

Wiseworks requires around £130k to replace windows and remove asbestos. This is on the Capital Programme, but would need a business case completing to draw down funding. The land to the side will continue to require some investment if it is developed into a productive garden, though this should be recouped from subsequent trading income. Minor improvements inside the building would be sufficient to continue the building's operation in the short to medium term.

The Bridge requires internal and decorative change to make it less institutional, but this needs limited capital outlay. Reinstating the Café (Aztec) would require some capital investment. This has not been costed yet and should be recouped in due course from income of trading activity.

Marlborough Hill would need a lift to upper floors if it was to be made accessible for people with mobility issues. It would also require

reconfiguration of the internal layout of the building, with full redecoration and re-equipping of upper floors. The installation of a lift is thought to be technically very difficult and not economically viable given the alternative of Wiseworks or the Bridge.

As a result of the decision not to continue to use Marlborough Hill as a mental health day service the council would be in a position to make alternative use of or dispose of the building.

The Bridge is a necessary part of the proposed service model, as this is the only currently available building with the accessibility required for people with severe mental and physical ill health. However in the coming years it is likely to be necessary to identify an alternative site as the Bridge site is central to the Harrow and Wealdstone Area Action Plan. The alternative site would need to be fit for purpose, fully accessible and have sufficient space for the range of activities required.

### 3.1.2 Revenue - Financial model

The current budget for all services is around £1.05m, with some of that coming from trading income.

For FACS eligible clients, funding will be allocated through personal budgets on the basis of individual need.

The Council has agreed a MTFs saving with CNWL. Within this was an assumed £250,000 saving from this review. CNWL achieved this saving across their services without completing this project in 2011/12 from one-offs (e.g. holding vacant posts). Further saving requirements and substantial cost pressures mean that it is still necessary to achieve this amount in a sustainable way. All of the options achieve the saving on an ongoing basis. All of the options achieve a saving reducing the budget to around £800,000.

The financial profile of the 4 options is shown in the table below: -

Service element	Annual Cost
Hub cost	£260,000
Additional building costs	£16,000
Personal Budget funding to the Bridge	£155,000
Personal Budget funding to Wiseworks	£191,000
Personal Budget funding to community services	£178,000
Total	£800,000

The personal budget funding split across the building-based and community services is based on an assumption that the current allocation of resources via personal budgets continues with the new model. The Bridge and Wiseworks clients have mostly transferred to personal budgets already, giving

assurance of the continued, sustainable demand for building-based services under a personalised model.

It is therefore imperative that services are operated as efficiently as possible with the maximum trading income and diversification into external funding.

An aspect of this review relates to rental of Council buildings. Currently, rent has only been payable on Marlborough Hill, however there has been a suggestion that following the review market rents should be charged on The Bridge and Wiseworks. The impact of moving to market rents on the voluntary sector and the Council needs further consideration as it would impact on our ability to deliver the savings identified.

### **3.1.3. Implementation costs**

There will be some costs caused by implementing the recommendations of this review. These will include officer time, costs of further engagement activities to involve service users and carers in developing details of the model, and potential procurement costs.

If the Council were to create a local authority trading company or similar arms length vehicle for the delivery of Wiseworks as a trading enterprise, there would be set-up costs associated with this.

### **3.1.4 Staffing Implications**

This review has been a developing piece of work through the initial analysis and consultation. We have been aware of potential redundancy risks during this period. There are currently 19.1 full time equivalent staff employed across the three day services. Of these, 8.8 work for CNWL in The Bridge, 5.8 are Council staff working in Wiseworks and 4.5 work for Family Action in Marlborough Hill.

Identification of the detail in the new service model is a pre-requisite to a clear understanding of this risk, so the financial impact cannot yet be firmly quantified. Should services be tendered, restructured or merged, TUPE may apply in various combinations. Each organisation would seek to redeploy staff in order to prevent redundancies, reducing the financial impact of change. However, there may be some costs, estimated at up to £100,000, which the Council may need to meet as a one-off. Options for meeting these costs, when identified, will need to be considered including the potential to fund the costs from existing redundancy provisions.

The Council is aware of this risk and once a decision on the service model is taken, the full detail of these implications will be identified. Officers will work with organisations to mitigate costs arising from changes and would seek to reduce redundancies where possible.

## **3.2 Legal implications**

The statutory framework is set out in the body of the report.

In determining service provision, local authorities are obliged to consider their overarching statutory duties, including equality duties which are set out above.

When deciding to change the way a service is provided, the Council must take account of all relevant material, including financial resources, consultation responses and potential equality impact in order to reach a decision. This report presents a number of options and a recommended option. However, this does not preclude Cabinet from determining that another option is the most appropriate way forward. In an extreme case, if Cabinet felt that the severity of the impact of the proposed options on particular groups of individuals was such that none of the options are appropriate and that additional resources are required to fund these services, then it should refer the matter up to full Council with a recommendation that further spending resources be allocated to the Directorate (either from Council reserves or from other budgets).

The Council has carried out a consultation process to seek the views of stakeholders and users of the services. Summary details of the consultation responses have been set out in the main report and Appendix 2 and copies of all consultation responses are available as background information. Case law has confirmed that when determining whether to change service provision, the Council must be receptive to reasonable arguments against the proposals. However this does not simply involve a head count of those for and against the proposals. The Council must take all views into account, as well as other relevant information. Even if the respondents to consultation have strong views against the proposals, Cabinet may decide to introduce the proposals if justified for proper policy and operational reasons.

### **3.3. Performance Issues**

#### **National Measures**

1C (old NI 130) – The percentage of social care users receiving self directed support – will be positively affected by the roll out of personal budgets in mental health services, of which the current day services represents the largest number of users. Mental health services are expected to contribute to the council's 100% target of eligible service users with a personal budget by April 13, which will be managed through the implementation process and facilitation through development of Shop4Support in the sector.

1F (old NI 150) - Adults receiving secondary mental health services in employment – should be substantially improved by the recommendations. In 2011/12 CNWL achieved 10.5% against a local target of 12%. The target for 2012/13 is 11%. Current performance is significantly above the London average of 6.6%, but with service changes we can expect local performance to improve further by focusing on meaningful work and enterprise, especially if a trading entity is established.

1H (old NI 149) - Adults receiving secondary mental health services in settled accommodation (2012/13 target 88%) will have a less direct impact. This measures independent living in the community and can be positively affected by quality day services. We will ensure the housing status of users of day services is tracked in future and qualitative evaluation of the impacts between the two are included in the evaluation of services, in which users and carers will have a role.

The services currently operate with a high level of satisfaction from users. All are regularly monitored by CNWL through the Section 75 agreement with the Council. Local results from the national survey of clients and carers include mental health services. These are reported annually.

In implementing these recommendations we will build upon current arrangements to develop a quality assurance model based on the borough's MJ magazine's award short-listed 'QAQ' model and will utilise the insight of partners, users, carers and Council officers to track delivery.

Performance targets will be set for each service and they will be monitored as individual services and as a group. Individual clients will have their outcomes reviewed to ensure services are meeting individual needs. The impact of all the services will be tracked through the Council's robust performance monitoring arrangements for local and national indicators set out above.

### **3.4. Environmental Impact**

The environmental impacts arising from the recommended option are as follows: -

- Reducing the number of buildings in use reduces energy utilised in the delivery of these services.
- Retaining the Bridge's green space and opening up the Wiseworks green space for productive use may enhance biodiversity if well managed (Wiseworks currently being designed in conjunction with Harrow in Leaf and other experienced partners)
- Retaining Wiseworks recycling / upcycling work, e.g. repairing and reselling old tools, reduces waste and avoids landfill
- There are no significant transport implications from the recommendations

### **3.5. Risk Management Implications**

Risk included on Directorate risk register? No

Separate risk register in place? Yes

The key risks for the project are listed below with a rating of their impact and likelihood. Mitigating actions are in place for all and the risks are manageable: -

- People not choosing building based services with their personal budgets (high impact; medium likelihood)
- Distress and stress to clients and carers (high impact; medium likelihood)
- Non-delivery of outcomes (high impact; low likelihood)
- Implementation costs affecting the delivery of savings (high impact; medium likelihood)
- Public opposition to changes in services (medium impact; medium likelihood)

### 3.6. Equalities implications

The equality implications are set out in the main body of the report.

### 3.7 Corporate Priorities

This review relates to the following Corporate Priorities 2011/12:

- United and involved communities: a Council that listens and leads
- Supporting and protecting people who are most in need

The extensive consultation and engagement that has been done through the review of current services has sought to demonstrate a commitment to involving communities affected in the decisions about the future of services. The recommendations put forward here reflect the fact that the Council has listened to the voices in the community during the project, whilst recognising that neither is there consensus nor is it possible for everyone to be satisfied with the outcome.

The proposals for the modernisation of mental health day services include the provision of safe space(s) in the community. This was consistently identified by people currently using services as being vital for any new model. Many people with mental health needs require spaces where they can feel safe, supported and can interact with other people with similar lived experience as themselves.

The Council's vision for adult social care is:

*By working together with all stakeholders and within available resources, to ensure that adult residents of Harrow have the opportunity to achieve the best possible health and wellbeing, are able to have as much choice and control in their lives as they wish, are able to make an active contribution to the community, and are effectively safeguarded from abuse.*

## Section 4 - Statutory Officer Clearance

Name: Julie Alderson	<input checked="" type="checkbox"/>	Chief Financial Officer
Date: 9 July 2012		

Name: Sarah Wilson	<input checked="" type="checkbox"/>	on behalf of the Monitoring Officer
Date: 9 July 2012		

## Section 4 – Performance Officer Clearance

		on behalf of the
Name: David Harrington	X	Divisional Director
Date: 26 June 2012		Partnership, Development and Performance

## Section 5 – Environmental Impact Officer Clearance

Name: John Edwards	X	Divisional Director
Date: 15/06/2012		(Environmental Services)

## Section 6 - Contact Details and Background Papers

**Contact:** Thom Wilson, Head of Commissioning & Partnerships, 020 8736 6022.

**Background Papers:** National Policy, Harrow & Wealdstone Area Action Plan, Dept of Health Policy Document

**Call-In Waived by the  
Chairman of Overview  
and Scrutiny  
Committee**

**NOT APPLICABLE**

*[Call-in applies]*