

WIRRAL COUNCIL

CABINET

22 SEPTEMBER 2011

SUBJECT:	PROGRESS REPORT ON THE IMPLEMENTATION OF PERSONALISATION AND RECOMMENDATIONS FOR TRANSFORMING DAY SERVICES
WARD/S AFFECTED:	ALL
REPORT OF:	HOWARD COOPER, INTERIM DIRECTOR OF ADULT SOCIAL SERVICES
RESPONSIBLE PORTFOLIO HOLDER:	COUNCILLOR ANNE MCARDLE
KEY DECISION? <i>(Defined in paragraph 13.3 of Article 13 'Decision Making' in the Council's Constitution.)</i>	YES

1.0 EXECUTIVE SUMMARY

1.1 The purpose of this report is twofold:

- to inform members and seek approval to pilot a new approach to daytime provision for people with disabilities that will improve and indeed transform outcomes and access to training, education and employment for people
- to seek approval to consult with citizens on a variety of options on how to improve and transform day services and daytime provision across Wirral.

1.2 This report supports the Council's Corporate Priorities in that it seeks to improve existing services and that it places the views of Wirral residents, employers, Community and Voluntary groups at the heart of all we do, providing opportunities for people to improve their neighbourhoods, lives and those of their families, ensuring that no part of Wirral is ignored.

2.0 RECOMMENDATION/S

2.1 **Business Centre** - that members agree and approve the proposal to pilot a new approach to daytime provision for people with disabilities that will improve and indeed transform outcomes and access to training, education and employment for people.

- 2.2 **Transformation of Day Services** - that members approve officers to consult with citizens on how to improve and develop the scope of day services and daytime provision across Wirral in order to transform them.

3.0 **REASON/S FOR RECOMMENDATION/S**

- 3.1 The Business Centre will run in 'shadow' version to existing day services but will model and test new ways of working for 12 months. There will then be a period of evaluation to establish future viability of such models and a report presented to Cabinet in order to agree the future direction of this enterprise and any lessons learnt that may inform and impact on wider day service provision. By running the social enterprise network in 'shadow' form for a year, we can offer a safety net for the fledgling businesses to operate within a safe and protected environment. There would be a risk to sustainability if this support was not in place for at least a year.
- 3.2 There is a significant need to review building-based services and reconfigure services to meet individual (personalised) needs. The changing landscape across health and social care in terms of personalisation and the demand from people and their carers for increased choice and control, and their falling use of traditional provision via day centres. There are changing demands and expectations of people, carers and families in terms of what they require of modern social care and support services. These changing demands have led to a number of building-based services becoming less cost effective and unfit for purpose. We need to find a way to deliver and improve an effective, efficient in-house service that can remain competitive, in terms of quality and cost, with the developing external health and social care market.

4.0 **BACKGROUND AND KEY ISSUES**

- 4.1 The whole ethos of transformation and personalisation is to ensure that people have choice and control over their own lives. This is not a new or radical concept, but one which we all aspire to. We aim to ensure that people have just this type of choice and control with access to day services and daytime provision. Personalisation means starting with the individual as a *person with strengths and preferences* who may have a *network of support and resources*, which can include family and friends. The individual may have their own funding sources or be eligible for state funding.
- 4.2 Personalisation reinforces the idea *the individual is best placed to know what they need* and how those needs can be best met. It means that people can be responsible for themselves and can make their own decisions about what they require, but that they should also have information and support to enable them to do so.
- 4.3 In this way services should respond to the individual *instead of the person having to fit with the service*. This traditional service-led approach has in the past meant that people have not received the right support for their circumstances or been able to help shape the kind of help they need.
- 4.4 Personalisation is about giving people much more *choice and control* over their lives; this is encompassed by the principles and ethos of transformation.

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4.5 In order to ensure that Wirral Council is able to meet the requirements its citizens will place on it in the future we need to radically change the way we offer services to people with disabilities. The offer needs to be more responsive and flexible and must give added value to their lives.

5.0 **Progress so far in personalisation other than in Daytime Services**

5.1 Since the beginning of the year the Department of Adult Social Services (DASS) has begun to implement a whole range of changes that have been transformational, not only in their approach but also in terms of the outcomes they have achieved for people who use services, their carers and families.

5.2 **Short Breaks (previously known as ‘respite’)**

5.2.1 Previously facilities for the provision of short breaks in the borough was disparate and poor in terms of the buildings used; they provided a very poor physical environment, although the care provided was deemed to be good by people accessing it.

5.2.2 Conversely the Council owned two establishments, Sylvandale and Girtrell Court, which were of better standard but were under-used. Investment has been made to make improvements; we continue to develop Short Break support with the term ‘respite’ being replaced with ‘Short Breaks’. Both establishments are proving to be extremely popular and are running at almost full capacity with a full diary of bookings.

5.2.3 Officers continue to work on a brochure to promote alternative provision for short breaks. This has been published on the Council’s website and is continually updated as new provision becomes available. People have now begun to choose a variety of alternative provision such as holidays, activity breaks and many more.

5.2.4 In addition to this provision we are exploring options for more Extracare Housing schemes for people with Learning Disabilities, some examples of excellence already exist such as Mobberly Court in Spital and Fellowship House in Hoylake.

5.3 **Supported Living Reprovision**

5.3.1 As part of the ongoing development and decision to cease being a provider of Supported Living services we have implemented a new approach in order to ensure complete involvement of people who use services, their carers and families. The personalisation of public services means that people who are eligible for funding and services from a local authority should be at the centre to design and have control over all decisions that are made. People who require care and support should be involved in designing services and solutions that both meet their needs and suit their own circumstances.

- 5.3.2 There is a number of people in receipt of services that provide supported living. The residents are now supported by independent providers to live in their own homes. The properties continue to be owned by registered social landlords. Previously Wirral provided the care and support required, however under the new arrangements, the residents themselves chose and commissioned the organisations who provide their care and support.
- 5.3.3 Wirral has been extremely successful in implementing the roll out of Personal Budgets. As a result, more people are making the choice to take control over their own care and support arrangements. There is a need to ensure that personal preferences, choice of service provision and development of the social care market continues and is able to increase its scope and flexibility in order to better meet people's expressed choices.
- 5.3.4 In order to ensure that this happens, we have worked with all the individuals and their carers to support them to select the new providers of care and support who will enable each individual to meet their personal outcomes. The procurement and selection process involved individuals who will use the services and their carers from the outset. They were an integral part of the selection panel and as such, on occasions where they felt the required quality standard had not been met to their satisfaction, the providers did not progress to the next stage of the process.
- 5.3.5 Furthermore, each individual has developed a personalised and bespoke support plan which explicitly shows what outcomes need to be achieved for each person and are clearly measurable. In addition to this there has been a group plan developed in order to ensure that all collaborative and shared services and resources were considered. From the outcomes of the individual plans, service specifications have been drawn up that clearly identify what care and support was required for each establishment; these have been developed by the individuals themselves to ensure that they are able to give very clear instructions to providers and establish clear service level agreements which will enable them to meet their outcomes, identified within the support plans.
- 5.3.6 This approach is groundbreaking and nationally there is no comparison. For the first time in Wirral people have been central in the co-production process in order to design, shape and develop services that they purchase. Many have found the involvement empowering and cathartic. Carers have felt valued, respected, listened to and have experienced a natural learning process.

5.4 Integration of Learning Disability Services

- 5.4.1 The Learning Disability Partnership Board (LDPB) agreed to move forward with a fully Integrated Learning Disability service between health and the council in November 2010. As a result of this decision a steering group has been established to progress the integration, and several meetings have already been held. Two full workshops have been held to progress issues, the last one being held on 27 July 2011. The steering group membership is made up of members of DASS, managers and practitioners, and Cheshire and Wirral Partnership Trust, members, practitioners and clinicians.

The aim is to be co-located by November 2011, and fully integrated with a set of standard operating procedures, frameworks, and performance measures by December 2011. Meetings are ongoing with other partners, including asset management colleagues, who are being co-opted as required to progress the project. A rapid improvement workshop has been agreed for early October 2011. A management structure is currently under discussion and is likely to mirror that currently in place for mental health services, which has proved to be very successful. The LDPB has also requested a single point of access/contact for the service, and several methods of delivering this are currently being explored within the steering group.

6. TRANSFORMING DAY SERVICES FOR THE FUTURE

6.1 There are three key Drivers for improvement

- There is a changing landscape across health and social care in terms of personalisation and the demand from people who use services and their carers. People want to have increased choice and control, with a wider range of alternative provision to meet their individual needs.
- There are changing demands and expectations from people who use services, carers and families in terms of what they require of modern social care and support services. These changing demands have led to a number of building-based services becoming less viable and unfit for purpose.
- The requirement to deliver and improve an effective, efficient in-house service that can remain competitive, in terms of quality and cost, with the developing external health and social care market.

6.2 Building on quality

6.2.1 Wirral Council currently has a number of excellent daytime opportunities for people that offer 'work like' placements but do not offer tangible or fully paid employment opportunities. Nor do these opportunities offer a career path or progression to further employment opportunities. These are:

- **Star Design (incorporating Handcart Ceramics)**
- **Best Bites (incorporating Everyone's Café)**
- **Masque Theatre**
- **Working Life**
- **Dale Farm**
- **Royden Park**

6.2.2 In addition, these services are fragmented across various locations and, whilst providing excellent support to the people that use them, quite often they suffer from some significant barriers to progress and further development.

- 6.2.3 This report requests agreement from Cabinet to pilot a new approach in relation to some key specific projects that offer daytime provision. This pilot will work with people of all disabilities to improve and transform outcomes as well as providing wider access to training, education and employment.
- 6.2.4 We will support the development of a social enterprise hub and explore the possibility of future business models for the hub in relation to becoming a social enterprise, a community interest company or a mutual. Further information on each different type of business model can be found at Appendix 1 of this report.
- 6.2.5 In order to produce a cohesive and mutually beneficial working environment, we will refurbish Riverside Day Centre and co-locate all these services together in a newly formed business setting.
- 6.2.6 The services will continue to operate under the governance of the council but will function as a 'quasi' business and will operate in 'shadow' form. Under the new arrangements the services will jointly come under an umbrella social enterprise network in order to realise cost efficiencies and avoid duplication and will share administrative functions such as HR, Payroll and Facilities Management.
- 6.2.7 Each business will have an individual business plan and brand identity but will form part of the wider network and will have the ability to sell its services to its partners as well as working closely with them to increase employment opportunities. They will have a clearly defined budget within which they will trade. This budget will initially be derived from their historic funding but will move to a model based on customer choice in Year 2. We will develop a scheme of delegation to local level.
- 6.2.8 This initiative will run in 'shadow' version to existing day services but will model and test new ways of working for 12 months. We will use this to explore the feasibility and development of the services operating fully as social enterprises. There will then be a period of evaluation to establish future viability of such models and a report presented in December 2012 to Cabinet in order to agree the future direction of this enterprise and any lessons learnt that may inform and impact on wider day service provision.
- 6.2.9 The Business Centre will not only be the base for all of the services previously listed but will also host and accommodate adult education services as well as a centre for health and social care advice, guidance and support. The centre will also provide a satellite base for other employment services such as Job Centre Plus, Invest Wirral and Connexions.
- 6.2.10 The project will be partly funded and supported by the Invest Wirral team who will provide business support and the services of a Project Manager in order to develop the legal structures and business planning. It will also provide management advice and support, financial forecasting, brand identity and marketing.

6.2.11 Based on current market intelligence, we believe there is considerable scope for growth and expansion in the majority of the micro enterprises and that this will enhance and increase the employment opportunities available. It is likely, therefore, that this area of provision will grow in years to come.

Proposed Model

Building on Quality – developing a Social Enterprise Network	
Current – Moving from:	Proposed - Moving to:
8 separate non building-based daytime provision	1 Social Enterprise Network incorporating 8 individual Business Units
Relocate 8 existing daytime provision services into one centre (Riverside) which be reconfigured and developed into a newly formed business setting called ' The Business Centre '.	
Implications for the proposed model	
Buildings – decommission buildings currently used by Star Design (Birkenhead), Handcart Ceramics (Liscard) and Masque Theatre (Birkenhead). The leases on these buildings would be ended	
Saving acquired through - Decommission buildings (as above), relocation of services to one site will see shared services (e.g. admin) and rationalisation of resources	
Budget implications – ongoing saving of £40,000¹ from April 2012 to be reinvested in 2011/12 of the project to support and develop infrastructures.	

7.0 DAY CENTRES AND OTHER DAYTIME PROVISION

- 7.1 This report further seeks to consult with citizens on how best to develop and improve the scope of opportunities available in order to improve and transform day services and daytime provision across Wirral.
- 7.2 In relation to the existing provision of day services and daytime provision, there has not been significant investment in either the services or the day centre buildings, which has resulted in a variance of provision across the borough ranging from some very poor accommodation in some areas to some excellent centres that are of high quality.
- 7.3 In addition the advent of personalisation has meant that people now have very different expectations about what they want day services to deliver and when. Traditionally, centres have opened on a consistent 9-5 basis; however, it is clear from local community leaders that there is potential for the buildings currently used as day centre provision to be utilised and maximised by communities at evenings and weekends and for them to become more of a community resource.

¹ This figure assumes approximate running costs including utilities and lease arrangements

- 7.4 There is and will continue to be a need for building-based provision. However, there is a significant need to review these services and reconfigure services to meet individual (personalised) needs. The changing landscape across health and social care in terms of personalisation and the demand from people and their carers for increased choice and control, and increasing need to provide a wide range of alternative services and options.
- 7.5 There are changing demands and expectations of people, carers and families in terms of what they require of modern social care and support services. These changing demands have led to a number of building based services becoming less cost effective and unfit for purpose.
- 7.6 We need to find a way to deliver and improve an effective, efficient in-house service that can remain competitive, in terms of quality and cost, with the developing external health and social care market.

7.7 **Current position**

- 7.7.1 Wirral's in-house day service provision is spread widely across the borough and comprises a variety of different services (see Appendix 2 for an illustration of the geographic distribution of day services across the borough).
- 7.7.2 The variety of services offered by the Council can be divided into centre or building-based services and non building-based services. Historically, centre-based services have specialised in providing services to people with a particular type of need:
- 7.7.3 Two day centres have historically provided services to adults with physical disabilities. These are:
- **Highcroft** (in Bebington)
 - **Cambridge Road** (in Wallasey)
- 7.7.4 Five day centres have historically provided services to adults with learning disabilities. With the exception of Riverside, all of these centres are equipped to provide services to people with profound and multiple disabilities. These are:
- **Riverside** (in Birkenhead)
 - **Moreton**
 - **Heswall**
 - **Eastham**
 - **Pensby Wood**
- 7.7.5 Three day centres provide services to adults with mental health needs:
- **Union Street** (in Wallasey)
 - **Beaconsfield** (in Tranmere)
 - **Prenton**

- 7.7.6 On average 1,058 adults currently access day services in Wirral; since some individuals attend more than one day service, there are 1,185 records of service provision. Of these, 989 “service provisions” are provided to over 800 adults with learning disabilities, physical disabilities and mental health needs. Over 80% of these services are provided directly by the Council, the remainder are provided by the independent sector.
- 7.7.7 On an average day, over 470 people will attend a local authority day service and in financial year 2010/11, the cost of the provision of in-house day services was £7,605,800.

7.8 Current costing, pricing and charging for Day Services

7.8.1 Before explaining the current costing practices of the Council and proposing how these can be modernised, it is necessary to define some of the terms of reference of this report. The terms *cost*, *price* and *charge* are often used interchangeably and there is some confusion about the distinction between them. Although the three terms are interrelated, for the purposes of this report they shall be used as follows:

- **Cost** is an indication of the amount of money spent on delivering a service. Determining cost is foremost a management accounts issue.
- **Price** is the amount of money that people are expected to pay out of their personal budgets in order to access that service.
- **Charge** is the amount of money that people are expected to contribute towards the price of a service, subject to the Council’s fair charging policy. Local authorities must comply with clause 3 section 17 the HASSASSA Act (1983) which states that if a person’s means are proven to be insufficient to pay for a service, “*the authority shall not require him to pay more for it than it appears to them that it is reasonably practicable for him to pay.*” (See Appendix 3)

7.8.2 This can be illustrated via a hypothetical scenario:

*A day service is deemed to **cost** the council £75 per person per day to run. The Council would like to encourage people to use this service and so the **price** is set at £50 per person per day.*

*The weekly **cost** to the Council of delivering this service is £375. The maximum **price** a service user will pay is £250.*

The Support Plan of Service User A identifies that he would benefit from receiving this service 5 days a week. Service User A undergoes a financial assessment which determines he has £30 disposable income a week. The council’s charging policy for non-residential services states a person should contribute 75% of their disposable income towards their services.

*Service user A is therefore **charged** £22.50 per week (or £4.50 a day) for the service. The council therefore currently subsidises the cost of the place from outside the personal budget £75 - £22.50 = £52.50 per week for Service User A to use the service. Although the example is hypothetical, these are typical figures.*

Since there is no relation between the budget of a day centre and the number of people using it, there is currently no incentive to increase usage by responding better to people's wishes. Also, since the degree of delegation to local management is very low, staff have little scope to improve the offer to their customers.

7.9 Current usage of Day Services

7.9.1 The need for change

- (i) It is certainly the case that some services will cost more than others. However, there may be people from different centres who are paying different amounts from their personal budgets for what could be viewed or interpreted as a similar service.
- (ii) Approximately one third of people are now in receipt of personal budgets and every new person entering the service will be allocated a personal budget. The advent of personal budgets means the issues of price and choice are more important than ever. As the Social Care Institute for Excellence (SCIE) 2009 report into day services states "*To achieve more personalised approaches money needs to be released from centre-based services and focused on individuals... money is not being released from the block funding of day services and transferred into purchasing budgets. It is a complex challenge that is not yet being faced.*" In future the budget to fund the service should closely follow the individual choices of people.
- (iii) The Council needs to respond to the challenge of personalisation by focussing its resources on individuals. The current unit cost favours the funding of the buildings since under the current model, if people leave the service, the centre does not lose money but rather, the remaining people would be liable to pay more. The most expensive day time services are those that are buildings-based, but this is not reflected in charges.
- (iv) Research indicates that the appetite for traditional day services is falling. The Improving Health and Lives 2010 report "People with Learning Disabilities" reports a -0.5% compound annual growth in the use of local authority provided day services by people with learning disabilities aged between 18-65 between the years 2005-9, and a 3.7% compound annual growth rate for those aged 65 and over. In Wirral there is currently no accurate way of measuring usage; one urgently needs to be established.
- (v) It is possible that current people are continuing to access local authority services as they get older, while younger people are increasingly opting for more innovative services. Supported by much anecdotal evidence, this perspective is shared by current managers of Wirral's in-house day services.

- (vi) Personalisation aims to enable people to meet their needs in the way that they deem best for themselves. Many people are still opting for in-house services despite receiving a personal budget and having the option to source services in the independent sector. Consequently, the Council prices day services in a way that responds to the personalisation agenda and treats each service user as an individual.
- (vii) The indicative budget available to each service user is proportionate to their level of need: people with a higher level of need are allocated greater resources than those with a lower level of need. The introduction of a costing and pricing system that reflects this arrangement is the next logical step. If such a system is not introduced, the service could face accusations of discrimination against people with a lower level of need, since they would effectively be subsidising the service of others from a budget allocation intended for their own needs.
- (viii) The need to address this issue is recognised within the department and in 2008, members of the department worked with Care Services Efficiency Delivery (CSED) to identify an alternative way of costing day services which would take account of the fact that some people needed more staff support than others.

7.10 National Guidance

7.10.1 Two national guidance documents have shaped this thinking. Putting People First: a shared vision and commitment to the transformation of adult social care(Department of Health: 2007) and the Think Local, Act Personal Partnership (TLAP) in 2010, both give clear guidance for organisations engaged in change and personalising services.

7.10.2 TLAP states that personalisation and community are the key building blocks of a reform agenda, shaped around an individual's own expertise and resources. When people need ongoing support, this should help them to retain or regain the benefits of community membership including living in their own homes, maintaining or gaining employment and making a positive contribution to the communities they live in. Experience has shown that most progress in implementing personalisation is made where:

- Local leadership focuses on cultural change, just as much as systems change, encouraging concentration on outcomes determined by people and communities and engaging solutions beyond the narrow definitions of social care.
- People have real control over the resources used to secure care and support, with commissioning strongly guided by their decisions.

7.11 Leading the change

7.11.1 In its local leadership role, the Council can influence and support the development of a wide range of local resources and opportunities, regardless of how they are paid for or who provides them. An effective community-based approach can be achieved when we work with partners to:

- Secure greater cooperation and better use of resources across public services to improve individuals' and their families experiences, including housing, leisure, culture, transport, health, welfare benefits, employment support, social care and community safety.
- Encourage and help local communities and groups to provide networks of support, to help people improve their health and well-being, and to reduce their need for more acute care and health services.
- Actively involve people, carers, families and communities in the design, development, delivery and review of innovative care and support arrangements to maximise choice and independence and utilise the widest range of resources.
- Facilitate a broad range of choice in the local care and support market, including housing options, and personalise the way in which care and support services are delivered wherever people live.
- Ensure that those people eligible for ongoing Council social care funding receive this via a personal budget (either as a direct payment or a managed account) allowing them to exercise the same amount of choice and control as those who pay for their own care and support.
- Ensure all people have the information and advice needed to make care and support decisions which work for them, regardless of who is paying for that care. This includes help to make the best use of their own resources to support their independence and reduce their need for long-term care.

7.11.2 As part of the consultation we will need to consider how we achieve the following:

- (i) **Provision of support planning and advisory services that make better use of user-led, independent and voluntary sector resources**, which can secure creative support arrangements, increase take-up of direct payments and reduce reliance on traditional services. We will consider partnership arrangements which might include arrangements with Centres for Independent Living, Carers' Centres and specialist and condition-specific organisations
- (ii) **The potential for self-directed support to deliver efficiencies in our business process**. For example, by focusing social work time on key functions and thus freeing up care management resource; and by enabling us to better understand costs at an individual level.

- (iii) **Encourage greater exploration of price and affordability in the market** by helping individuals to secure support more efficiently than through Councils (or the NHS) e.g. employing personal assistants or buying more creatively/selectively from the independent sector. A key component of success will be the ability to deliver wider transparency in costing and pricing.
- (iv) **Promote the delivery of a broader range of housing/accommodation** designed to offer more supportive living environments to people with care and support needs.
- (v) **Mobilising people's own resources, skills and assets to meet their care and support needs**, leaving public funding to cover those that cannot be met from such means.
- (vi) **Support prevention and avoid crisis admissions** to hospital and other high cost services by combining health and social care personal budgets, crisis support, equipment, adaptations, re-ablement and the better use of housing opportunities.
- (vii) **Support community capacity** so people make use of informal support from family, neighbours, volunteers, community enterprises and live-in support tenants.

7.12 Personal Budgets

7.12.1 Personal Budgets make a real difference to the people who use them and that all can benefit, experience has shown us that to achieve the win-win of choice and control and more effective delivery, we need to ensure:

- (i) **Personal budgets not taken as a direct payment are offered as a managed account**, but this arrangement must be authentic in affording people real choice and control. Simply telling someone how much the Council is contributing to the cost of their care, whilst providing some transparency, will not on its own achieve this.
- (ii) **Work with providers to demonstrate the difference** being made to someone's life. This can be done by putting in place independent processes to check that outcomes are achieved and publishing the results. As part of this, it will be important to include an understanding of the experience of Wirral people who self-fund their care and support.
- (iii) **Personal budget holders need reasonable discretion in use of their funds** (within the law). Personal outcomes should be agreed but focus is best placed on whether outcomes are met within an acceptable risk framework rather than the detail of support arrangements. Flexibility for people to change the use of budgets to meet agreed outcomes will maximise creativity and reduce transactional costs.

- (iv) **Help to plan, organise and secure support arrangements** should be available for all who need this but provided more often as a service from the community, as previously described. A range of person-centred approaches exists to help plan and deliver better outcomes for people who need support, which can have benefits for older people, staff and families, and also contribute to ending age discrimination as outlined in the Equality Act 2010.
- (v) **Carers should benefit** from our professional practice which should adopt a 'whole family' approach, contributions and circumstances into account alongside those of the person requiring support.
- (vi) **Self-directed support should be available wherever people live, including in residential and nursing homes.** Simple but powerful person-centred approaches to practice have been shown to work within such settings – without additional costs - helping people retain their dignity and stay connected to their families, friends and communities.
- (vii) **Younger disabled people can be enabled to use self-directed support during their transition years into adulthood.** Person centred approaches and personal budgets offer an opportunity for young people and their families to take more control and plan for the future, including finding a place to live, undertaking further education and seeking employment. Work is currently underway with Children and Young People's Department to establish a seamless transition from CYPD to adult services maintaining a personal budget.
- (viii) **Councils and providers can take an active role in promoting individuals' mental health as well as their physical well-being.** This means ensuring that people with mental health and / or mental capacity issues are able to make informed choices and have as much opportunity for personalisation, dignity and respect as other citizens.
- (ix) **Risk management and protection/safeguarding should be addressed in a balanced way** across all sections of the community, avoiding an approach that views people in receipt of social care funding as most at risk.

8.0 **RELEVANT RISKS**

- 8.1 In relation to the Business Centre, the first year of any business is a time of exploration and certain levels of uncertainty. As a business grows and develops there needs to be support and assistance provided. By running the social enterprise network in 'shadow' form for a year, we can offer a safety net for the fledgling businesses to operate within a safe and protected environment. There would be a risk to sustainability if this support was not in place for at least a year.

9.0 OTHER OPTIONS CONSIDERED

- 9.1 Making no change was considered as an option. For the work-like services this would limit their potential for growth to meeting the needs of people. It is therefore not recommended. For building based services, no change remains an option that will be considered as part of the consultation process. The consultation process will be designed to develop clear options that the Council can consider for specific proposals and decision-making.

10.0 CONSULTATION

- 10.1 We seek approval to undertake a series of communication and engagement events; the title for these is ***'Transformation of daytime provision, the conversation begins....'*** The purpose of this would be to develop wide-ranging understanding of the current use of day services and how the citizens of Wirral would like to see these developed and enhanced.
- 10.2 We will hold a series of events for people who use services, carers, the social care workforce and elected members. The format of the sessions will be as follows:
- 10.2.1 **People who use services and carers and families** - we will run sessions for people who use services and carers on the same days at the same venue wherever logistically possible, while the sessions will be held separately they will address the same themes. We will consult with all the relevant bodies and forums such as the Enabling, Fulfilling Lives Task Group, The Carers Development Association, Advisory Groups and Friends Associations of all day centres, The Older People's Parliament and other relevant groups and bodies.
- 10.2.2 **Strategic Partners, the Voluntary, Community and Faith Groups** - we will hold sessions for all partners. We will consult via a variety of existing forums and groups including the Learning Disability Partnership Board, Voluntary and Community Action Wirral, Community Groups across the borough and other relevant groups and bodies.
- 10.2.3 **Trade Unions and workforce** – we will consult the workforce and trade union representatives addressing the same themes and will explore the future implications for new ways of working and development of services. We will consult with a variety of trade union representatives, including workplace reps.
- 10.2.4 **Elected Members** – we will involve the Health & Wellbeing Overview and Scrutiny Committee members. Elected Members from all parties will be invited to attend any of the sessions outlined above and a members seminar will be organised to consult and inform members.
- 10.3 Following the consultation period of 12 weeks and further period of analysis of the information, a report will be presented to Cabinet for consideration and to establish options presented to decide if any should be eliminated and should be taken forward for further study.

11.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

11.1 See section 10.0

12.0 RESOURCE IMPLICATIONS: FINANCIAL; ASSETS; IT AND STAFFING;

12.1 Financial and Assets Implications

12.1.1 The financial and asset implications of the various options are:

Proposal	Financial Implications	Asset Implications
Business Centre	£40,000 revenue budget savings from Year 2	Decommission a number of buildings

12.2 IT and Staffing Implications

12.2.1 There are no specific IT issues identified at this stage. However, work will need to be undertaken with WITS in order to establish working protocols and procedures for the Business Centre to operate independently.

12.2.2 There are likely to be a significant number of human resource issues to consider for all of the options outlined in this report. It will only be possible to detail these once consultation has been completed and specific proposals are formulated.

13.0 LEGAL IMPLICATIONS

13.1 There are implications in relation to the legal structures of developing a social enterprise/community interest company. Legal advice will be sought as part of the ongoing consultation and the development of the Business Centre.

14.0 EQUALITIES IMPLICATIONS

14.1 Has the potential impact of your proposal(s) been reviewed with regard to equality?

(a) Yes and Equality Impact Assessment and Impact Review are attached.

15.0 CARBON REDUCTION IMPLICATIONS

15.1 **The Business Centre** - by relocating several services within one centre, we will be able to release existing buildings and assets, in addition we will be able to rationalise and combine facilities management. This will have a significant impact upon energy costs and facilitate considerable carbon reduction.

Transformation of Day Centres – subject to outcome of the consultation.

16.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

16.1 None applicable at this stage

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APPENDICES

Appendix 1: Glossary of terms in relation to business models

Appendix 2: Geographic distribution of day services across the borough.

Appendix 3: Section 17 of the Health and Social Services and Social Security Adjudications Act 1983

REFERENCE MATERIAL

(Include background information referred to or relied upon when drafting this report, together with details of where the information can be found. There is no need to refer to publicly available material: e.g. Acts of Parliament or Government guidance.)

SUBJECT HISTORY (last 3 years)

Council Meeting	Date

Glossary of terms in relation to business models

Social Enterprises

Social enterprises are businesses trading for social and environmental purposes. Many commercial businesses would consider themselves to have social objectives, but social enterprises are distinctive because their social and/or environmental purpose is absolutely central to what they do, their profits are reinvested to sustain and further their mission for positive change.

Social enterprises are also known by a variety of different names including co-operatives, social firms, development trusts, community owned enterprises, community interest companies and some are charities. All of these have different characteristics depending upon what they are trying to achieve but at the heart of them all is that they deliver social objectives and that they have trading activity.

Community Interest Companies (CICS)

Community Interest Companies (CICS) are limited companies, with special additional features, created for the use of people who want to conduct a business or other activity for community benefit, and not purely for private advantage. This is achieved by a “community interest test” and “asset lock”, which ensures that the CIC is established for community purposes and the assets and profits are dedicated to these purposes. Registration of a company as a CIC has to be approved by the Regulator who also has a continuing monitoring and enforcement role.

Mutuals

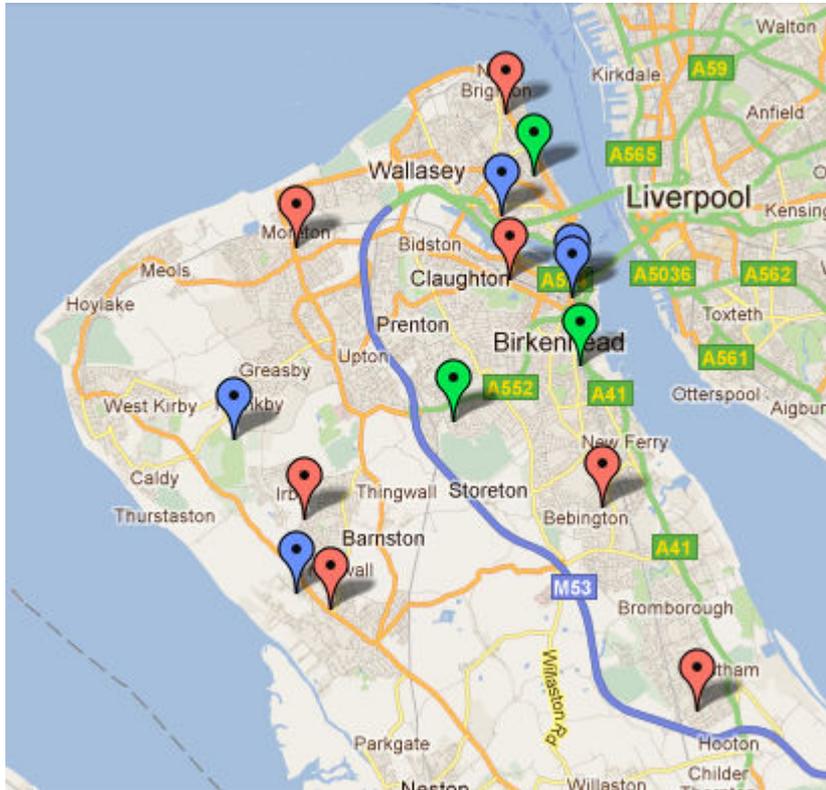
Mutuals are organisations that are owned by, and run for the benefit of, their current and future members. Mutual's can take many forms and operate in a wide range of business and social environments. Most people recognise mutuals through one or more of the long established building societies, co-operatives, friendly societies and mutual insurers. But the sector encompasses many many more types of organisations, some large and well established like housing associations, clubs and employee owned businesses to smaller, specialist bodies such as credit unions, football supporter trusts and community mutual's.

The Government is to introduce new 'Rights to Provide' across public services, where employers will be expected to accept suitable proposals from front-line staff who want to take over and run their services as mutual organisations.

Employee Ownership Association director Patrick Burns quoted:

“Giving public sector workers the right to take a meaningful ownership stake in the services they provide is a welcome opportunity to bring significant benefits to frontline staff and services users alike, from enhanced productivity to increased innovation”.

Geographic distribution of day services across the borough.



KEY:

Red place marks: Learning and physical disability day centres

Green place marks: Mental health day centres

Blue place marks: Supported employment

Section 17 of the Health and Social Services and Social Security Adjudications Act 1983

Charges for local authority services in England and Wales.E+W+S

- (1) Subject to subsection (3) below, an authority providing a service to which this section applies may recover such charge (if any) for it as they consider reasonable.
- (2) This section applies to services provided under the following enactments—
 - (a) Section 29 of the M14National Assistance Act 1948 (welfare arrangements for blind, deaf, dumb and crippled persons etc.);
 - (b) Section 45(1) of the M15Health Services and Public Health Act 1968 (welfare of old people);
 - (c)Schedule 8 to the M16National Health Service Act 1977 (care of mothers and young children, prevention of illness and care and aftercare and home help and laundry facilities);
 - (d) Section 8 of the M17Residential Homes Act 1980 (meals and recreation for old people); and
 - (e) Paragraph 1 of Part II of Schedule 9 to this Act

[F10 (f) section 2 of the Carers and Disabled Children Act 2000]

[F11other than the provision of services for which payment may be required under section 22 or 26 of the National Assistance Act 1948].
- (3) If a person—
 - (a)avails himself of a service to which this section applies, and
 - (b) satisfies the authority providing the service that his means are insufficient for it to be reasonably practicable for him to pay for the service the amount which he would otherwise be obliged to pay for it, the authority shall not require him to pay more for it than it appears to them that it is reasonably practicable for him to pay.
- (4) Any charge under this section may, without prejudice to any other method of recovery, be recovered summarily as a civil debt.