Richard Burbidge

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30 June 2011

To: All Members of the Cabinet

Dear Member,

Cabinet - Thursday, 30th June, 2011

I attach a copy of the following paper which is being tabled with the consent of the Chair:

DECISION OF THE OVERVIEW AND SCRUTINY COMMITTEE ON 27
JUNE 2011 REGARDING MINUTE CAB.05 - RECOMMENDED BUDGET
SAVINGS DECISION - ADULT SERVICES PROPOSALS IN 2011 - OLDER
PERSONS' DROP IN CENTRES, JACKSONS LANE LUNCHEON CLUB
AND CYPRIOT ELDERLY AND DISABILITY PROJECT

Report of the Haringey Federation of Residents' Associations.

Yours sincerely,

Richard Burbidge Cabinet Committees Manager



CALL-IN - RECOMMENDED BUDGET SAVINGS DECISION - ADULT

SERVICES PROPOSALS IN 2011 - OLDER PERSONS' DROP-IN CENTRES,

JACKSONS LANE LUNCHEON CLUB AND CYPRIOT ELDERLY AND DISABILITY PROJECT

Report to Scrutiny Committee on 27.6.11

Author: Sue Hessel, Haringey Federation of Residents' Associations (Vulnerable Groups)

•	Woodside House Drop in centre	274 users
•	Abyssinia Court "	115 users
•	Willoughby "	101users
•	Irish Centre "	63 users
•	Jacksons Lane Luncheon Club	33 users
•	Cypriot Elderly and Disability project	60 users

(source p. 189 Equality Impact Assessment - part of Haringey Cabinet papers)

Introduction

A total of 716 elderly and disabled residents are set to lose their drop in centres as a result of today's decision. Although known as "drop in centres" they are in reality a lifeline. Many are brought by special transport for disabled people. These people are frail. Often users live alone and are heartbroken that they won't see their friends again in this familiar setting. Many users have been coming to these centres for years where they provide friendly activities and their only hot meal of the day. They provide a self-help group to which they feel they belong.

The decision made today needs to be viewed in the context of **financial recklessness** both because there are **further cuts proposed** which will make it less likely that service users will be able to receive care from alternative sources, and this week's national **Equality and Human Rights Commission Report** which raises concern about the care of the elderly received when long periods are spent alone at home.

1. Financial recklessness

Given that these proposals are made in the context of cost cutting I wish to address the financial recklessness of these proposals. My case study here is Abyssinia Court Drop in Centre because I am most familiar with this centre but parallels no doubt can be drawn with the other centres being considered today. Abyssinia Court costs Haringey Council £53,000 pa. It serves 115 frail lonely elderly and disabled residents of Haringey. There can be no doubt that many of the people coming here will end up requiring a plethora of services if they have no day centre to attend. They will be placed at risk of depression and isolation, they will feel uncared for, and be unable to look after themselves. This increases the risk of falls and illness - as a result they will end up in hospital beds or residential homes, at a far greater cost to the taxpayer than £53,000! This point was made over and again at the consultation meetings by a vast proportion of attendees.

Abyssinia Court is value for money. The accommodation of Abyssinia Court comprises a large sunny sitting room, dining room, kitchen, adapted toilets, and a spacious garden and patio, all conveniently situated within sheltered accommodation next to Stationers Park.

It is also very cheap for what it does. The council has the benefit of this accommodation rent free (a saving to the council of hundreds of pounds every week) as this is provided by the Hornsey Housing Trust - which had the historical benefit of building sheltered accommodation on land which the

council sold when it was Stationers school. (I have attempted to obtain the covenant agreement over the last few months from Haringey Planning but they have repeatedly ignored my requests). The elderly users themselves raise considerable funds through raffles and bingo to pay to their activities. They pay for their lunch and any cups of tea or cakes. The only items Haringey Council has to pay for are two low salary packages for the wonderful dedicated ladies who run all of this!

2. Other proposals for cuts in Haringey

On 19 July there will be a cabinet vote on the closure of 5 residential homes (below) which will hurt over 150 of the most vulnerable people in Haringey

- Cranwood Residential Home for physically and mentally frail elderly (34 beds)
- Red House Residential Home for elderly with profound needs (35 beds);
- Broadwater Lodge Residential Home for elderly with dementia / mental health needs (45 beds)
- Whitehall Street Residential Home for profound learning disabilities (15 long term beds and four respite beds for 35 families)
- Alexandra Road Crisis Unit for mentally unwell adults (8 beds)

On 4 Oct - other day centre closures to be voted on including the

- Grange/ Haynes for dementia sufferers;
- 684 centre:
- Woodside for elderly

Without the drop in centres Haringey could potentially end up with nowhere for our elderly and disabled to go during the day (and increasingly overnight if a crisis occurs). The council cannot rely on charities, churches and other faith organisations taking over the welfare of at least 716 frail older people (with more and more coming through each year). Many volunteers are already working hard and doing what they can, often very quietly. There is no evidence that this sector has the capacity to organise and sustain the work of these centres without local authority funding.

3. The Equality and Human Rights Commission Report published on Monday 20.6.11

This week's EHRC national report revealed that the elderly are at risk if they are left alone at home subject only to "home care" for long periods, with the basic human rights of some older people receiving care at home being abused, with "worrying" instances of the elderly being left in soiled beds or clothing for long periods. It identified a number of significant problems, such as old people not being washed properly, not being given proper help with eating or drinking, and being left in bed for 17 hours in some cases. Staff turnover in the sector was "huge" with one woman said to have had 32 different carers over a two-week period. Some home care visits were just 15 minutes, forcing people to choose between having a cooked meal or a wash. Others were put to bed at 5pm and not helped to get up again until 10am the following morning. Other problems cited were lack of privacy and a reluctance to complain because many did not know how to, or were fearful of repercussions.

By closing these day and drop in centres the service users will be forced to stay at home for long periods. Councillors cannot presume that problems of loneliness and poor care might not occur.

Conclusion

The only way the council can guarantee that the work of these "drop in" centres will be carried out and sustained is by continuing to fund them. It cannot presume that voluntary organisations can or would do this work otherwise. These drop- in centres are essential lifelines and it would be both financially reckless and inhumane to cease funding them.