

## **CABINET**

**17 DECEMBER 2019**

### **COMMUNITY MENTAL HEALTH SUPPORT**

Portfolio Holder: Councillor David Brake, Portfolio Holder for Adults' Services

Report from: Ian Sutherland, Director of People – Children and Adults Services

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#### **Summary**

The Council's vision for Adult Social Care is to further develop strength based, personalised services for all people in need of social care services, including those with needs related to mental health.

This report considers options for people who use the Community Resource Centre at 147 Nelson Road.

#### **1. Budget and Policy Framework**

- 1.1 Medway's vision for Adult Social Care is to '*Support the people of Medway to live full, active lives, to live independently for as long as possible, and to play a full part in their local communities*'.
- 1.2 In response to the Care Act (2014), Medway Council is working to give people more choice and control over the support they receive from adult social care.
- 1.3 The Medway Adult Mental Health Strategy 2018-2023 has been developed drawing on these national priorities. This joint strategy sets out the vision for improving outcomes for people with mental health problems in Medway and sets out how the Medway Clinical Commissioning Group, Medway Council and other local partners will work together.
- 1.4 Reviewing the scope of the Council's in-house mental health community services provides opportunity to explore improved ways of working, while maintaining the Council's statutory duties to service users.

## 2. Background

2.1 Demographic data, set out in the Mental Health Strategy, evidences an increase in the number of people living in Medway with mental health problems. In 2017, 28,000 people in Medway, aged 18-64, had a common mental health disorder (CMD) such as depression, anxiety and obsessive-compulsive disorder. By 2018, this had risen by 15%, to 31,053.

## 3. The Community Resource Centre at 147 Nelson Road “147”

3.1 147 aims to deliver centre based support to adults who have social care needs in relation to their mental health. The team provide a structured programme of daytime group activities, in addition to some 1-1 outreach support.

3.2 The team aims to support service users in the recovery of their mental health through engaging them in opportunities to develop resilience and independence skills.

3.3 Activities include: Art and Glass therapy; a young person’s group; cooking classes; a Sunday social group and evening social events.

3.4 The annual budget for direct expenditure on the service is £235.3k.

3.5 The staff establishment comprises: 1fte Manager (Range 5); 0.16 tutor (Range 4) and 6fte Mental Health Wellbeing Project Workers (Range 3). There are currently 4 vacancies in the service.

3.6 The service operates 6 days per week including a number of evenings.

3.7 The Centre currently works with 53 people, 26% of whom have been attending since 2012.

3.8 As shown in Table 1, the majority of users attend for a small number of hours per week, to attend a specific group activity - 62% for 7 hours or less and 40% 4 hours or less.

Table 1 – numbers of hours attended

21 people	3-4 hours a week
12 people	6-7 hours a week
16 people	9-10 hours a week
4 People	12-15 hours a week

- 3.9 As can be seen from Table 2, attendance is evenly spread across all age ranges.

Table 2 – Age of users

Age Range	No of people
18-30	13
30-40	3
40-50	9
50-60	13
60 plus	15

- 3.10 7 of the people who attend live in residential care or supported living where the provider is funded to support them 24/7.
- 3.11 4 are supported by the Community Support Outreach Team (CSOT), which is another community mental health service provided by Medway Council and 2 are the responsibility of other local authorities.

#### **4. Advice and analysis**

- 4.1 147 runs on a traditional, activity basis, day centre model and provides support that is highly valued by the people who use it.
- 4.2 Analysis of social care records held on the Framework-I database, however, shows that for many, attendance is not essential to meet an assessed, Care Act eligible need; many attend without a formal assessment and the objective of attendance is not always recorded.
- 4.3 At 53, the number of people who attend is a very small proportion of Medway residents who experience mental health problems.
- 4.4 Almost 50% of service users attend for either the Art or Glass Work classes and others take part in social groups. If the centre closed, many of the users could be enabled to access alternative recreational activities, facilitated where necessary by 1-1 support, funded by a small Direct Payment. Further, it is envisaged that the Sunday group and other social activities could be re-located and run by group members and volunteers.
- 4.5 62% attend for 7 hours or less per week (40% for 4 hours or less) and 7 live in a 24-hour care setting where they can expect support during the day.
- 4.6 Although the aim of one-to-one, outreach work with individuals is not always recorded on Framework-I, 147 clearly provides essential support for a small number of users (approximately 11). It is, however envisaged that this support could be provided by the Community Support Outreach Team (CSOT) or by way of a personalised support package, were the centre to close.
- 4.7 If the centre were to close, many existing users could be supported to access mainstream adult education and other recreational activities (at no cost to

Adult Social Care), or have their needs met in a personalised way via a small support package or direct payment.

- 4.8 Without reviewing all existing users, it is difficult to state, with precision, how many would not require any alternative services, if the centre were to close. However, the table below assumes that half the existing users who attend for fewer than 10 hours per week would require 1-1 hours to replace their existing centre attendance. It assumes that all 4 of the users who attend for more 12 hours per week would require 1-1 hours. The cost of support hours ranges from £9.50 for a Direct Payment to £14 for a care agency. The figures in the table is an average of this range – £11.75.

#### Estimate of cost **future provision**

No of people	Average Hours	Average hourly cost	Weekly cost	Yearly cost
10	3.5	£11.75	411.25	21,385
6	6.5	£11.75	458.25	23,829
8	9.5	£11.75	893	46,436
4	13.5	£11.75	634.50	32,994
Total				<b>£124,644</b>

- 4.9 Using these assumptions, re-provision for those who would continue to need services in the event of 147 closing, would cost in the region of £124.6k.

## 5. Options

### 5.1 Option 1: **Do nothing**

- 5.1.1 147 is popular with users, however, it is accessed by relatively small numbers and is not meeting a statutory need for most. In addition, elements of the service can be seen to duplicate what is offered by CSOT, adult education and other mainstream leisure services. It is believed that if the centre closed, many existing users would no longer require social care services and others could have their needs met in more personalised ways.

### 5.2 Option 2: **Development of the service**

- 5.2.1 An amalgamation of 147 with CSOT and a broadening of the remit to include learning disability could achieve economies of scale and reduce the need to purchase external day care placements.

5.2.2 This user group, however, may not mix well in a day centre environment and this option is unlikely to work for people with moderate and severe learning disabilities. This would mitigate the potential savings.

5.2.3 This option is unlikely to achieve significant short-term savings, and would not result in a capital receipt.

### 5.3 Option 3: **Closure of the centre**

5.3.1 Closure would release the current budgeted direct expenditure cost of £235.3k per year. Set against this would be the ongoing cost of alternative provision of £124.6k and forecast one off redundancy costs of £42k (which could be met from the severance reserve). It would also free up the site, which has a capital value likely to be in excess of £100k. For information, in accordance with Chapter 3, Part 5 of the constitution disposals above £100k would be matter for Cabinet.

5.3.2 Any existing service users who require essential, ongoing support could receive this via CSOT or a personalised care package.

5.3.3 The building also hosts CAB advice sessions, Carers First support for people caring for family with mental health problems and runs Public Health initiatives including stop smoking and healthy way walking groups. If the service was to close consideration would need to be given to the impact on these services, which it is expected could be re-located.

5.3.4 It is also envisaged that the Sunday group and other social activities could be re-located and run by users and volunteers.

## 6. **Officer recommendation**

6.1 The recommendation is to consult with the public on the 3 options set out above.

## 7. **Consultation and next steps**

7.1 An initial Diversity Impact Assessment has been completed (Appendix 1). This will be revised and updated following consultation, taking into account views raised during the consultation.

7.2 A public consultation regarding the proposals would be required due to a general duty on local authorities to inform, consult and involve local people (s138 of the Local Government and Public Involvement in Health Act 2007) and in accordance with s149 of the Equality Act 2010 given that this proposed change is likely to impact upon members of the community with protected characteristics.

7.3 Legal Services advise that there is no clear statutory guidance with regard to the length of a public consultation process. While there is a general recommendation that 12 weeks should be provided for a consultation it can be less depending on the circumstances as long as adequate opportunity is

provided for service users and their relatives/carers to contribute. A consultation of 8 weeks is proposed.

- 7.4 It is proposed that the consultation process would include engagement with current service users and a public meeting where options would be outlined and questions would be answered. A consultation paper would also be distributed. 8 weeks would be allowed for interested parties to submit their feedback and counter proposals.
- 7.5 If decisions are made that would impact on the jobs of the staff who run the service at 147, a formal consultation would be required, with the affected staff. If this consultation process were required, it would commence with a meeting with the whole staff team to set out the proposals and answer questions. 30 days would then be allowed for staff to submit feedback and counter proposals.
- 7.6 A provisional timetable for consultation and decision making is set out below.
- **Cabinet**  
17 December 2019 – to seek approval to consult on options
  - **Public Consultation**  
2 January 2020 - 27 February 2020
  - **HASC O&S Committee**  
12 March 2020 – to consider the outcome of consultation and submit any comments to the Cabinet
  - **Cabinet**  
7 April 2020 – to present final recommendations for approval, taking account the outcome of consultation and comments from HASC O&S Committee

## 8. Risk management

Risk	Description	Action to avoid or mitigate risk	Risk Rating
Impact on individuals	Individual impact that the centre closing would have on each individual is not yet fully understood.	Review each existing user and support plan, as appropriate.	B2
Adverse publicity in relation to the proposals	Proposals to close the centre could result in adverse publicity.	Undertake effective consultation on proposals and ensure views are taken into account.	C2

## 9. Financial implications

- 9.1 If 147 were to close this would release the current budgeted direct expenditure cost of £235.3k per year. Set against this would be the ongoing

cost of alternative provision of £124.6k and forecast one off redundancy costs of £42k (which could be met from the severance reserve). It would also free up the site for disposal, which has a capital value likely to be in excess of £100k.

## **10. Legal implications**

- 10.1 The Local Authority has a duty to undertake a consultation with service users, members of staff and the wider community as set out in paragraph 7.2 above. Case law has further clarified that consultation with users and relatives before closure of a day centre is usually required (*R (on the application of) v Shropshire Council* [2014] EWCA Civ 404). The consultation must be at a time when proposals are still at a formative stage, must give sufficient reasons for any proposal to permit intelligent consideration and response, and must allow adequate time for consideration and response. While the general recommendation for the duration of a consultation is 12 weeks there are cases where the consultation period has been less depending on the circumstances.

## **11. Recommendations**

- 11.1 The Cabinet is asked to instruct the Director of People – Children and Adults Services to commence a period of consultation to examine the future use of 147 Nelson Road as set out in paragraph 6.1 and section 7 of the report.
- 11.2 The Cabinet is asked to agree that the outcome of consultation be reported to the Health and Adult Social Care Overview and Scrutiny Committee in March 2020 for consideration, and to the Cabinet in April 2020 for consideration and determination.

## **12. Suggested reasons for decisions**

- 12.1 The aim of the proposed process is to agree service improvements that will enable people who use 147 Nelson Road to access education, training and recreational opportunities whilst also receiving support tailored to their social care needs. Where appropriate, it will also seek to achieve service efficiencies.

## **Lead Officer Contact**

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## **Appendices**

Appendix 1 – Diversity Impact Assessment

## **Background papers**

None