

Adult Social Services consultation

03 July 2015
to
01 October 2015

Analysis of the process and results

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PROCESS

Consultation principles

1) The consultation activity was undertaken in light of the following principles:

- We will communicate clearly about the purpose of the consultation, who is being consulted, the way we are consulting and when decisions will be taken on proposals.
- We will actively seek to engage communities affected by the proposal(s) and explain how the proposed changes might affect different people.
- We will provide enough information about consultation to help people make an informed contribution. We will include information about other issues and facts being considered by decision-makers alongside the consultation results.
- At the end of the consultation we will communicate what will happen next, when the results of the consultation will be published, when and by whom the decision(s) on the proposal(s) will be taken, and when the decision(s) will be published.

What we consulted on

The Adult Social Care consultation was divided into three overarching strategic proposals. Within each strategic proposal were a number of service proposals to deliver the strategic vision:

Proposal 1 - To increase the Council's capacity to provide re-ablement and intermediate care services.

- **Service Proposals**

- 1) The closure of Osborne Grove Nursing Home and changing the use of the premises to an intermediate care service OR to continue with the current provision at Osborne Grove, but to include a reablement care service and deliver the service through an external provider.
- 2) Closing the Haven Day Centre and changing the use of the premises to a community re-ablement centre delivered by an alternative provider.
- 3) Transferring the Re-ablement Service currently provided by Adult Social Services to an external provider.

Proposal 2- Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives schemes.

- **Service Proposals**

- 1) Closing Linden House as a residential home.
- 2) Expanding the existing Shared Lives service by transferring the service from Adult Social Care to a social enterprise model.

Proposal 3- Increase the flexibility and availability of day services within the borough.

- **Service Proposals**

- 1) Closure of Roundways, Birkbeck Road and Always day centres that provide day services for adults with learning disability.
- 2) Delivering a new model of day opportunities for adults with Learning Disabilities from Ermine Road Day Centre, through a social enterprise.
- 3) Close the Grange Day Centre and deliver dementia day services from the Haynes Day Centre through a social enterprise model.

How we consulted

- 1) The consultation was launched on the Haringey website: www.haringey.gov.uk/asc-consultation on 12:01am 03rd July 2015. The website gave the following details:

[What is going to change?](#)

[Why is change necessary?](#)

[About our proposals](#)

[How can I have my say?](#)

[Frequently Asked Questions](#)

[Easy Read](#)

[Equalities Impact Assessments](#)

- 2) On the first day of the consultation, letters were sent to potentially affected service users and their nominated family member/carer to inform them of the consultation and invite them as follows:

Focus Groups* - For nominated family members/carers of service users who potentially would be directly affected by the service proposals. The Focus Groups were facilitated by Independent Advocates and were aimed to give an overview of all proposals within the adult social care consultation and capture views to respond to the consultation.

Workshops* - For service users who potentially would be directly affected by the service proposals. The Workshops were facilitated by Independent Advocates and were aimed to give an overview of all proposals within the adult social care consultation, and focus specifically on the consultation questions that would affect the specific group in attendance.

* Feedback from the Focus Groups and Workshops were collated by the independent advocates LDX see Appendix 2 to the Cabinet Report 10 November 2015 Corporate Plan Priority 2 - **“Outcome of Consultation and decision on proposals relating to adult services”**.

Date	Invitees	Session	Times	Location
Thursday 16/07/2015	Nominated family member/carer of adults currently accessing: <ul style="list-style-type: none"> • Roundways Day Centre • Always Day Centre • Birkbeck Road Day Centre • Ermine Day Centre • Linden Road Residential Home 	Focus Group	11:00-13:00	Ermine Road Day Centre
		Focus Group	17:30-19:30	Ermine Road Day Centre
Monday 20/07/2015	Service Users of: <ul style="list-style-type: none"> • Ermine Road Day Centre 	Workshop	10:00-14:00	Ermine Road Day Centre
Wednesday 22/07/2015	Nominated family member/carer of adults residing at: <ul style="list-style-type: none"> • Osborne Grove Residential Home (OGNH) 	Focus Group	17:30-19:30	OGNH
Thursday 23/07/2015	Service Users of: <ul style="list-style-type: none"> • Birkbeck Road Day Centre 	Workshop	10:00-14:00	Birkbeck Road Day Centre
Friday 24/07/2015	Nominated family member/carer of adults currently accessing: <ul style="list-style-type: none"> • The Haynes Day Centre • The Grange Day Centre 	Focus Group	10:30-12:30	The Haynes Day Centre
Tuesday 28/07/2015	Service Users of: <ul style="list-style-type: none"> • OGNH 	Workshop	10:00-13:00	OGNH

Tuesday 28/07/2015	Service Users of: <ul style="list-style-type: none"> Linden Road Residential Home 	Workshop	15:30-17:30	Linden Road Residential Home
Wednesday 29/07/2015	Service Users of: <ul style="list-style-type: none"> Roundways Day Centre 	Workshop	13:30-15:30	Roundways Day Centre
	Nominated family member/carer of adults currently accessing: <ul style="list-style-type: none"> The Haven Day Centre 	Focus Group	17:30-19:30	The Haven Day Centre
Thursday 30/07/2015	Service Users of: <ul style="list-style-type: none"> The Haynes Day Centre 	Workshop	10:30-12:30	The Haynes Day Centre
	Service Users of: <ul style="list-style-type: none"> The Grange Day Centre 		14:00-16:00	The Grange Day Centre
Friday 31/07/2015	Service Users of: <ul style="list-style-type: none"> The Haven Day 	Workshop	10:00-12:00	The Haven Day Centre
Monday 10/08/2015	Service Users of: <ul style="list-style-type: none"> Birkbeck Day Centre 	Workshop	10:00-14:00	Birkbeck Day Centre
Wednesday 12/08/2015	Service Users of: <ul style="list-style-type: none"> Ermine Day Centre 	Workshop	10:00-14:00	Ermine Road Day Centre
Friday 14/08/2015	Service Users of: <ul style="list-style-type: none"> OGNH Linden Road Residential Home 	Workshop	10:00-13:00	OGNH
			15:30-17:30	Linden Road Residential Home
Monday 17/08/2015	Service Users of: <ul style="list-style-type: none"> The Haynes Day Centre 	Workshop	10:30-12:30	The Haynes Day Centre

	<ul style="list-style-type: none"> The Grange Day Centre 		14:00-16:00	The Grange Day Centre
Friday 21/08/2015	Service Users of: <ul style="list-style-type: none"> The Haven Day Centre Roundway Day Centre 	Workshop	10:00-12:00 13:30-15:30	Haven Day Centre Roundway Day Centre

- 3) Additional workshops were held for current and past users of the Haringey re-ablement service, to focus on the proposal to transfer the internal re-ablement service to an external provider. As the service is provided to individuals for a maximum of 6 weeks, invitees to the workshop were past as well as current service users of the service.

Date & Time	Number of invitees	Number of attendees	Location
Tue 18 Aug 2015 10:00-12:00	125 current and past users of the reablement service	3 attendees	Winkfield Day Centre (N22)
Tue 17 Sept 2015 10:00-12:00	161 current and past users of the reablement service	0 attendees	Osborne Grove (N4)

- 4) Workshops were held with staff of the potentially affected services, to gather their professional responses to the overarching strategic and service proposals within the consultation.

Date & Time	Staff group	Number of attendees	Location
<u>19 Aug 2015</u>			
11:00-12:00	OGNH	7	OGNH
1:30-2:30	The Haven Day Centre	8	The Haven Day Centre
4:00-5:00	OGNH	17	OGNH
<u>20 Aug 2015</u>			
9:00-10:00	The Haynes Day Centre	7	The Haynes Day Centre
<u>25 Aug 2015</u>			
9:00-10:00	The Grange Day Centre	8	The Grange Day Centre
<u>14 Sep 2015</u>			
9:00-10:00	Ermine Road Day Centre	22	Ermine Road Day Centre
10:00-11:00	Ermine Road Day Centre	19	Ermine Road Day Centre
2:00-3:30	Shared Lives & Linden Road Residential Home	3 & 7	Linden Road Residential Home
<u>15 Sep 2015</u>			
9:00-10:00	Roundways Day Centre	19	Roundways Day Centre

2:30-3:30	Re-ablement Team	18	Cypriot Centre (N22)
<u>21 Sep 2015</u>			
1:30-2:30	Birkbeck Road Day Centre	7	Birkbeck Road Day Centre

- 5) **A3 and A4 posters** were placed in prominent areas of all affected day services and residential homes. (See page 92 and 93).
- 6) The consultation was publicised to the wider Haringey audience through the following mediums:
- a) **All Haringey Council Libraries (9 total)** were issued with:
 - i) 1 A4 poster
 - ii) 1 A3 poster (see page 93)
 - b) **All Haringey GP services (49 total)** were issued with:
 - i) 10 A5 posters (see page 93)
 - c) **Notification in Haringey People magazine**
 - i) **August – September issue** (see page 95)
 - d) **Notification on Social Media**
 - i) Twitter 26 August 2015
- 7) The consultation was publicised to our partners through the following mediums:
- a) **Board/Group meetings:**
 - i) Autism Working Group 22/078/2015
 - ii) Safeguarding Adults Board 13/08/2015
 - iii) CCG Wider Leadership team meeting 17/08/2015
 - iv) Learning Disability Partnership Board 19/08/2015
 - v) Provider Forum 11/09/2015
 - vi) Adults Partnership Board 09/09/2015
 - b) Email notification to a representative(s) from:
 - i) Clinical Commissioning Group
 - ii) Adult Partnership Board
 - iii) Safeguarding Adults Board

- iv) Learning Disability Partnership Board
- v) Haringey Autism Partnership Board
- vi) HAVCO
- vii) Healthwatch
- viii) NHS Trusts
- ix) Job Centre Plus
- x) Homes for Haringey
- xi) All previous requests to be kept informed via email (following the MTFS consultation)

Consultation Packs

Each of the 3 consultation packs contained an:

Executive Summary: Outlining the Council's commitment to residents.

The need for changes: Explaining the need for change and the vision for the future.

Proposals: Detailing the background to the Strategic and Service Proposals, explaining specific terms and highlighting the benefit and possible impact of the proposals.

Questions: Requesting the respondents 'tick a box' indicating the level of their agreement/disagreement with the proposal:

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

And then give further details to explain the reason for their view.

Opportunity to give feedback to the strategic proposal: a free text box to allow people to have their say.

What happens after the consultation: Detailing the Cabinet date where the decision on the proposals will be made.

Equal Opportunities Monitoring Form: Gathering information to ensure our statutory compliance with the Equality Act and monitor differing views/impacts of the proposals on respondents based on any of the protected characteristics.

Translation page: Notifying readers that the information is available in other languages/formats upon request.

900 consultation documents were produced in standard format (300 of each consultation booklet). These were posted/handed delivered to:

- 1) Service users who were receiving services in one or more of the potentially affected day services/residential homes;
- 2) Past and current service users of the re-ablement service;
- 3) The nominated carer/family member of groups 1 and 2;
- 4) All Shared Lives households;
- 5) Focus Group attendees;
- 6) Potentially affected Residential Homes and Day Centres; and
- 7) Sent out on request.

For Copies of the consultation packs see pages 44-91.

Responses to the consultation

Respondents were invited to respond to the consultation

1) Online

Completing the questionnaire at www.haringey.gov.uk/asc-consultation

2) E-mail

Downloading and completing the consultation document(s), scanning/emailling it to Priority2enquires@haringey.gov.uk

3) By Post

Posting to:
Transformation Team
Haringey Council
River Park House
225 High Road
Wood Green
London N22 8HQ

4) Hand Delivered (this option was detailed on the website only)

Hand delivered to:

Wood Green Customer Service Centre Ground Floor 48 Station Road Wood Green N22 7TY	South Tottenham Customer Service Centre Apex House 820 Seven Sisters Road Tottenham N15 5PQ
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Accessibility

Language and Text

The consultation was available online in English.

Portable Document Format (PDF) copies of the document were available online in English.

Printed copies of the document were available in English.

All printed and PDF versions of the document advised of the languages that we would be able to translate the document into upon request.

We received no request for the document in any other language.

One request for the document to be available in 'large print' was requested. This was resourced and sent to the requestor.

One request for the document to be available in 'plain English' was requested. This request referred to – "Use of large print; at least point 14 for the main text and point 16 for the titles and allow plenty of spacing, typeface Century Gothic. Avoid block capitals, italics or underlining. Highlight important points with bolding". This request was made by email, 17 days before the consultation closed. To ensure the requestor had adequate time to respond, hard copies of the consultation documents in large print were posted to the requestor and an email was sent advising the requestor on how to change the font of their personal computer to allow the consultation to be completed on-line. The requestor advised that the hard copies of the document was received after the consultation had closed.

Easy Read

Key areas of each consultation document including three questions which directly related to Learning Disabilities were made available in 'Easy Read' format and circulated to all service users attending one of the specialist Learning Disability Day Centres and residential homes. This document was also available on the Haringey website/consultation page.

Independent Advocates

Learning Disability Experience (LDX) facilitated the workshops and focus groups for service users and families/carers of the potentially affected day services and residential homes. LDX is a well-established organisation providing holistic Information, Advice & Advocacy, outcome-based opportunities for children, young people and adults with all disabilities. In addition to facilitating the Workshops/Focus Group sessions; service users and their families/carers were invited to 'have their say' directly to the advocates should they wish via;

Telephone

Email

In person at an agreed location

All responses to LDX were collated as part of the independent report.

Consultation responses overview

Our consultation was widely published and aimed to reach:

- All service users of the following:
 - Always Day Centre
 - Birkbeck Road Day Centre
 - Ermine Road Day Centre
 - Grange Day Centre
 - Haynes Day Centre
 - Linden Road Residential
 - Osborne Grove Nursing Home
 - The Haven Day Centre
 - The Roundway Day Centre

- Families and carers of adults who use the above facilities
- All Haringey residents

Workshops and Focus Groups were well attended, although feedback received during the workshops indicated that some stakeholders felt that they had already had their say on the proposals during the consultation on the MTFS & Corporate Plan.

Communication was received from service users, families/carers, providers, specialist groups/forums and advocates on behalf of others, directly to the Transformation Team, to officers of the council and similarly to cabinet members and members of Parliament. Such correspondence 1) raised questions regarding the consultation process, 2) raised concerns regarding the proposals 3) responded to the proposals. Questions relating to point 1 and 2 were addressed as far as possible as they arose. Matters relating to point 3 were considered as part of the consultation process.

Number of workshops	14
Number of Focus Groups	5
Number of staff workshops	11
Strategic <u>Proposal 1</u> : To increase the council's capacity to deliver re-ablement and intermediate care services	118 questionnaires completed Online as well as postal
Strategic Proposal 2: Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives Scheme	37 questionnaires completed Online as well as postal
Strategic Proposal 3: Increase the flexibility and availability of day services within the borough	230 questionnaires completed Online as well as postal
Number of supporting letters/emails	46 Number of individuals/groups NB- some of individuals/groups corresponded more than once as part of the engagement process we have not counted repeat engagement for the purpose of this report.

Caveats and assumptions

1. While every attempt has been made to classify all information contained within the correspondence received for reporting purposes, there are responses that may not have been within the report due to illegibility and hand-writing issues.
2. It is recognised that a number of forms may have been completed on behalf of service users by families, carers, advocates or service providers.

For the purpose of this report, the responses to each question requesting the respondents **'tick the box' indicating the level** of their agreement/disagreement with the proposal, has been considered in light of their stated reason for their view, to understand the potential positive/negative impact of the proposal and in light of the latter to consider any appropriate mitigation actions that could be taken.

FEEDBACK

Feedback summary – Proposal 1

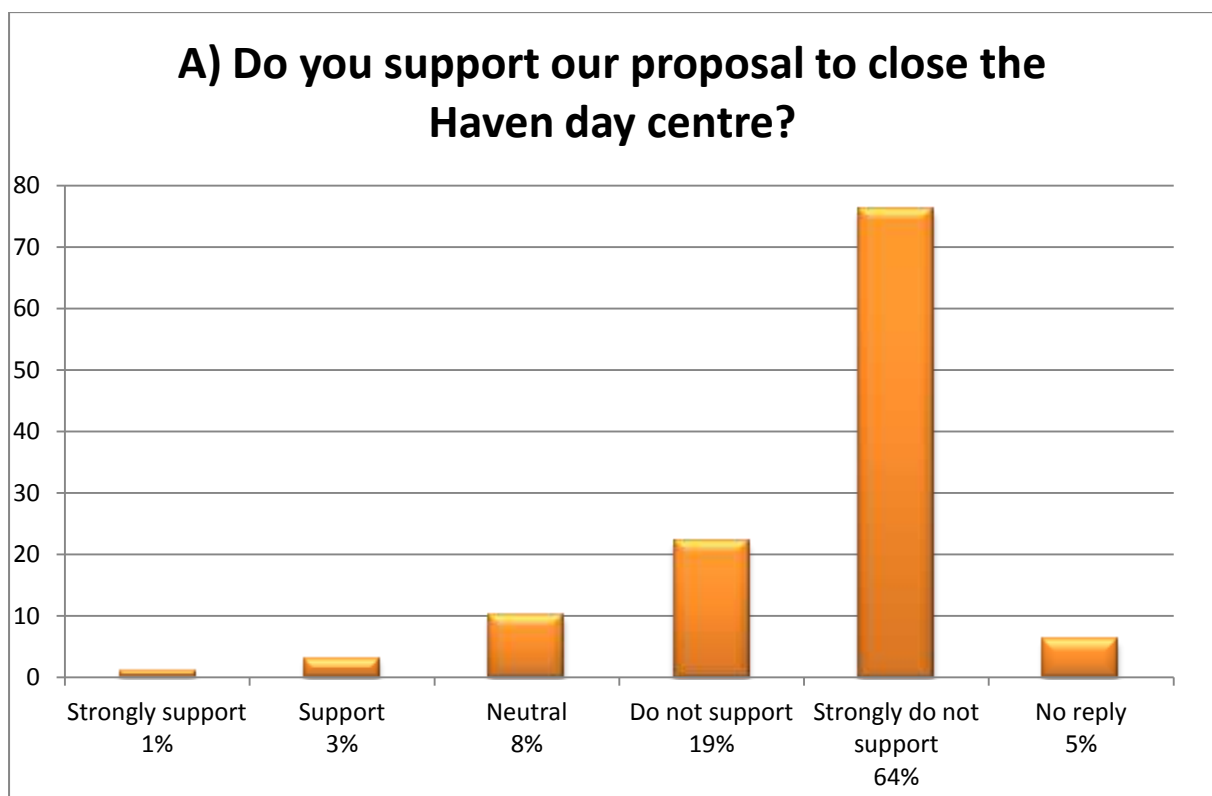
Proposal 1: To increase the council's capacity to deliver re-ablement and intermediate care services

Question A

Do you support our proposal to close the Haven day centre?

118 responses on completed questionnaires:

Strongly support	Support	Neutral	Do support not	Strongly do not support	No reply
1	3	10	22	76	6
1%	3%	8%	19%	64%	5%



Responses to the consultation referred to the benefits of the service including the provision of a safe and familiar environment. There were three recurring themes in the responses opposing the proposal to close the Haven Day Centre:

- 1) The high quality of service staff currently provided at the Haven Day Centre
- 2) The respite provision provided by the Haven and the lack of knowledge of any alternative provision
- 3) The risk reduction of isolation and deteriorating mental health –the centre provides the service users with opportunities to make friends and feel a sense of purpose.

A sample of the responses are detailed below:

Staff/Quality of Services	Respite for families/carers	Reduces isolation and deteriorating mental health.
<p>“There are not many services available in Haringey of this nature. You will be withdrawing a valuable service which many people rely on.”</p>	<p>“I know that there will be residents of Haringey and their close families who regard this as a lifeline. These people’s carers will crack under the additional pressure put on them to look after their loved ones with no respite. This will cause additional costs to the borough in terms of mental health and health issues and ultimately carers refusing to care for their loved ones.”</p>	<p>“I don’t support the closing of the haven day centre. Because some service user don’t have family are friend to visited them at home. S/user go to the day centre to play game and interact with the other s/ and don’t feeling isolated.”</p>
<p>“I am a user of the service and feel very sad about your proposal to close the Haven. We have built our trust and confidence in the staff and to begin again at my age will be very stressful.”</p>	<p>“many families need a predictable break from caring; home carers cannot be as reliable as a team of staff at a centre”</p>	<p>“Social contact and reliable, structured care are, for many, preferable to the isolation at home, with the uncertainty about when a care provider may call”</p>
<p>“This service is essential to meet the needs of vulnerable people”</p>	<p>“The Haven Centre is good for my sister to spend a day there. She has more confidence and has made a lot of friends. As I am over seventy it gives me a day to myself”</p>	<p>“My mother’s life has been enriched by attending the centre for the past three years. Before her placement there she was suffering from depression brought on by loneliness and anxiety. The staff have provided excellent care for my mother and she looks forward to attending the centre on Tuesdays & Wednesdays. My mother constantly retells stories of her days at “the club” & she now finds enjoyment in life. My mother has began to sew knit & practice other</p>

		handcrafts since attending the Haven all which keep her physically & mentally active.
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Letters/emails

Letters/emails received in response to the proposal to close the Haven Day centre referred to:

1)	The high quality of the service currently provided at the centre:	<i>"...beneficial and extraordinary difference the centre makes..."</i>
2)	The quality of the staff at the Haven Day Centre:	<i>"...wonderful staff who are so attentive to our needs" "the people who work there care about them"</i>
3)	The benefits of young volunteers who gain work experience at the centre:	<i>"a friendly and relaxed environment..."</i>
4)	Personal experience at the centre and the opportunities that the centre affords to older adults:	<i>"meet new people", "fun day of activities", "relax", "socialise".</i>
5)	The potential impact on families/carers:	<i>"...my family will no longer have 'their own lives' as they will have to attend to my needs..." "...One of the most threatening feature of the proposals is that, with drastically reduced places in day centres, parents and carers will be expected to make greater use of the family home to care for adult children, with the possibility of additional home care support as part of their new care packages; in effect a shift from daycare to home-based care placing a greater burden on already overstressed parents and carers."</i>

Staff feedback

Attendees at the staff workshop all 'strongly do not support' the proposal to close the Haven Day Centre.

Staff voiced their professional concern for the service users currently using the Haven Day Centre: *"life for older people will deteriorate"*.

Concern was noted around the lack of knowledge for alternative provision: *"The only elderly day centre left in Haringey."*

The years of experience amongst the staff working at the day centre was noted and the respite that the service brings to carers/families.

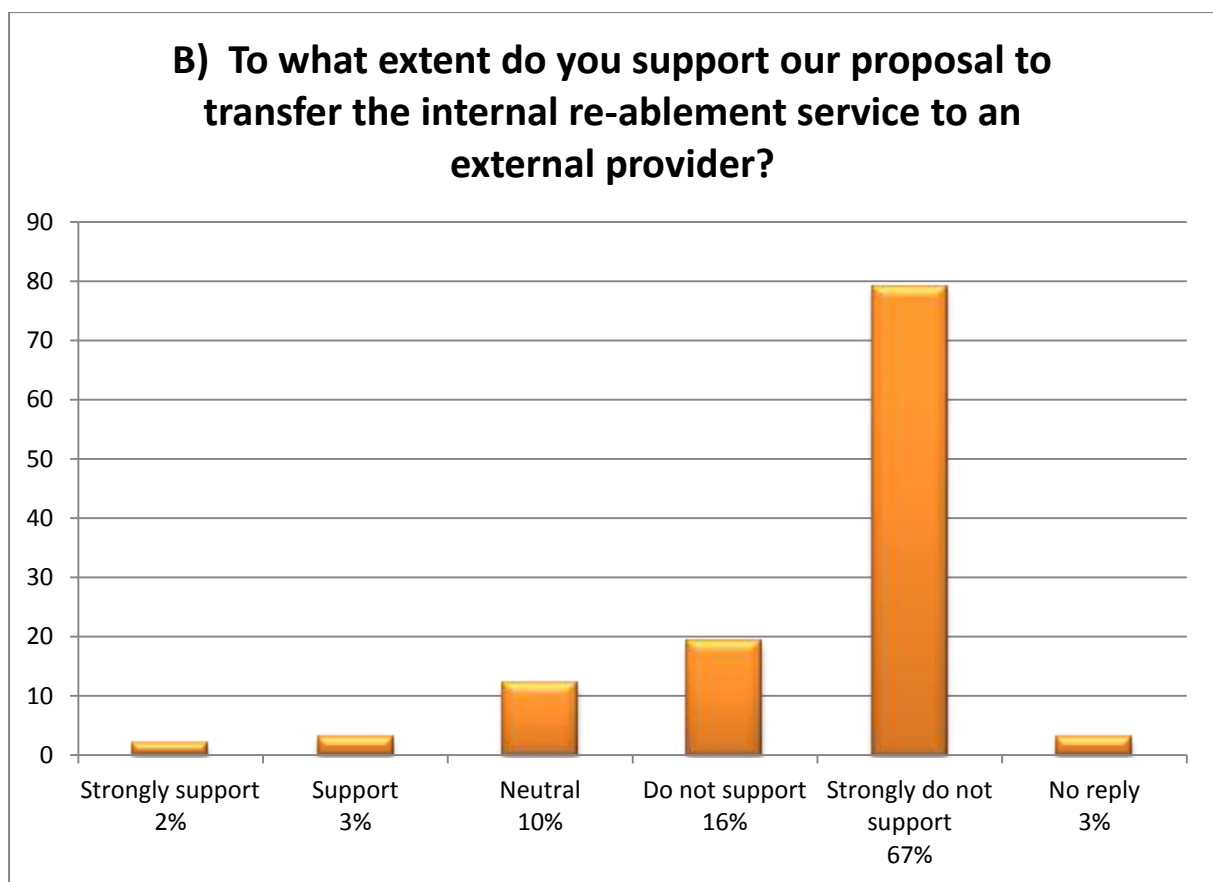
Suggestions were made to improve the service at the Haven Day Centre including the conversion of the Centre to a Older People’s Hub to expand the service provided.

Question B

To what extent do you support our proposal to transfer the internal re-ablement service to an external provider?

118 responses to Completed questionnaires:

Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
2	3	12	19	79	3
2%	3%	10%	16%	67%	3%



There were two reoccurring themes within the responses to the question of transferring the internal re-ablement service to an external provider:

- 1) The high quality of the existing service
- 2) Quality assurance for an alternative provider

A sample of responses are detailed below:

High quality of the existing service	Quality assurance for an alternative provider
The external provider's main objective is to make money. In-house Council staff are fully committed to supporting their clients. There is no comparison.	I oppose out-sourcing as we lose the expertise & trained staff. Contract arrangements cannot cover all aspects and line of responsibility is broken.
I'm working for Haringey in the community for ten years. S/user are happy with the quality of care we provided in their own home. S/user complaint that they are not going to the agency. Some have bad experience some said they feel rush. S/user Said the council Reablement workers are patients and polite and they treated with respect and dignity.	In order to transfer to external provider you need robust monitoring - this does not happen.

<p>Do not support a financially motivated provider to deliver reablement as there is no financial incentive for packages of care to be reduced. In house is flexible to the needs of people to receive their full allocation of time and longer particularly at the early stages of the programme. In house reablement have very strong links with the reablement therapists and reablement assessors providing people in receipt of reablement a seamless programme. The skilled and experienced reablement staff who have been working in reablement for over 3.5 years and have developed the mind set of a reablement approach, not an easy task transferring from traditional care.</p>	<p>Less opportunity to monitor the quality of service provided and ensure appropriate standards are maintained.</p>
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Some responses to the question indicated possible support for the proposal if concerns regarding the quality of service provision from a new provider be assured:

<p>“I support if services will be better and monitored by Haringey council”</p>
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Letters/Emails

There was no correspondence received in this format, directly relating to the proposal to transfer the re-ablement service to an external provider.

Staff feedback

All staff in attendance at the staff meeting **'strongly opposed the proposal'** to transfer the re-ablement service to an external provider.

The main themes of the discussion highlighted

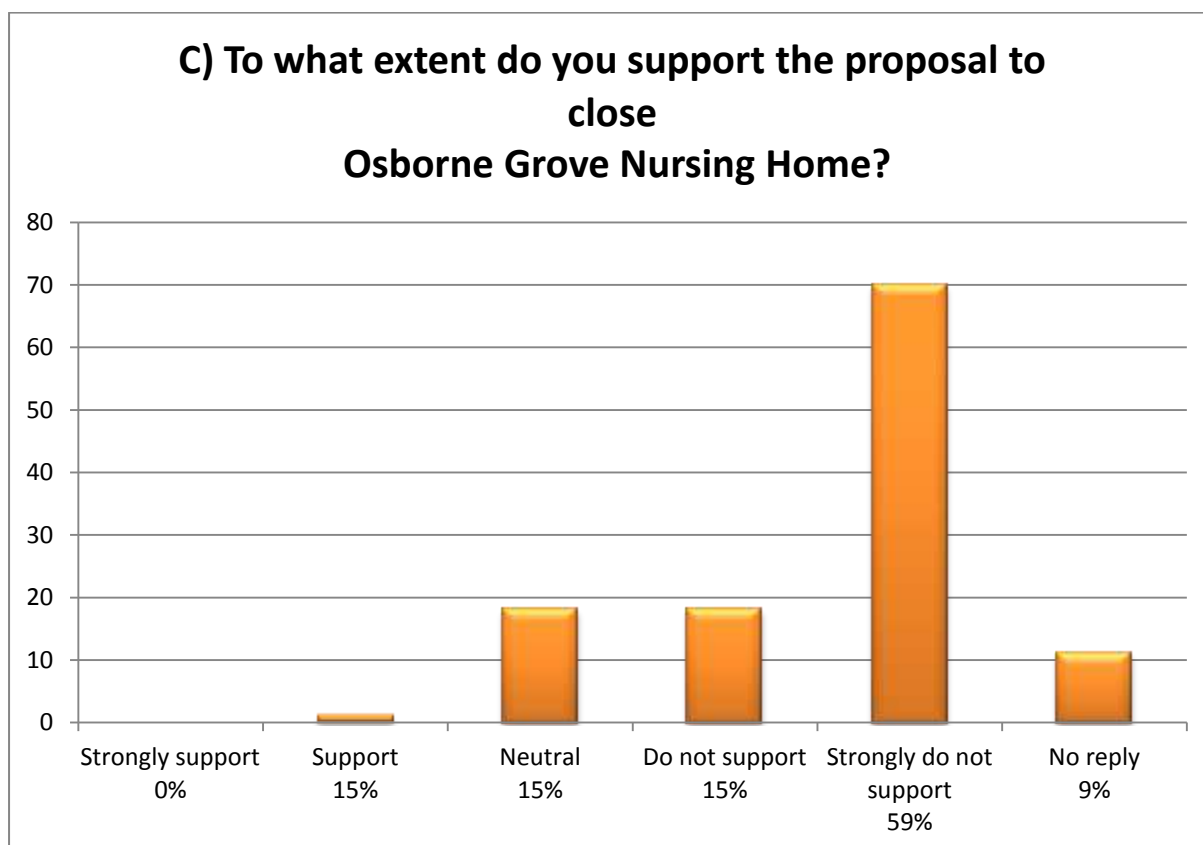
- 1) The teams concerns with agency staff in completing the work that they do:
 - **'Permanent staff often have to show the agency staff what to do'**
 - **'Due to zero hour contracts, it's like pay as you go, so carers rush and do not look after the service users properly'**
 - **'They are not monitored by managers'**
- 2) The high quality of the existing service:
 - **"We provide good quality services"**
 - **"We deal with feedback immediately even when negative"**

Question C

To what extent do you support the proposal to close Osborne Grove Nursing Home?

118 responses to Completed questionnaires:

Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
-	1	18	18	70	11
-	1%	15%	15%	59%	9%



There were three overarching themes from the proposal to close Osborne Grove as a residential nursing home:

- 1) The high quality of the existing service
- 2) The possible impact on existing service users and carers
- 3) The reduction in residential nursing provision in the borough

A sample of responses are set out below:

Quality of the existing service	Impact on existing service users and carers	Alternative provision in the borough
“Osborne Grove is a nice and beautiful place, I actually work there, the service users	Increasingly the most vulnerable are forced to move many miles to new	Having researched local nursing home provision thoroughly before my sister’s

<p>are happy there and you can see that through their behaviour and body language. We ensure we are keeping up the hard work and I can assure you that it is not easy the Home is run 24H around the Clock."</p>	<p>facilities without any consideration to family members and friends. I very much doubt if those in charge of decision making would be happy to travel increasing distances to visit family members in care. It's scandalous.</p>	<p>admission I came to the conclusion that there is a significant lack of suitable nursing home places within the borough and its close environs. Closing Osborne Grove to long-term nursing home admissions would exacerbate this shortfall.</p>
<p>"This is a successful and well-regarded service that meets all of the CQC standards, unlike some private providers that the council uses. The closure of this service would mean that residential and nursing home provision in Haringey will be entirely in private hands. The problems caused by privatised care are well known – poor terms and conditions, high turnover of staff, poor quality care, lack of accountability and control and so on."</p>	<p>The users would be disorientated by any change to their routine. This would cause them a lot of distress.</p>	<p>There are already too few nursing home places available in Haringey. I don't think it is acceptable to place elderly frail people in poor health out of borough so that it is more difficult to maintain contact with family and friends, and the loss of Osborne Grove would mean even greater numbers of people who cannot be looked after in their own borough.</p>
<p>"In 2013 Osborne Grove received a positive report from the Care Quality Commission. Residents and their family members appear to be very satisfied with the care they receive at the home. If Osborne Grove is to close there needs to be a good quality alternative provision in place which is affordable and properly regulated. This is one of the areas where vulnerable people are often at risk due to poor quality care"</p>		<p>"As the population of older people within Haringey gets older we will need more homes like this one"</p>

Letters/emails

There was little correspondence received directly relating to this proposal and as such no themes identified. Correspondence from one source **stated “there are too few residential nursing homes to aid the transition from hospital to own home in Haringey... Do not close Osborne Grove Nursing Home’**.

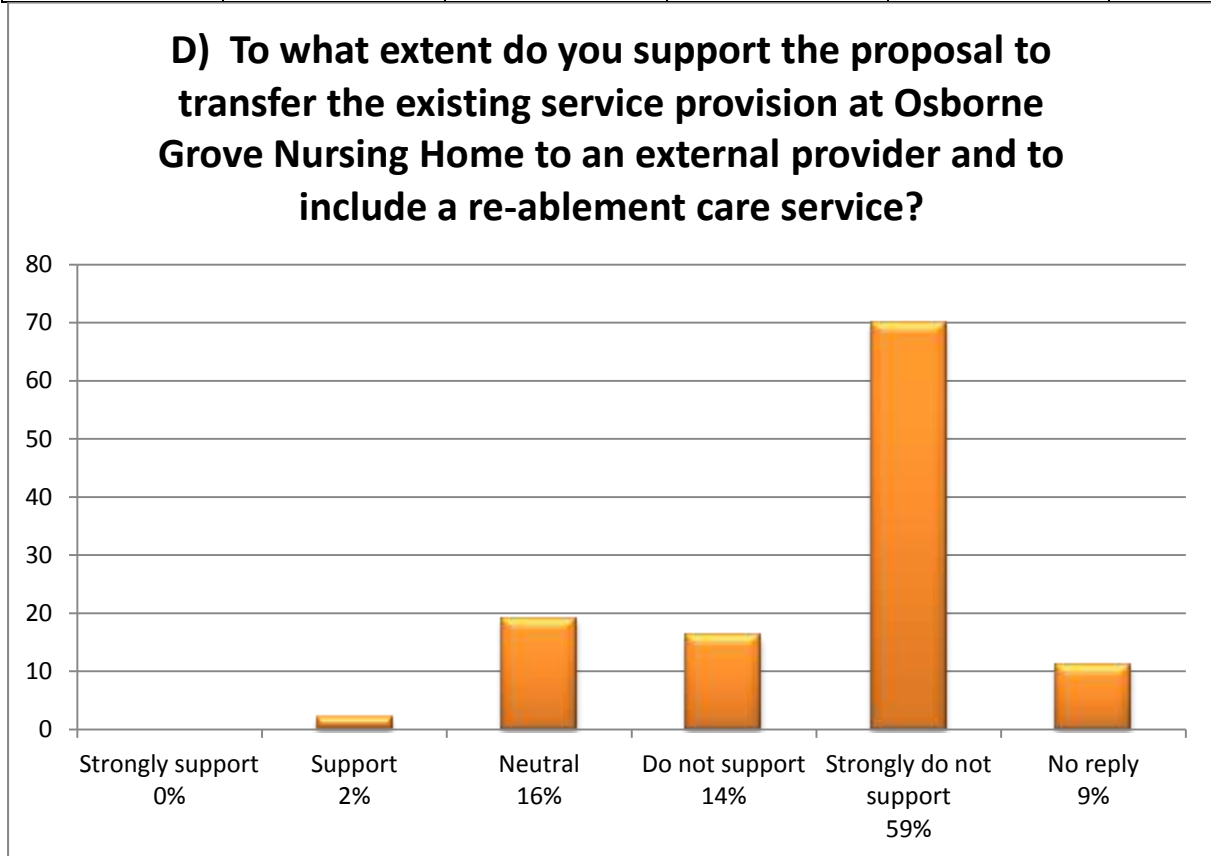
Staff feedback

Staff noted that both proposals for Osborne Grove Nursing Home involved the transfer of the service to an alternative provider. Discussion indicated that staff felt private companies were concerned with profits rather than the welfare of residents.

Question D:

To what extent do you support the proposal to transfer the existing service provision at Osborne Grove Nursing Home to an external provider and to include a re-ablement care service.

Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
-	2	19	16	70	11
-	2%	16%	14%	59%	9%



The responses to this proposal were overwhelming against the proposal, however there were no reoccurring themes identified.

A sample of the responses:

- 1) Some responses indicated confusion around the proposal, supported by a requirement for further information to allow a more detailed appraisal of the options for the future use of Osborne Grove to be considered:

“We need more detailed proposals about any replacement services to include very detailed cost.”

“Poor consultation exercise without any real details of what you are actually proposing. Such a disappointment.”

- 2) Concern was voiced over the use of external providers and the preference for council run services:

“Haringey should be a Council we are proud of, so we should focus our expenditure in promoting services in house and using the dedicated staff who are committed to Haringey residents rather than rely on the mercy of external providers who we will have less control over.”

“Do not use private providers. Review the social, emotional, intellectual needs and well-being of users and carers to provide high quality person-centred care and make caring profession developmental and properly paid. Do not use agency staff except for emergencies. Create a healthy happy and stimulating atmosphere in homes.”

“I am opposed to the Council's obsession with privatisation”

Letters/emails:

There were no letters or emails received directly relating to this proposal.

One response, suggested the future model for service delivery at OGNH could be established through a **“mutually owned social care agency, separately governed but initiated by the Council model ... [to manage] the continuity and projected mixed use of Osborne Grove”**.

Staff feedback:

Staff noted that both proposals for Osborne Grove Nursing Home involved the transfer of the service to an alternative provider. Discussion indicated that staff felt private companies were concerned with profits rather than the welfare of residents.

Feedback summary – Proposal 2

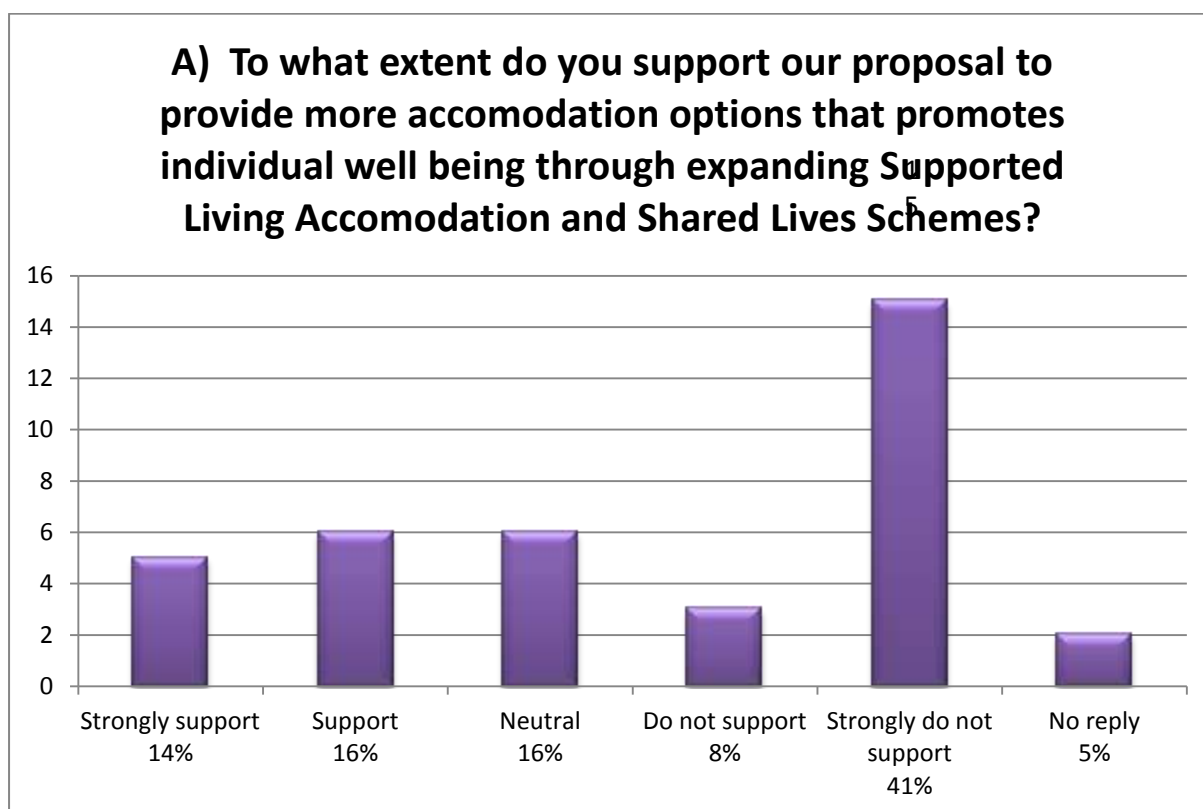
Proposal 2: Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives Schemes.

Question A:

To what extent do you support our proposal to provide more accommodation options that promotes individual well being through expanding Supported Living Accommodation and Shared Lives Schemes?

37 responses to Completed questionnaires

Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
5	6	6	3	15	2
14%	16%	16%	8%	41%	5%



Detailed responses were positive focusing on:

1) Increased opportunities for the service users	“Makes good use of space and resources in the Borough in a way that may increase service user quality of life. Use of the third sector also strongly encouraged if sufficient
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	funding is available.”
2) Support for independence	<p>“Every effort should be made to support people and enable them to live independently in their own home for as long as possible”</p> <p>“It is important for young people transitioning into adulthood to have the opportunity to increase their independence and learn the skills necessary for independent living, with appropriate support in place.”</p>

Letters/emails

There were no responses received in this format directly relating to this proposal.

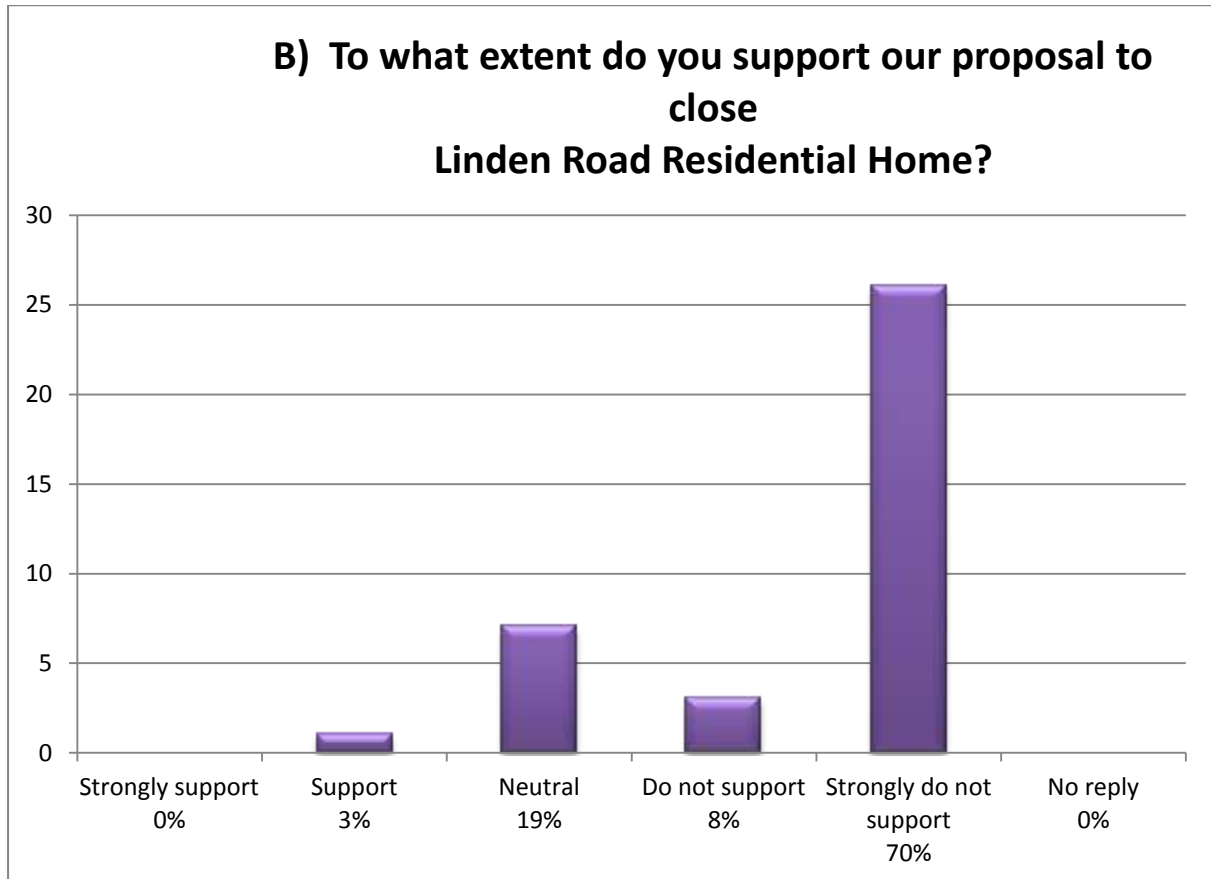
Staff feedback

There were no themes identified from the staff discussion regarding this proposal.

Question B:

To what extent do you support our proposal to close Linden Road Residential Home?
37 responses to Completed questionnaires

Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
-	1	7	3	26	-
-	3%	19%	8%	70%	-



Some respondents did not provide details as to why they did/did not support the proposal to close Linden Road Residential Home.

In opposition to the proposal it was noted:

One respondent rejected that residents could be more integrated with their local community:	“We feel that this proposal has seriously overlooked the complex needs of the Linden House residents. This drive to ‘include’ them in the community is exactly what the service users do not need because the community do not understand the needs of these service users.”
One respondent was concerned about the	“Along with the closure of Osborne Grove,

<p>quality of care provided by the private sector</p>	<p>this proposal will mean that there will be no council-run residential homes left in the borough - all provision will be from the private sector. The private sector has utterly failed to provide good quality residential care. The private sector exists to make a profit, not to provide care. Staff conditions are usually poor, with low pay and zero hours contracts. Care provided is often poor quality, due to the desire to cut costs and increase profits, and also as a direct result of low pay, not least the problem of high staff turnover. There is little democratic accountability and control. Around 15 years ago, the council transferred all of its residential homes to an external provider. This was a complete failure, with serious consequences for both staff and residents, and the service had to be brought back in-house. It is extremely disappointing to see that the lessons of this have not been learned, and that we have gradually seen the closure of all the council's residential provision, with the lives of vulnerable people being placed in the hands of those who are only interested in profit."</p>
<p>Two respondents considered there is a need of comparable provision within the borough:</p>	<p>"There is an ongoing need for residential homes for people with severe learning disabilities who cannot live in the community. Closing Linden will remove this much-needed resource."</p> <p>"There is a shortage of residential accommodation and you are making this situation worse by closing Linden Road Residential Home. A service user I key worked last year was moving from out of her residential home and needed to find another place to live. Due to the lack of available accommodation she was moved permanently into an NHS respite home - thus taking away a needed respite place."</p>

Positive responses to the proposal referred to the individual needs of the residents:

"If it will help residents to have more independence and their services delivery monitored by Haringey Council"

"Closing any service is a shame, but service user needs are often not best met by a residential service. As long as their welfare is prioritised above closing the centre quickly this is a necessary move."

Letters/emails

There were no responses received in this format directly relating to this proposal.

Staff feedback

All staff present 'strongly do not support' the proposal to close Linden House residential home.
There were two areas of concern detailed:

1) Potential impact on the three residents

It was noted that three residents have been residing at the home for 10 years and staff were concerned that the closure of the home may lead to an increase in challenging behaviour as they have severe learning difficulties and find it very difficult to settle.

2) Potential impact on the carers

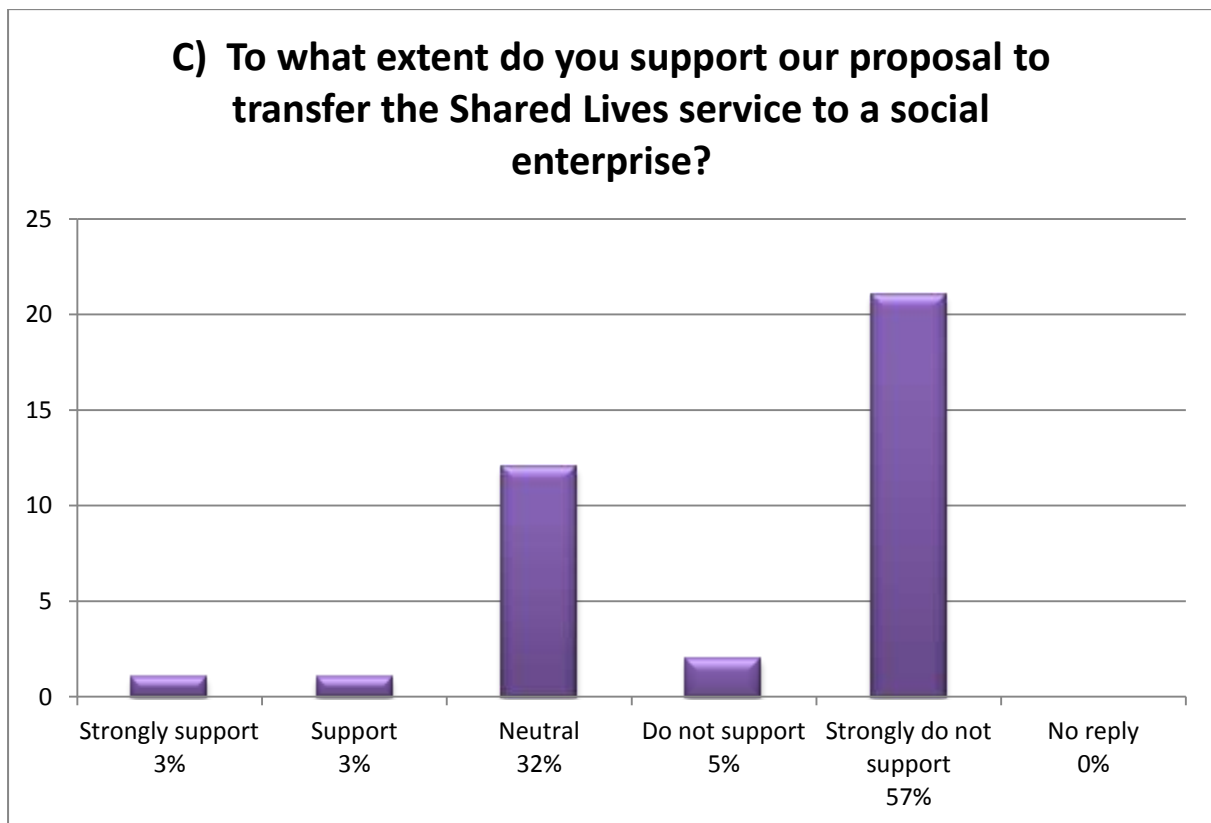
Concern was raised on the distance and travel issues that may arise for families/carers if the residents are moved to an alternative location. It was further noted the families/carers will need further information to support the new tenancy agreements should the residents be moved into supported living accommodation.

Question C:

To what extent do you support our proposal to transfer the Shared Lives service to a social enterprise?

37 responses to Completed questionnaires

Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
1	1	12	2	21	-
3%	3%	32%	5%	57%	-



Consultation document

Responses received were both for and against the proposal:

In support of the proposal it was noted:

“**Taps into** the dynamism of the third sector without making the service all about profit. Social enterprises can also better harness the resource & goodwill of local people.”

Against the proposal it was noted:

“While Shared Lives is within the council, it has access to all the support services that it requires - HR, IT, legal, and so on. Due to being part of a large organisation, it receives high

quality provision in these areas that are essentially free, or at least they do not have to be paid for to anything like the same extent as if they were being sourced from an external company. A social enterprise would have to meet all of these costs itself, using up resources that would otherwise be used for the provision of services, and leading to further pressure to cut costs.”

The service is better delivered in house to maintain quality trained staff, transparency and a clear path of responsibility. If money is saved quality will suffer.

Letters/Emails

There were no responses received in this format directly relating to this proposal.

Staff feedback

Staff feedback to the proposal was varied.

1 person – Did not know if they do or do not support the proposal

1 person – Requires more information before deciding on whether or not to support the proposal

1 person – Strongly support the proposal

Feedback summary – Proposal 3

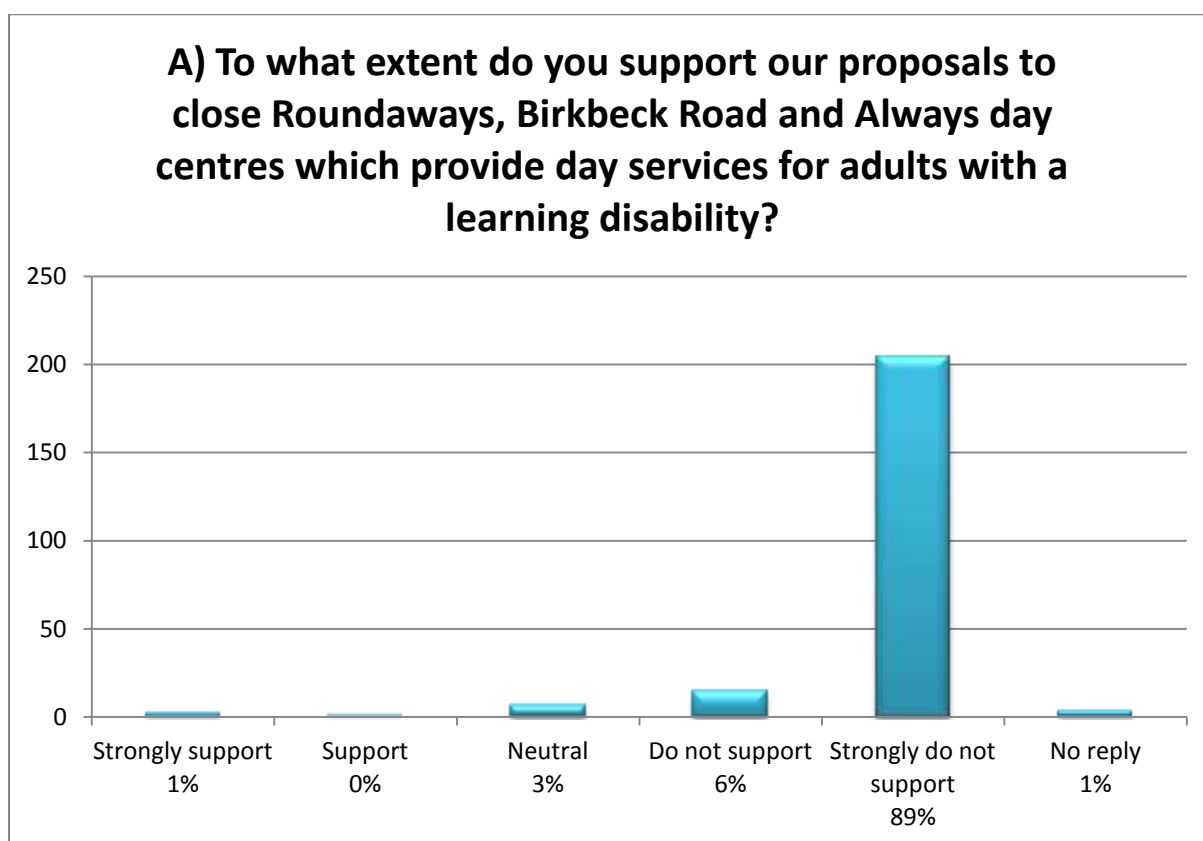
Proposal 3: Increase the flexibility and availability of day services within the borough

Question A

To what extent do you support our proposals to close Roundaways, Birkbeck Road and Always day centres which provide day services for adults with a learning disability?

230 responses on questionnaires

Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
2	1	6	14	204	3
1%	0%	3%	6%	89%	1%



There were a number of identical and/or simply adapted responses to this consultation question. The prominent themes from the responses indicated respondents were against the proposal due to:

- 1) The loss of high quality of services currently provided by the centres
- 2) Fear for service users safety and social interaction
- 3) The need for respite for family/carers

A sample of responses:

High quality of services currently provided by the centers	Safety and social interaction	Respite for family/carers
<p>The Proposal to close these centres is very cruel. Those who use them and their carers rely on going to them. They meet their friends and feel secure with familiar staff. Those who live in residential care benefit from the activities provided. The well trained Haringey staff can also monitor these vulnerable people by looking out for any changes - physical or mental.</p>	<p>Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.</p>	<p>Day centres not only provide a safe social space and facilitate staff professionalism and development, but also offer short term respite for carers. Such centres are a crucial part of overall care provision.</p>
<p>... I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes</p>	<p>I feel that it is the council's duty to provide a safe and supportive environment for people with complex needs - without day centres such as</p>	<p>... These people's carers will crack under the additional pressure put on them to look after their loved ones with no</p>

<p>autistic people months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.</p>	<p>the Roundway they are at risk of isolation, neglect and abuse, and put extreme pressure on the family and caregivers who are often elderly and in poor health themselves. People with autism and complex learning disabilities need and deserve expert care and support, and I feel very strongly that this should not be withdrawn by the council.</p>	<p>respite.</p>
<p>Services to support adults with learning disabilities are vital the ensure they live a fulfilled life and are given opportunities to learn and develop vital independent living skills which will promote self esteem and confidence</p>	<p>It is essential for people with learning difficulties to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. This will put a greater strain on relatives & helpers & probably cost far more.</p>	<p>these are essential community resources for services users that not only provide effective support for those with learning difficulties but also provide full time carers with essential breaks from their responsibilities. reduction in these services will have negative effects not only on service users, but also their carers. this will in turn impact negatively on local primary care.</p>

Letters/Emails

Some letters/emails focused on all three centres within the proposal, whilst other correspondence focused on one specific day centre within the proposal.

There was much concern regarding adults with autism. Some correspondence stated the strategy of reablement and enablement within social care was inappropriate for adults with autism and other learning disabilities. Similarly emphasized was the difficulties in changing established routines with adults autism and the need for ongoing care due to the lifelong nature of this disability.

There was focus on individuals receiving services at the day centres and concerns raised that they may become isolated if the centres were closed.

In opposition to the proposal one response noted:

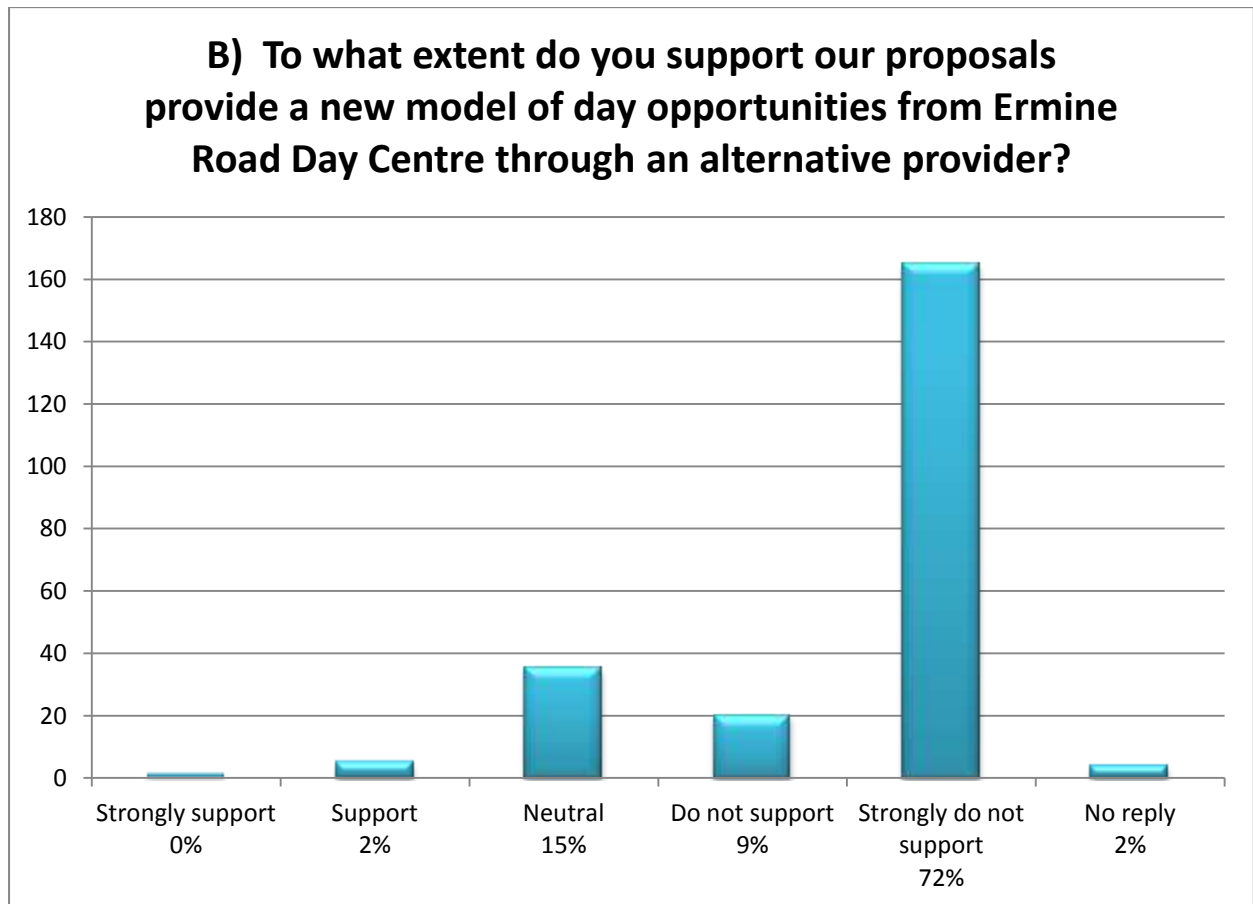
“Even if service users are reassessed and given personal budgets to access support, to our knowledge, there is no other appropriate, local, autism-specific service for individuals with this level of complex needs to spend their personal budgets on...Change poses huge difficulties for people with autism, learning disabilities and complex needs_ there is no safe alternative being proposed to replace the service”(National Autistic Society)

Staff feedback

Concern was noted for the wellbeing of the existing service users, their families/carers and the staff of the facilities if the proposal were implemented. Concern was relayed about the alternative provisions that may be obtained and how this would be assessed for quality on an ongoing basis to ensure the needs of the service users were being met.

Question B

To what extent do you support our proposals provide a new model of day opportunities from Ermine Road Day Centre through an alternative provider?



Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
1	5	35	20	165	4
0%	2%	15%	9%	72%	2%

Feedback received show that the spectrum of support to the proposal was linked to the **requirement for further knowledge of the potential alternative delivery model and the Council’s role in monitoring the service.** One respondent **noted** “If the alternative is a good provider, who will put money into the service and provide well trained staff who are properly paid and supported to undertake the important work they will be doing, this could be beneficial. If the Provider is inadequate, this could be disastrous. It will be vital that the service is closely monitored and that it can be re-tendered if it is failing.”

Letters/emails

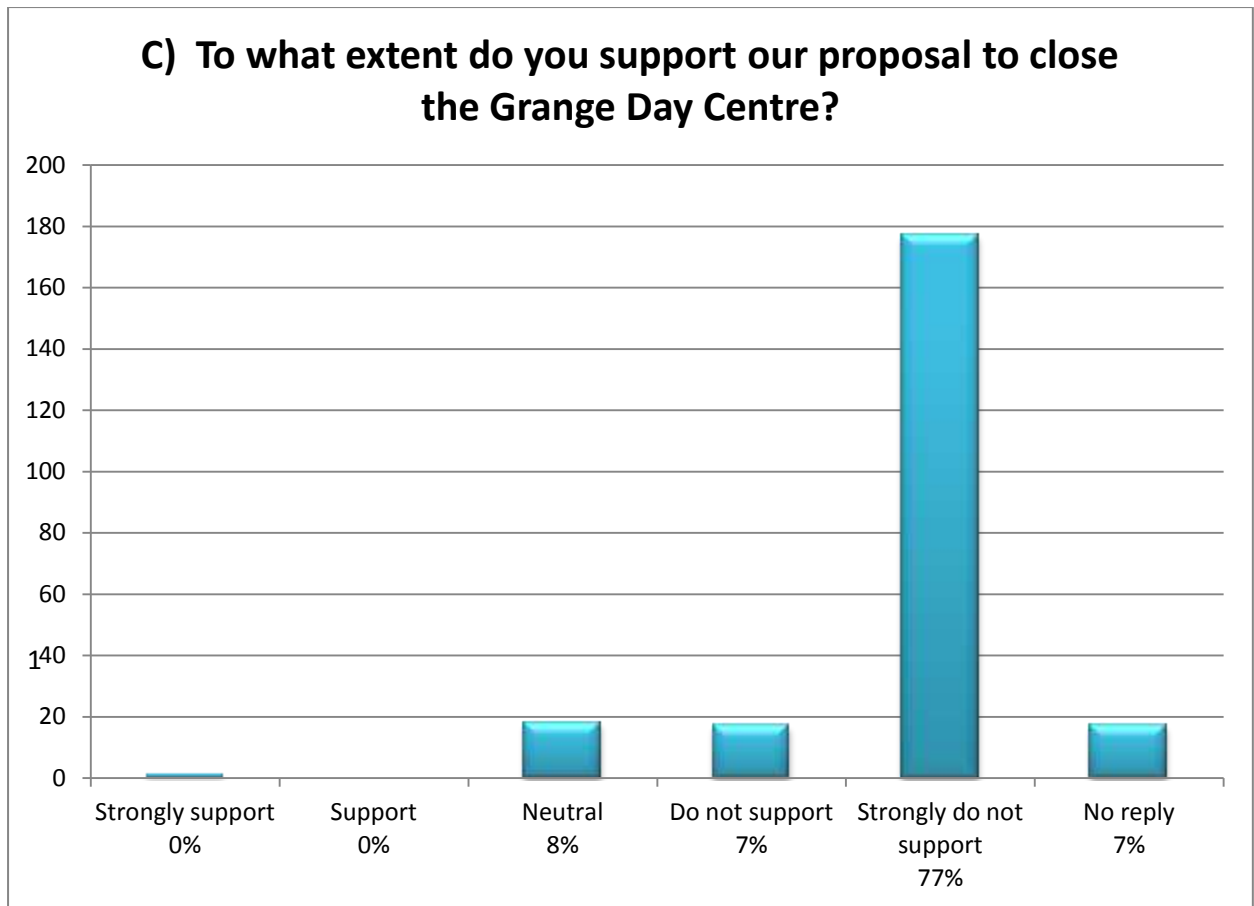
Responses to this proposal were in conjunction to the responses to Question A of the proposal and questioned the capacity and suitability of the facilities at Ermine Road Day Centre to meet the needs of service users with autism and other learning disabilities.

Staff feedback

Staff raised concerns with possible overcrowding at Ermine Road Day Centre under the proposed model and questioned whether or not staff would be trained and consistent to support the needs of the service users.

Question C

To what extent do you support our proposal to close the Grange Day Centre?



Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
1	1	33	22	156	17
0%	0%	14%	10%	68%	7%

The key theme from the responses received highlighted the lack of knowledge of the alternative options available within the borough and concerns for the ongoing support for service users of the Grange Day Centre and their families/carers if the centre were to close.

Samples of responses are set out below:

Support for service users and respite for families/carers

It will cause further deterioration of lives of people in need

Mum uses facility which gives us both a break... At home mum does nothing. the centre is a

life line for carers and clients. Without it my life would be my own.

There is almost NOTHING in this borough for older people to do. Services are few/far between and without day centers, people will become extremely socially isolated and carers will burn out. You cannot close a day center without providing something else for people to do/for carers to access respite.

People with dementia are often overlooked and segregated from society. The Grange is a beacon of hope to carers for respite and stimulation for people with dementia who have little social interaction outside of their home.

Letters/emails

Concern was noted for individuals who attend the service as well as concern of the impact it would have on carers/families. One such response stated:

“Carers find it hard enough to gain any respite and have appreciated for many years the support that the centres and dedicated staff have provided in our day to day lives... it will be the carer who will have to organise transport to and from differing venues. The comfort of knowing that our relatives and friends are being looked after for a given period means we can have some "time out" for ourselves.” (Carers Reference Group)

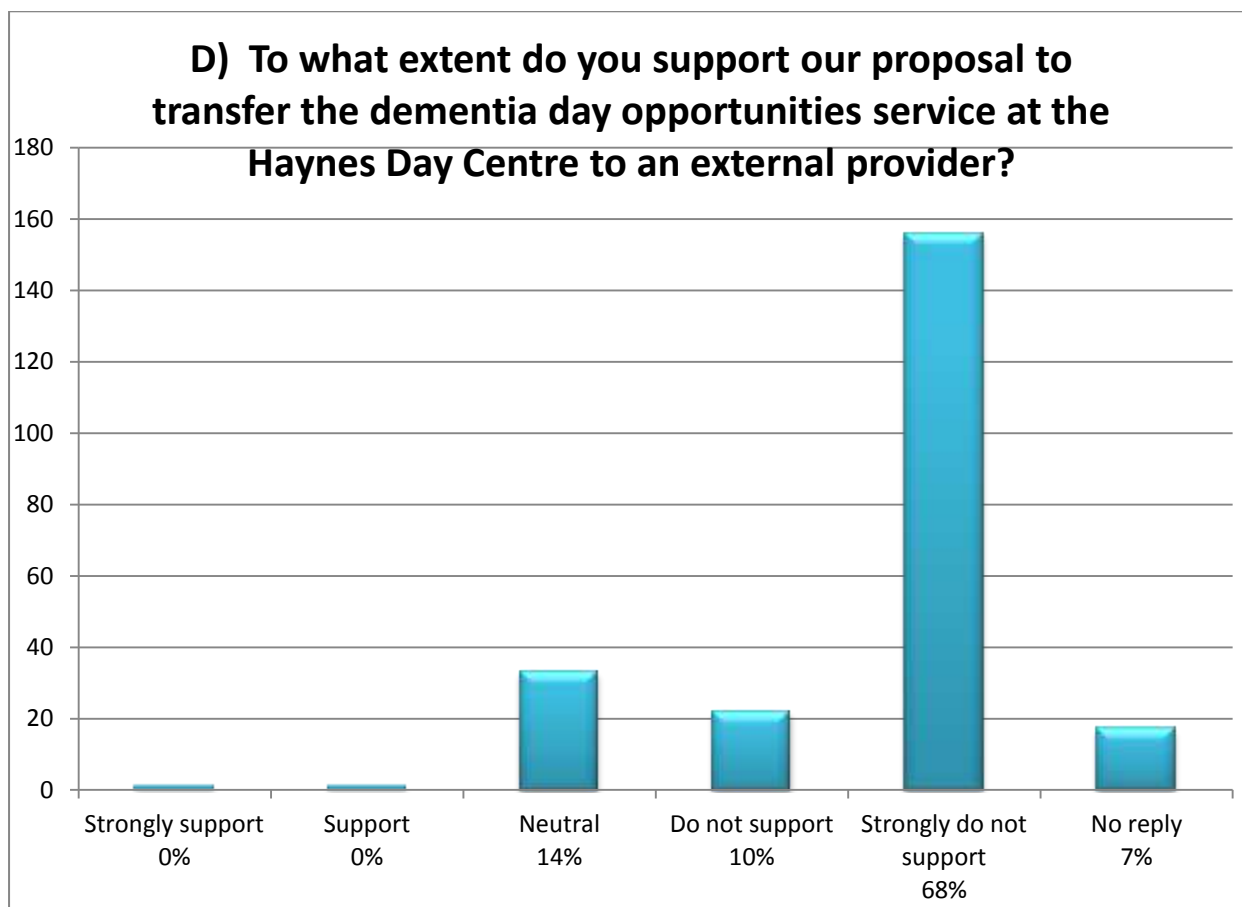
Additionally whilst the majority of responses noted disagreement with the proposal, they also suggested how best to support service users amidst the need to transform service; indicating the benefit of personal budgets and the need to stimulate the local provider market:

“...a co-operative model of using direct payments could overcome existing problems for many of employing their own care support person and pool some of the cost and knowledge issues which have discouraged many... now is the time to re-determine the social care market locally...” (Older Peoples Reference Group)

Staff feedback

Staff ‘strongly do not support’ the proposal to close the Grange Day Centre with particular concern noted for carers/families to be able to retain their employment and get respite. The friendships that the service users have formed within the day centre were noted as well as specific success stories of engagement and positive outcomes for service users.

Question D



Strongly support	Support	Neutral	Do not support	Strongly do not support	No reply
1	1	33	22	156	17
0%	0%	14%	10%	68%	7%

Responses to the question suggest that whilst there is overwhelming opposition to the proposal, should the correct alternative delivery model be identified the proposal could be supported. A sample of responses are set out below:

Against the proposal	Possible support for the correct alternative delivery model/provider
An external provider will provide a poorer service and will eventually be cut back.	As previously stated - this will depend on the right provider being chosen and the service being closely monitored.
External providers are profit oriented and less concerned about the well-being of the people. We have seen many examples of that.	If this was through AGE UK, as the centre in Enfield is run, I would support this, but without knowledge of who is going to be the external provider and what kind of record they have I cannot. Dementia sufferers are so vulnerable and changes to their services

	impact so heavily on their health that any kind of service would have to be sustainable in the long term or else councils will just find the hospitals filling up with dementia patients.
External providers will have alternative objectives, potentially including maximising profit which will adversely impact on the quality of services	Depends on who gets the contract. This is not a decision which can be made on money alone. It is an extremely complex and specialist service

Letters/emails

Correspondence received regarding this proposal were largely also linked to Proposal 3- Question C and Proposal 1 question A. This includes suggestions on how services could be delivered in the future and concern with future provision within the borough:

“It is hard to imagine that Haringey Council or the Haringey Clinical Commissioning Group will ever be in a position to open new centres to replace either the Grange or the Haven day care centres. So, in view of the inevitable increase in need, both the proposal to merge the Grange with the Haynes and the proposal to close the Haven will deprive future Haringey residents with dementia of the care they need.”

Staff feedback

Concern was noted regarding the possible high staff turnover in a social enterprise and the negative impact this may have on service users.

COMMUNICATIONS

Consultation on proposal 1

Consultation

Corporate plan priority 2 empowering all adults to live healthy, long and fulfilling lives

Consultation on proposal 1:

To increase the council's capacity to deliver re-ablement and intermediate care services



www.haringey.gov.uk

This document:

- Details the need for change to adult social care in Haringey
- Outlines our three consultation proposals
- Informs readers of how you can give us your views
- Explains what happens next

Have your say:

Haringey Council is seeking your views on the proposals to transform the way adult social care is delivered to residents.

We particularly want to hear from the key stakeholders who may be directly affected by the proposals, these include adults who currently use:

- Always Day Centre
- Birkbeck Road Day Centre
- Ermine Road Day Centre
- Grange Day Centre
- Haynes Day Centre
- Linden Road Residential
- Osborne Grove Nursing Home
- The Haven Day Centre
- The Roundway Day Centre
- Families and carers of adults who use the above facilities
- All Haringey residents are encouraged to respond via the Haringey website.

**The consultation period will run from:
Friday 3rd July 2015 to Thursday 1st October 2015**

How can I have my say?

For more information on our proposed changes including Frequently Asked Questions, please visit our website: www.haringey.gov.uk/asc-consultation and then tell us your opinion.

Please note that we may not reply to individual consultation responses however all feedback will be considered as part of the consultation process.

Online

Completing the questionnaire at
www.haringey.gov.uk/asc-consultation

E-mail

Download a copy of the consultation document, complete the consultation document and scan/email it to Priority2enquiries@haringey.gov.uk

By Post

Your completed consultation document can be posted to:
Transformation Team
Haringey Council
River Park House
225 High Road
Wood Green
London N22 8HQ

Workshop*

*For adults who use the services detailed within the consultation document, their carers and family members. Individual groups will be contacted directly and supported by independent advocates to respond to the consultation.

The closing date for receiving your consultation response is 1st October 2015

Executive Summary

Cabinet member for Health and Wellbeing: Councillor Morton

Haringey Council is fully committed to:

- Working with service users and their families and carers in the design of services.
- Meeting our statutory responsibilities to continue to provide services that meet the assessed needs of adults.
- Safeguarding adults at risk.

There is significant need for change resulting from the Care Act 2014, as well as the financial pressures which the council faces following the government's changes to local authority funding. In response to the increasing need for change we are proposing to change the way that some parts of the service are currently delivered, to ensure that we are able to reach and fairly support all adults in need of social care and ensure they are given the best opportunity to gain independence.

We will work closer with the community, other service providers and most importantly with the people who use adult social services, to ensure we provide the right help at the right time. We will focus on prevention and early intervention by providing access to high quality information, advice and support to empower all adults to live healthy, long, fulfilling lives, with access to high quality health and social care services when people are assessed as needing them. This new focus will ensure that we deliver the optimum level of support, being flexible and responsive when needs fluctuate.

We understand how valuable our services are to individuals and the differences the services provided have had on families and carers. However, the demand for Adult Social Services is increasing and we are facing significant reductions in budgets following the government's changes to local council funding. To meet these financial challenges and the changes to legislation, we need to transform the delivery of care and support.

I would like to know what you think of the council's proposals outlined in this consultation paper. Please submit your comments before the consultation closes on 1st October 2015. If you have any queries or require further information, please do get in touch.

I look forward to hearing from you.

The need for changes

The future of adult social care in Haringey

The traditional role of adult social care is changing. In the past, adult social services centred around assessing people's care needs and providing services to meet those needs. This remains a very important part of what social workers do, but there is increasing recognition that adult social care must do more to support people before they need care. In an era where our population is ageing, investing in prevention is key to helping more people to stay healthy and live independently for longer - and it means scarce resources can be used more effectively to target those people who need them most.

Making the change from a system that reacts when people need acute help to one that supports more people to remain healthy and independent is not an easy task. It takes time and relies on close cooperation between organisations and individuals in health, social care and the wider community. But the benefits of this change are considerable. In Haringey it would help to increase people's quality of life, improve people's health and wellbeing, and develop stronger and more resilient communities.

Why do we need to change?

The current model for adult social care in Haringey doesn't do enough to prevent care and support needs escalating, and is unsustainable in the long-term. Last year, for every £3 the council spent, £1 went on adult social care. Without significant change in how social care is delivered, that figure would rise, resulting in difficulties for the Council in delivering other services such as bin collections, libraries and parks.

In Haringey between 2011 - 2013 there was a 5.3 percent increase in residents aged over 65 years. This is great news but there is no doubt that it also places an ever-growing demand on care services. And while demand for services continues to rise, the money available to fund them has reduced. Across the country, there is currently £3.5 billion less in council social care budgets than there was in 2010. This means that there is a pressing need for councils to deliver social care differently.

What do we want to change to?

In Haringey, we want to keep people healthy and living in their own homes and communities for longer. We want to see a greater emphasis on promoting independence, dignity and choice - with care and support shifting away from institutional care towards community and home based support.

There are a number of reasons for this approach:

- Many people have told us they prefer community or home-based support, because it allows them to remain more independent for longer
- Support provided in a community setting or at home is often better tailored to the needs of an individual and their carer
- A focus on prevention and early intervention within the community is more cost effective, and helps to delay and reduce the need for more expensive, longer-term treatment
- This approach will allow us to maximise the impact of our limited resources

To make these changes, we are planning to develop services that prevent and delay people from needing more specialist and intensive care and support.

This will mean an increase in services like supported living housing, which helps people to maintain their independence in a safe and supportive environment. It will also mean development of schemes like Shared Lives - where carers choose to look after people in their own homes - and community-led programmes like Neighbourhoods Connect, which supports local people to participate in social activities and play a more active role in their community.

It will also mean improving the work we do on prevention and early intervention so that more people are equipped with the information and advice they need to look after themselves and others better. This will help to delay and reduce the need for care in many circumstances, help people to remain independent for longer, and build more resilient communities.

Moving to this more sustainable model of adult social care would help us to reduce demand for services provided at traditional care institutions such as day centres and residential homes.

It would also mean that the council would deliver fewer services directly and would instead commission more services from the independent, community and voluntary sectors.

We know that care can't be approached from a one-size-fits-all perspective, so we'll ensure that specialist care services remain available for people with complex care needs.

The proposals for consultation enable the council to continue to develop care and support which can be delivered within budget resources.

Alternative options considered

Before the Council set its budget a consultation exercise was carried out on a wider set of proposals and savings proposals of £5.7 million set against care packages in Adult Social care was considered but not taken forward.

The Council had also considered increasing Council Tax. It was decided that this was not the right thing to do because government funding rules mean that overall the Council would only get about £600,000 more money if it raised tax by 2%. This would not be enough to make a big difference to the social care budget but would mean that people in Haringey would have to pay more tax which could be difficult for residents.

The Council also considered using its reserves and the Council's Medium Term Financial Strategy does include some use of these reserves. However, the funding reductions are expected to continue for several years and are too high to be fully met from our reserves.

Now that the Council has set its budget, not making the Adult Social Care savings is likely to mean that the overall Council budget could fall into deficit (ie expenditure could exceed its available resources) and this is not permitted.

Legislative changes, demographic pressures and budget challenge mean that to continue to provide care and support in the current manner is unsustainable. The way we currently deliver services cannot meet expected outcomes and will not provide equitable services.

To increase the capacity to develop services run by the council would require more resources. The budget to provide adult social care has been reduced and, as such, there are no further resources therefore alternative ways of delivering services are being considered.

Consultation Proposals

Proposal 1: To increase the Council's capacity to provide re-ablement and intermediate care services.

Background

The Care Act requires local authorities to provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will prevent, reduce or delay the need for care and support. The Care and Support Statutory Guidance provides that the care and support system must work to "actively promote wellbeing and independence, and does not just wait to respond when people reach a crisis point. To meet the challenges of the future, it will be vital that the care and support system intervenes early to support individuals, helps people retain or regain their skills and confidence, and prevents need or delays deterioration wherever possible".

What is Re-ablement

Re-ablement services are for people with poor physical or mental health to help them adjust to their illness by learning or re-learning the skills necessary for daily living. The Re-ablement Service works closely with an individual for up to six weeks to build up skills, confidence and increase the opportunity for them to care for themselves. The service is for adults who have difficulty managing personal care or daily living tasks, perhaps as a result of illness or a period in hospital, and have the potential to regain or maintain those independent living skills. This tailored support allows the individual to regain independence and stay in their own home for longer.

Intermediate care is short-term care for people who no longer need to be in hospital however require extra support to help them recover. It increases the opportunity for individuals to care for themselves and access the support needed to gain independence. The type of support and the duration of support offered will vary according to the assessed needs of the individual.

We want to increase our capacity for re-ablement and intermediate care services to enable more people to live independently in their own homes. Supporting people to live as independently as possible, for as long as possible is a guiding principle of the care and support system. Feedback from previous engagement with service users shows that individuals want to retain/regain their independence after illness and live within the community where they have choices, flexibility and a wide range of support.

Residential homes and hospitals provide valuable care for those in need of those services, but with the right support, it is clear that adults would like to be empowered to be healthy and independent in their own homes for as long as possible. Evidence has shown that increasing the facilities and the opportunity for re-ablement services can potentially reduce the need for high cost social care packages in the future through supporting individuals to become independent. An increase in our capacity to provide re-ablement and intermediate care would allow us to support a greater number of people to have the support they need to prevent, reduce or delay the need for care and support.

The proposals:

It is our proposal to increase capacity to deliver re-ablement and intermediate care services through:

The closure of Osborne Grove Nursing Home and changing the use of the premises to an intermediate care service OR to continue with the current provision at Osborne Grove, but to include a re-ablement care service and deliver the service through an external provider.

Impact

Osborne Grove Nursing Home provides accommodation for adults over 65 who require nursing or personal care.

There are 32 places for people with long and short term needs with 4 units of 8 bedrooms. The building has good access for wheelchair users with level access, widened doorways and lift facilities. There is a very large room on the ground floor which is currently used for meetings and training which has potential to be redesigned and restructured as a fully operational Re-ablement resource.

1. The proposal for closure would not require any existing residents to move from the home unless they wished to do so. The care and support needs of service users will continue to be met. The intention would be to gradually wind down the current provision and incrementally build the intermediate care capacity.
2. Currently there is accommodation at Osborne Grove which could be utilised for re-ablement services. The proposal to continue with the present provision but with a new external provider to include re-ablement, facilities would see the restructure and use of the large underutilised meeting and training room. This already has a separate entrance. There would be a transition plan in place that would be sensitive to the needs of those that may be affected by this change and ensure that any impact is mitigated and the process of change is safely handled.

Benefits include

The option to close Osborne Grove would increase our capacity to provide intermediate care and result in a reduction in delayed hospital discharges. Transferring the service to an alternative provider will allow the service to continue as a nursing home with the addition of re-ablement services at the location providing good quality care services and increased value for money. There is evidence that reablement has the potential to deliver economies for both health and social care. The option to continue with the current provision but through an external provider and to include re-ablement service has the potential to deliver economies for both health and social care. This option will also support the need for residential nursing accommodation in the borough while providing additional facilities to support adults through a re-ablement programme to regain their independence. The current in-house provision is good but expensive. Transferring the service to an alternative provider will allow the service to improve on this.

Closing the Haven Day Centre and changing the use of the premises to a community re-ablement centre delivered by an alternative provider.

Impact

The Haven Day Centre provides day services for adults over 65 years old and the activities at the centre include board games, crafts and day trips. The day centre is limited to a total capacity of 24 people per day; the centre currently provides day opportunities to 48 Haringey Residents. Residents are provided with anything from one day per week to five days per week according to their assessed need.

This proposal to close the Haven Day Centre would require the reassessment or review of the care and support needs of current service users with a view to identifying satisfactory alternative provision to meet the assessed needs. Service users will be

encouraged to use Personal Budgets to access any support required to meet assessed need. Following the re-assessment or review, if, for any reason, there are service users who no longer have an eligible need, we would work closely with the service user to identify appropriate support. In addition, there will be a transition plan that will be sensitive to the needs of those that may be affected by this change, to ensure that any impact is mitigated and the process of change is safely handed.

The current service users of the Haven Day Centre would be supported by Haringey Neighbourhoods Connect Project to involve people in their local communities and activities wherever possible.

Benefits include

An increase in the number of service users who will have access to community based support reducing social isolation. For example through Neighbourhood Connects which has a wider reach beyond traditional day centres. Through using the building as a community re-ablement hub delivered by an external provider, we can promote independence for a greater number of adults.

Transferring the Re-ablement Service currently provided by Adult Social Services to an external provider.

Impact

The current reablement in-house service provides high quality services to a limited number of approximately 30 people at any one time, and, as a result, is expensive to run. We want the number of people supported through re-ablement to radically increase, so they can achieve their maximum potential after, for example, a period in hospital of after an illness or injury. The proposal to transfer the service to an external provider would have minimal impact on existing service users. However, there will be a transition plan that will be sensitive to the needs of those that may be affected by this change, ensure that any impact is mitigated and the process of change is safely handled.

Benefits include

There is evidence that re-ablement has the potential to deliver economies for both health and social care. Transferring the service to an external provider will allow the service to continue providing good quality care services and increase value for money allowing us to expand the service and increase the number of people we are able to support to regain independence.

Proposal 1 Consultation Questions:

A) Do you support our proposal to close the Haven Day Centre?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

Please tell us the reason for this view:

B) To what extent do you support our proposal to transfer the internal re-ablement service to an external provider?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

Please tell us the reason for this view:

C) To what extent do you support the proposal to close Osborne Grove Nursing Home?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

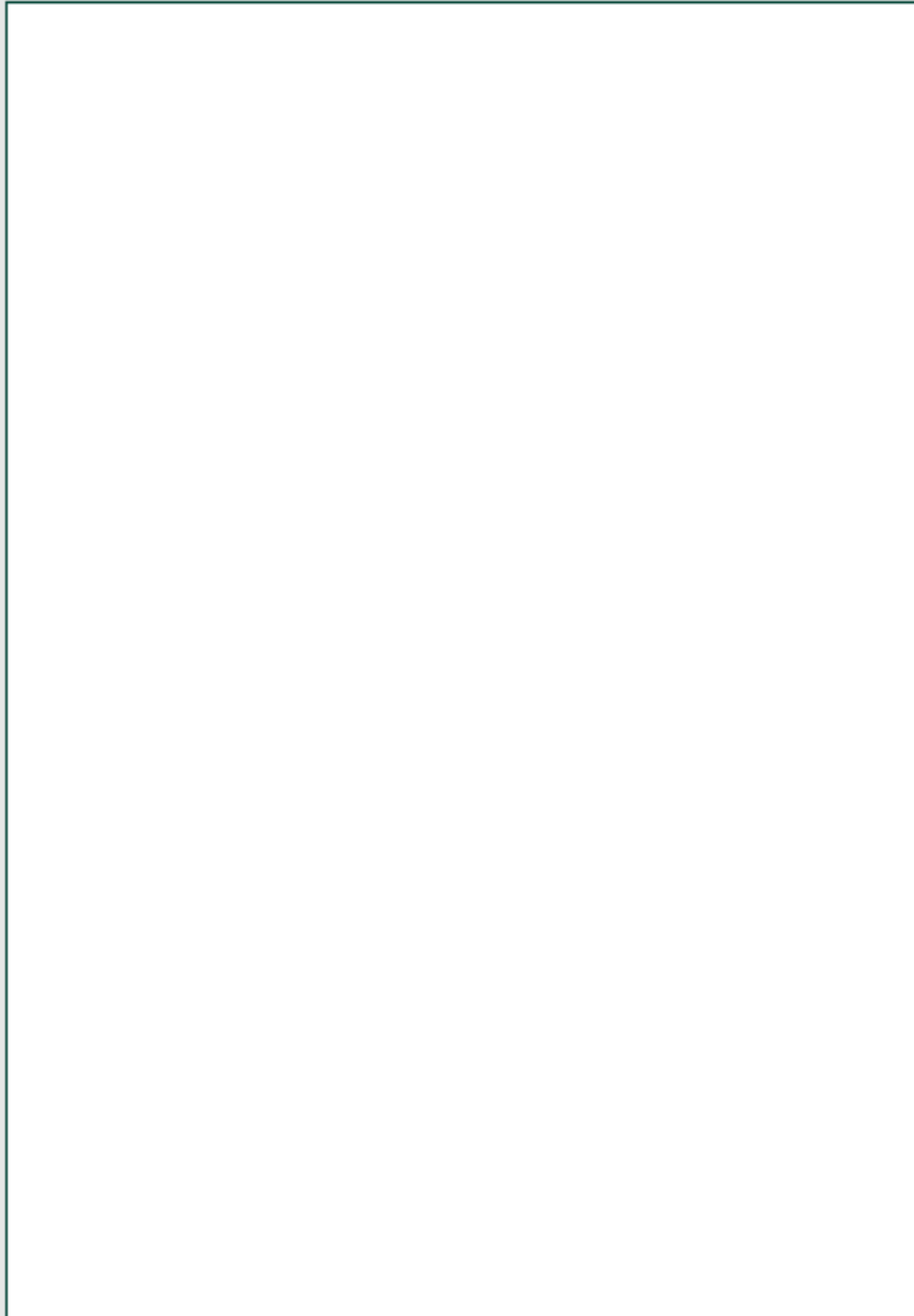
Please tell us the reason for this view:

D) To what extent do you support the proposal to transfer the existing service provision at Osborne Grove Nursing Home to an external provider and to include a re-ablement care service?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

Please tell us the reason for this view:

If you have any further comments regarding our proposal to increase the Council's capacity to provide re-ablement and intermediate care services please tell us below.

A large, empty rectangular box with a thin black border, intended for users to provide their comments on the proposal.

What happens after the consultation?

Action	Date
We will consider your responses to the proposals in the consultation paper.	October 2015
We will prepare report to Council's Cabinet on the outcome of the consultation and with recommendations on the proposals. Cabinet will make a final decision on the proposals.	November 2015
Cabinet decision on the proposals will be published in November 2015 and any further actions required will be published on the Haringey website accordingly.	November/December 2015

Your completed consultation document can be posted to:

Transformation Team
Haringey Council
River Park House
225 High Road
Wood Green
London
N22 8HQ

It could also be sent by email to Priority2enquires@haringey.gov.uk

About you

Are you:

A Haringey resident:

- Yes No

If yes in which ward do you reside:

- | | | |
|--|---|---|
| <input type="checkbox"/> Alexandra ward | <input type="checkbox"/> Hornsey ward | <input type="checkbox"/> Tottenham Green ward |
| <input type="checkbox"/> Bounds Green ward | <input type="checkbox"/> Muswell Hill ward | <input type="checkbox"/> Tottenham Hale ward |
| <input type="checkbox"/> Bruce Grove ward | <input type="checkbox"/> Noel Park ward | <input type="checkbox"/> West Green ward |
| <input type="checkbox"/> Crouch End ward | <input type="checkbox"/> Northumberland Park ward | <input type="checkbox"/> White Hart Lane ward |
| <input type="checkbox"/> Fortis Green ward | <input type="checkbox"/> St Ann's ward | <input type="checkbox"/> Woodside ward |
| <input type="checkbox"/> Harringay ward | <input type="checkbox"/> Seven Sisters ward | |
| <input type="checkbox"/> Highgate ward | <input type="checkbox"/> Stroud Green ward | |

An adult who currently uses social care

- Yes No

If yes which service do you use:

- | | | |
|--|---|--|
| <input type="checkbox"/> Ermine Road Day Centre | <input type="checkbox"/> The Roundway Day Centre | <input type="checkbox"/> Always Day Centre |
| <input type="checkbox"/> The Haven Day Centre | <input type="checkbox"/> Linden Road Residential | <input type="checkbox"/> Haynes Day Centre |
| <input type="checkbox"/> Osborne Grove Nursing Home | <input type="checkbox"/> Birkbeck Road Day Centre | <input type="checkbox"/> Grange Day Centre |
| <input type="checkbox"/> Other: please specify _____ | | |

A carer/family member of an adult who uses:

- Yes No

If yes which service does she/he use:

- | | | |
|--|---|--|
| <input type="checkbox"/> Ermine Road Day Centre | <input type="checkbox"/> The Roundway Day Centre | <input type="checkbox"/> Always Day Centre |
| <input type="checkbox"/> The Haven Day Centre | <input type="checkbox"/> Linden Road Residential | <input type="checkbox"/> Haynes Day Centre |
| <input type="checkbox"/> Osborne Grove Nursing Home | <input type="checkbox"/> Birkbeck Road Day Centre | <input type="checkbox"/> Grange Day Centre |
| <input type="checkbox"/> Other: please specify _____ | | |

A member of staff?

- Yes No

Other: please specify _____

Please provide details

Equal Opportunities Monitoring Form

The Public Sector Equality Duty does not expressly require the council to collect equality information. However, collecting, analysing and using the information helps us to see how our policies and activities are affecting various sections of our communities. In employment and service provision, it helps us to identify any existing inequalities and where new inequalities may be developing and take action to tackle them.

In addition to the nine "protected characteristics" (Age, Disability Gender Reassignment, Marriage and Civil Partnership, Sex [formerly Gender], Race, Religion or Belief and Sexual Orientation) identified in the Equality Act 2010, we have added categories of Refugees and Asylum Seekers and Language in order to reflect the full diversity of Haringey.

We will be grateful if you could take a little time to complete and return this form. Please go through it and tick all the categories that most accurately describe you.

The information you provide on this form will be held in the strictest confidence and only be used for the purposes stated above.

Age

Please tick one box

- | | | | |
|-----------------------------------|--------------------------------|--------------------------------|--|
| <input type="checkbox"/> Under 18 | <input type="checkbox"/> 30-44 | <input type="checkbox"/> 65-74 | <input type="checkbox"/> 90 and over |
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 45-59 | <input type="checkbox"/> 75-84 | <input type="checkbox"/> prefer not to say |
| <input type="checkbox"/> 25-29 | <input type="checkbox"/> 60-64 | <input type="checkbox"/> 85-89 | |

Disability

Under the Equality Act 2010, a person is considered to have a disability if she/he has a physical or mental impairment which has a substantial and long-term adverse effect on her/his ability to carry out normal day-to-day activities. Haringey Council accepts the social model of disability. However, in order to be able to identify and respond to your specific needs, it is important that we know what kind of disability you have.

Do you have any of the following conditions which have lasted or are expected to last for at least 12 months?

- | | |
|--|---|
| <input type="checkbox"/> Deafness or partial loss of hearing | <input type="checkbox"/> Long term illness or condition |
| <input type="checkbox"/> Blindness or partial loss of sight | <input type="checkbox"/> Physical disability |
| <input type="checkbox"/> Learning disability | <input type="checkbox"/> Other disabilities |
| <input type="checkbox"/> Developmental disorder | <input type="checkbox"/> No disabilities |
| <input type="checkbox"/> Mental ill health | <input type="checkbox"/> Prefer not to say |

Ethnicity

Please tick the box that best describes your ethnic group

White

- British
 Irish

White Other

- | | |
|--|--|
| <input type="checkbox"/> Greek/Greek Cypriot | <input type="checkbox"/> Turkish/Cypriot |
| <input type="checkbox"/> Turkish | <input type="checkbox"/> Kurdish |
| <input type="checkbox"/> Gypsy/Roma | <input type="checkbox"/> Irish Traveller |
| <input type="checkbox"/> Other, please specify _____ | |

Mixed

- White and Black African
 White and Black Caribbean
 White and Asian
 Other, please specify _____

Asian or Asian British

- Indian
 Bangladeshi
 Pakistani
 East African Asian
 Other, please specify _____

Black or Black British

- African
- Caribbean
- Other please specify _____

Chinese or other ethnic group

- Chinese
- Any other ethnic background _____

Sex

- Male
- Female

Gender reassignment

Does your gender differ from your birth sex?

- Yes
- No
- Prefer not to say

Religion

Please tick as appropriate

- Christian
- Hindu
- Muslim
- Sikh
- Prefer not to say
- Jewish
- Rastafarian
- Buddhist
- No Religion
- Other (please specify) _____

Sexual orientation

Please tick the box that best describes your sexual orientation

- Heterosexual
- Bisexual
- Gay
- Lesbian
- Prefer not to say

Pregnancy and maternity

Please tick one box

Are you pregnant?

- Yes
- No

Have you had a baby in the last 12 months?

- Yes
- No

Marriage and Civil Partnership

Please tick one box

- Single
- Married
- Co-habiting
- In a same sex civil partnership
- Separated
- Divorced
- Widowed

Refugees and Asylum Seekers

Are you?

- A Refugee
- An Asylum Seeker

What country or region are you a refugee/asylum seeker from?

Language

Please tick the box that best describes your language

- Albanian
- Arabic
- English
- French
- Lingala
- Somali
- Turkish

Other (please specify): _____

Thank you for completing this form.

If you want this in your own language, please tick the box, fill in your name and address and send to the freepost address below

Shqip

Albanian

Nëse dëshironi ta keni këtë në gjuhën tuaj, ju lutemi vendosni shenjën ✓ në kuti, shënioni emrin dhe adresën tuaj dhe niseni me postë falas në adresën e mëposhtme.

বাংলা

Bengali

আপনি যদি এটা আপনার নিজের ভাষায় পেতে চান তাহলে অনুগ্রহ করে সঠিক বাক্সে টিক্ চিহ্ন দিন, আপনার নাম ও ঠিকানা লিখুন এবং নিজের বিনা ডাকমাশুলের ঠিকানায় পাঠিয়ে দিন।

Français

French

Pour recevoir ces informations dans votre langue, veuillez inscrire votre nom et adresse et renvoyer ce formulaire à l'adresse ci-dessous. Le port est payé.

Kurmanci

Kurdish

Hek hun vêya bi zimanê xwe dixwazin, ji kerema xwe qutîkê îşaret bikin, nav û navnîşana xwe binivîsin û ji navnîşana jêrîn re bi posta bêpere bişînin.

Soomaali

Somali

Haddii aad qoraalkan ku rabto luuqadaada, fadlan sax mari sanduukha, kusoo buuxi magaca iyo ciwaanakaaga, kuna soo dir boostada hoose ee lacag la'aanta ah.

Türkçe

Turkish

Bu kitapçığın Türkçesini istiyorsanız lütfen kutuyu işaretleyip, adınızı, soyadınızı ve adresinizi yazarak posta pulu yapıştırmadan aşağıdaki adrese gönderin.

Please indicate if you would like a copy of this letter in another language not listed or any of the following formats and send to the freepost address below.

- Large print
- On audio tape
- Another language
- On disk
- Braille
- Please state: _____

Name: _____

Address: _____

Freepost RLXS-XZGT-UGRJ, Translation & Interpreting Services,
6 Floor, River Park House, 225 High Road, N22 8HQ

Consultation

Corporate plan priority 2 empowering all adults to live healthy, long and fulfilling lives

Consultation on proposal 2:

Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives Scheme



www.haringey.gov.uk



This document:

- Details the need for change to adult social care in Haringey
- Outlines our three consultation proposals
- Informs readers of how you can give us your views
- Explains what happens next

Have your say:

Haringey Council is seeking your views on the proposals to transform the way adult social care is delivered to residents.

We particularly want to hear from the key stakeholders who may be directly affected by the proposals, these include adults who currently use:

- Always Day Centre
- Birkbeck Road Day Centre
- Ermine Road Day Centre
- Grange Day Centre
- Haynes Day Centre
- Linden Road Residential
- Osborne Grove Nursing Home
- The Haven Day Centre
- The Roundway Day Centre
- Families and carers of adults who use the above facilities
- All Haringey residents are encouraged to respond via the Haringey website.

**The consultation period will run from:
Friday 3rd July 2015 to Thursday 1st October 2015**

How can I have my say?

For more information on our proposed changes including Frequently Asked Questions, please visit our website: www.haringey.gov.uk/asc-consultation and then tell us your opinion.

Please note that we may not reply to individual consultation responses however all feedback will be considered as part of the consultation process.

Online

Completing the questionnaire at
www.haringey.gov.uk/asc-consultation

E-mail

Download a copy of the consultation document, complete the consultation document and scan/email it to Priority2enquires@haringey.gov.uk

By Post

Your completed consultation document can be posted to:
Transformation Team
Haringey Council
River Park House
225 High Road
Wood Green
London N22 8HQ

Workshop*

*For adults who use the services detailed within the consultation document, their carers and family members. Individual groups will be contacted directly and supported by independent advocates to respond to the consultation.

The closing date for receiving your consultation response is 1st October 2015

Executive Summary

Executive Summary

Cabinet member for Health and Wellbeing: Councillor Morton

Haringey Council is fully committed to:

- Working with service users and their families and carers in the design of services.
- Meeting our statutory responsibilities to continue to provide services that meet the assessed needs of adults.
- Safeguarding adults at risk.

There is significant need for change resulting from the Care Act 2014, as well as the financial pressures which the council faces following the government's changes to local authority funding. In response to the increasing need for change we are proposing to change the way that some parts of the service are currently delivered, to ensure that we are able to reach and fairly support all adults in need of social care and ensure they are given the best opportunity to gain independence.

We will work closer with the community, other service providers and most importantly with the people who use adult social services, to ensure we provide the right help at the right time. We will focus on prevention and early intervention by providing access to high quality information, advice and support to empower all adults to live healthy long, fulfilling lives; with access to high quality health and social care services when people are assessed as needing them. This new focus will ensure that we deliver the optimum level of support, being flexible and responsive when needs fluctuate.

We understand how valuable our services are to individuals and the differences the services provided have had on families and carers. However, the demand for Adult Social Services is increasing and we are facing significant reductions in budgets following the government's changes to local council funding. To meet these financial challenges and the changes to legislation, we need to transform the delivery of care and support.

I would like to know what you think of the council's proposals outlined in this consultation paper. Please submit your comments before the consultation closes on 1st October 2015. If you have any queries or require further information, please do get in touch.

I look forward to hearing from you.

The need for changes

The future of adult social care in Haringey

The traditional role of adult social care is changing. In the past, adult social services centred around assessing people's care needs and providing services to meet those needs. This remains a very important part of what social workers do, but there is increasing recognition that adult social care must do more to support people before they need care. In an era where our population is ageing, investing in prevention is key to helping more people to stay healthy and live independently for longer - and it means scarce resources can be used more effectively to target those people who need them most.

Making the change from a system that reacts when people need acute help to one that supports more people to remain healthy and independent is not an easy task. It takes time and relies on close cooperation between organisations and individuals in health, social care and the wider community. But the benefits of this change are considerable. In Haringey it would help to increase people's quality of life; improve people's health and wellbeing, and develop stronger and more resilient communities.

Why do we need to change?

The current model for adult social care in Haringey doesn't do enough to prevent care and support needs escalating, and is unsustainable in the long-term. Last year, for every £3 the council spent, £1 went on adult social care. Without significant change in how social care is delivered, that figure would rise, resulting in difficulties for the Council in delivering other services such as bin collections, libraries and parks.

In Haringey between 2011- 2013 there was a 5.3 percent increase in residents aged over 65 years. This is great news but there is no doubt that it also places an ever-growing demand on care services. And while demand for services continues to rise, the money available to fund them has reduced. Across the country there is currently £3.5 billion less in council social care budgets than there was in 2010. This means that there is a pressing need for councils to deliver social care differently.

What do we want to change to?

In Haringey, we want to keep people healthy and living in their own homes and communities for longer. We want to see a greater emphasis on promoting independence, dignity and choice - with care and support shifting away from institutional care towards community and home based support.

There are a number of reasons for this approach:

- Many people have told us they prefer community or home-based support, because it allows them to remain more independent for longer
- Support provided in a community setting or at home is often better tailored to the needs of an individual and their carer
- A focus on prevention and early intervention within the community is more cost effective, and helps to delay and reduce the need for more expensive, longer-term treatment
- This approach will allow us to maximise the impact of our limited resources

To make these changes, we are planning to develop services that prevent and delay people from needing more specialist and intensive care and support.

This will mean an increase in services like supported living housing, which helps people to maintain their independence in a safe and supportive environment. It will also mean development of schemes like Shared Lives - where carers choose to look after people in their own homes - and community-led programmes like Neighbourhoods Connect, which supports local people to participate in social activities and play a more active role in their community.

It will also mean improving the work we do on prevention and early intervention so that more people are equipped with the information and advice they need to look after themselves and others better. This will help to delay and reduce the need for care in many circumstances, help people to remain independent for longer, and build more resilient communities.

Moving to this more sustainable model of adult social care would help us to reduce demand for services provided at traditional care institutions such as day centres and residential homes.

It would also mean that the council would deliver fewer services directly and would instead commission more services from the independent, community and voluntary sectors.

We know that care can't be approached from a one-size-fits-all perspective, so we'll ensure that specialist care services remain available for people with complex care needs.

The proposals for consultation enable the council to continue to develop care and support which can be delivered within budget resources.

Alternative options considered

Before the Council set its budget a consultation exercise was carried out on a wider set of proposals and savings proposals of £5.7 million set against care packages in Adult Social care was considered but not taken forward.

The Council had also considered increasing Council Tax. It was decided that this was not the right thing to do because government funding rules mean that overall the Council would only get about £600,000 more money if it raised tax by 2%. This would not be enough to make a big difference to the social care budget but would mean that people in Haringey would have to pay more tax which could be difficult for residents.

The Council also considered using its reserves and the Council's Medium Term Financial Strategy does include some use of these reserves. However, the funding reductions are expected to continue for several years and are too high to be fully met from our reserves.

Now that the Council has set its budget, not making the Adult Social Care savings is likely to mean that the overall Council budget could fall into deficit (ie expenditure could exceed its available resources) and this is not permitted.

Legislative changes, demographic pressures and budget challenge mean that to continue to provide care and support in the current manner is unsustainable. The way we currently deliver services cannot meet expected outcomes and will not provide equitable services.

To increase the capacity to develop services run by the council would require more resources. The budget to provide adult social care has been reduced and, as such, there are no further resources therefore alternative ways of delivering services are being considered.

Consultation Proposals

Proposal 2: Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives schemes.

Background

The local authority must promote individual well being; relating to 'domestic, family and personal relationships' and the 'suitability of living accommodation'. The Care and Support Statutory Guidance provides that "Local authorities should encourage a genuine choice of service type, not only a selection of providers offering similar services, encouraging, for example, a variety of different living options such as shared lives, extra care housing, supported living, support provided at home, and live-in domiciliary care as alternatives to homes care, and low volume and specialist services for people with less common needs".

In Haringey we have developed a range of provision for vulnerable people that has a greater emphasis on helping people to continue to live independently at home - maximising their independence and reducing social isolation - and is less reliant on traditional institutions. Working closely with our partners we are increasing the availability of schemes such as Supported Living and Shared Lives - demonstrating how most needs, including complex needs, can be met in the community. Adult social care users in Haringey, including people with complex needs, have told us they would prefer to live as independently as possible in the community where they have the opportunity to exercise greater control over their lives.

Supported Living Accommodation enables adults, who are assessed as being able to live independently, to do so. Individuals can have their own tenancy or choose to share with other eligible adults. Support is tailored to the needs of the individual and supports them with daily living including personal care, taking medication and money management.

Shared Lives is a well established scheme within Haringey Council and nationally. The scheme relies on the participation of the local community, where a family or an individual share their family home with someone who needs support. The scheme is open to adults with various disabilities that have been assessed as being able to live within the community. It enables such adults to enjoy the independence and support of living with a local individual/family.

It is more important than ever that we get the most value from our public spending. Commissioning for social value involves looking at the collective benefit to a community when a service is provided. A social enterprise is an independent business that trades to tackle social problems, improve communities, people's life chances, or the environment. Social enterprises make their money in the open market, however they reinvest their profits back into the business or the local community, maximising the impact of public expenditure to get the best possible outcomes.

The proposals

It is our proposal to increase our capacity to provide suitable accommodation to promote individual well being - Supported Living Accommodation and Shared Lives through:

A) Closing Linden House as a residential home

Impact:

Haringey Council provides support to around 650 working age people with a learning disability. Of those 650, just 157 now live in residential accommodation, while the majority are living in the community – either in their own home, with carers in Supported Living arrangements, or in the Shared Lives schemes.

The focus to help adults with learning disabilities to move out of institutionalised care and into appropriate community settings began in 2010 and is central to our ambition to, by 2017, consider the need for residential care only as a last resort.

Linden House can accommodate up to 6 adults with learning disabilities, including those with complex needs. There are currently 5 residents at Linden Road. This proposal would require the reassessment or review of the care and support needs of current service users with a view to identifying satisfactory alternative supported living provision where people will be enabled to hold their own tenancies and to access support to meet their needs. There will be a transition plan that will be sensitive to the needs of those that may be affected by this change. We will ensure that any impact is mitigated and the process of change is safely managed.

Benefits include:

Residents will be enabled to actively take part in their communities, supported to gain greater independence and move away from institutional care.

B) Expanding the existing Shared Lives service by transferring the service from Adult Social Care to a social enterprise model.

Impact:

Nationally around 15,000 people are supported through Shared Lives schemes. The existing Shared Lives service within Haringey supports approximately 36 adults. The proposal to transfer would have minimal impact on existing carers and service users. The service would be expanded, attracting social investment and providing additional placements for a range of service users over the next three years.

Benefits include:

Shared Lives offers better value for money than traditional residential placements and also contributes to reductions in the use of acute health resources.

Proposal 2 Consultation Questions:

A) To what extent do you support our proposal to provide more accommodation options that promotes individual well being through expanding Supported Living Accommodation and Shared Lives schemes?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

Please tell us the reason for this view:

B) To what extent do you support our proposal to close Linden Road Residential Home?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

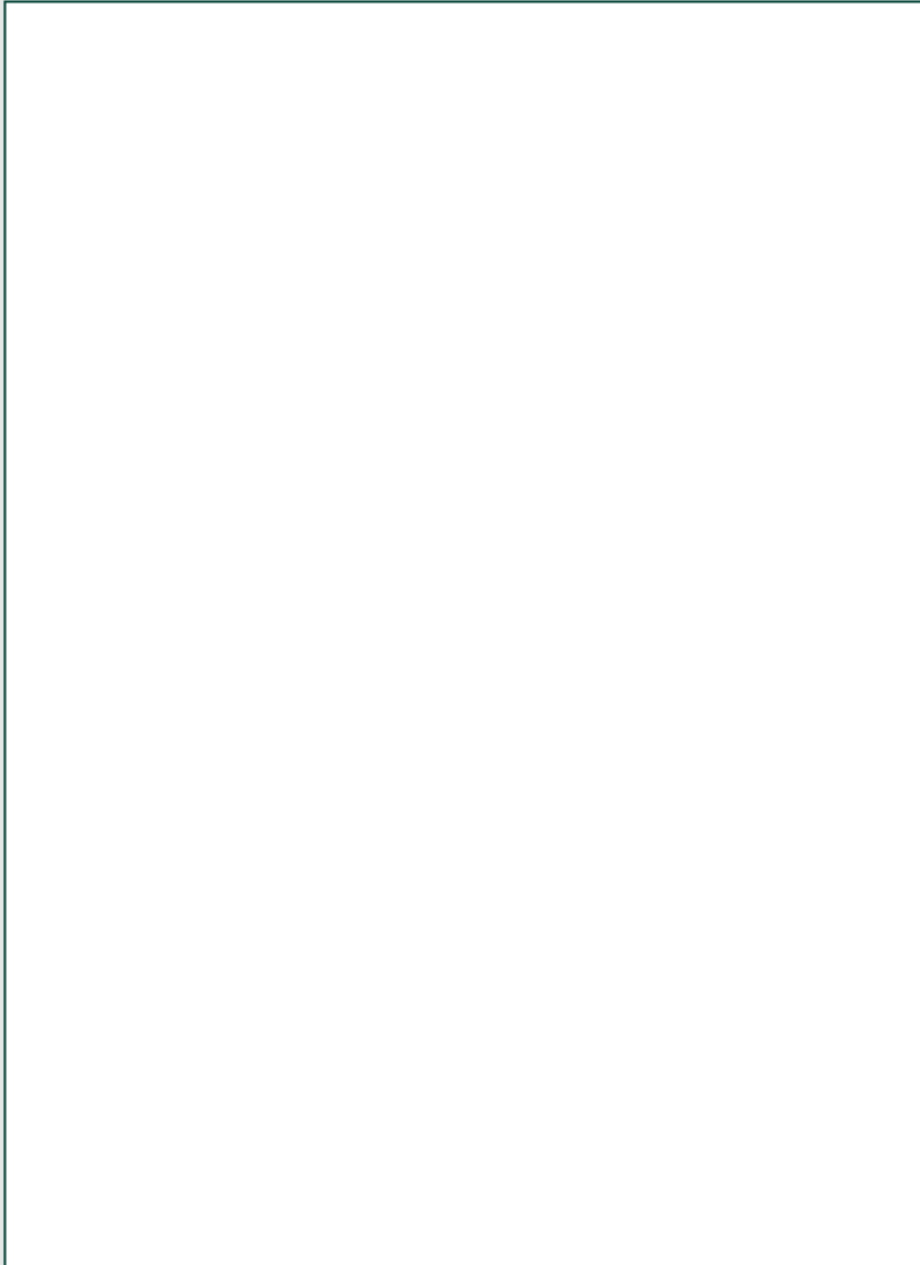
Please tell us the reason for this view:

C) To what extent do you support our proposal to transfer the Shared Lives service to a social enterprise?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

Please tell us the reason for this view:

D) If you have any further comments regarding our proposal to increase our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives schemes please tell us below.

A large, empty rectangular box with a thin black border, intended for users to provide their comments on the proposal.

What happens after the consultation?

Action	Date
We will consider your responses to the proposals in the consultation paper.	October 2015
We will prepare report to Council's Cabinet on the outcome of the consultation and with recommendations on the proposals. Cabinet will make a final decision on the proposals.	November 2015
Cabinet decision on the proposals will be published in November 2015 and any further actions required will be published on the Haringey website accordingly.	November/December 2015

Your completed consultation document can be posted to:

Transformation Team
Haringey Council
River Park House
225 High Road
Wood Green
London
N22 0HQ

It could also be sent by email to Priority2enquires@haringey.gov.uk

About you

Are you:

A Haringey resident:

- Yes No

If yes in which ward do you reside:

- | | | |
|--|---|---|
| <input type="checkbox"/> Alexandra ward | <input type="checkbox"/> Hornsey ward | <input type="checkbox"/> Tottenham Green ward |
| <input type="checkbox"/> Bounds Green ward | <input type="checkbox"/> Muswell Hill ward | <input type="checkbox"/> Tottenham Hale ward |
| <input type="checkbox"/> Bruce Grove ward | <input type="checkbox"/> Noel Park ward | <input type="checkbox"/> West Green ward |
| <input type="checkbox"/> Crouch End ward | <input type="checkbox"/> Northumberland Park ward | <input type="checkbox"/> White Hart Lane ward |
| <input type="checkbox"/> Fortis Green ward | <input type="checkbox"/> St Ann's ward | <input type="checkbox"/> Woodside ward |
| <input type="checkbox"/> Harringay ward | <input type="checkbox"/> Seven Sisters ward | |
| <input type="checkbox"/> Highgate ward | <input type="checkbox"/> Stroud Green ward | |

An adult who currently uses social care

- Yes No

If yes which service do you use:

- | | | |
|--|---|--|
| <input type="checkbox"/> Ermine Road Day Centre | <input type="checkbox"/> The Roundway Day Centre | <input type="checkbox"/> Always Day Centre |
| <input type="checkbox"/> The Haven Day Centre | <input type="checkbox"/> Linden Road Residential | <input type="checkbox"/> Haynes Day Centre |
| <input type="checkbox"/> Osborne Grove Nursing Home | <input type="checkbox"/> Birkbeck Road Day Centre | <input type="checkbox"/> Grange Day Centre |
| <input type="checkbox"/> Other: please specify _____ | | |

A carer/family member of an adult who uses:

- Yes No

If yes which service does she/he use:

- | | | |
|--|---|--|
| <input type="checkbox"/> Ermine Road Day Centre | <input type="checkbox"/> The Roundway Day Centre | <input type="checkbox"/> Always Day Centre |
| <input type="checkbox"/> The Haven Day Centre | <input type="checkbox"/> Linden Road Residential | <input type="checkbox"/> Haynes Day Centre |
| <input type="checkbox"/> Osborne Grove Nursing Home | <input type="checkbox"/> Birkbeck Road Day Centre | <input type="checkbox"/> Grange Day Centre |
| <input type="checkbox"/> Other: please specify _____ | | |

A member of staff?

- Yes No

Other: please specify _____

Please provide details

Equal Opportunities Monitoring Form

The Public Sector Equality Duty does not expressly require the council to collect equality information. However, collecting, analysing and using the information helps us to see how our policies and activities are affecting various sections of our communities. In employment and service provision, it helps us to identify any existing inequalities and where new inequalities may be developing and take action to tackle them.

In addition to the nine "protected characteristics" (Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Sex [formerly Gender], Race, Religion or Belief and Sexual Orientation) identified in the Equality Act 2010, we have added categories of Refugees and Asylum Seekers and Language in order to reflect the full diversity of Haringey.

We will be grateful if you could take a little time to complete and return this form. Please go through it and tick all the categories that most accurately describe you.

The information you provide on this form will be held in the strictest confidence and only be used for the purposes stated above.

Age

Please tick one box

- | | | | |
|-----------------------------------|--------------------------------|--------------------------------|--|
| <input type="checkbox"/> Under 18 | <input type="checkbox"/> 30-44 | <input type="checkbox"/> 65-74 | <input type="checkbox"/> 90 and over |
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 45-59 | <input type="checkbox"/> 75-84 | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> 25-29 | <input type="checkbox"/> 60-64 | <input type="checkbox"/> 85-89 | |

Disability

Under the Equality Act 2010, a person is considered to have a disability if she/he has a physical or mental impairment which has a substantial and long-term adverse effect on her/his ability to carry out normal day-to-day activities. Haringey Council accepts the social model of disability. However, in order to be able to identify and respond to your specific needs, it is important that we know what kind of disability you have.

Do you have any of the following conditions which have lasted or are expected to last for at least 12 months?

- | | |
|--|---|
| <input type="checkbox"/> Deafness or partial loss of hearing | <input type="checkbox"/> Long term illness or condition |
| <input type="checkbox"/> Blindness or partial loss of sight | <input type="checkbox"/> Physical disability |
| <input type="checkbox"/> Learning disability | <input type="checkbox"/> Other disabilities |
| <input type="checkbox"/> Developmental disorder | <input type="checkbox"/> No disabilities |
| <input type="checkbox"/> Mental ill health | <input type="checkbox"/> Prefer not to say |

Ethnicity

Please tick the box that best describes your ethnic group

White

- British
- Irish

White Other

- | | |
|--|--|
| <input type="checkbox"/> Greek/Greek Cypriot | <input type="checkbox"/> Turkish/Cypriot |
| <input type="checkbox"/> Turkish | <input type="checkbox"/> Kurdish |
| <input type="checkbox"/> Gypsy/Roma | <input type="checkbox"/> Irish Traveller |
| <input type="checkbox"/> Other, please specify _____ | |

Mixed

- White and Black African
- White and Black Caribbean
- White and Asian
- Other, please specify _____

Asian or Asian British

- Indian
- Bangladeshi
- Pakistani
- East African Asian
- Other, please specify _____

Black or Black British

- African
- Caribbean
- Other please specify _____

Chinese or other ethnic group

- Chinese
- Any other ethnic background

Sex

- Male
- Female

Gender reassignment

Does your gender differ from your birth sex?

- Yes
- No
- Prefer not to say

Religion

Please tick as appropriate

- Christian
- Hindu
- Muslim
- Sikh
- Prefer not to say
- Jewish
- Rastafarian
- Buddhist
- No Religion
- Other (please specify)

Sexual orientation

Please tick the box that best describes your sexual orientation

- Heterosexual
- Bisexual
- Gay
- Lesbian
- Prefer not to say

Pregnancy and maternity

Please tick one box

Are you pregnant?

- Yes
- No

Have you had a baby in the last 12 months?

- Yes
- No

Marriage and Civil Partnership

Please tick one box

- Single
- Married
- Co-habiting
- In a same sex civil partnership
- Separated
- Divorced
- Widowed

Refugees and Asylum Seekers

Are you?

- A Refugee
- An Asylum Seeker

What country or region are you a refugee/asylum seeker from?

Language

Please tick the box that best describes your language

- Albanian
- Arabic
- English
- French
- Lingala
- Somali
- Turkish

Other (please specify): _____

Thank you for completing this form.



If you want this in your own language, please tick the box, fill in your name and address and send to the freepost address below

Shqip

Albanian

Nëse dëshironi ta keni këtë në gjuhën tuaj, ju lutemi vendosni shenjën ✓ në kuti, shënoni emrin dhe adresën tuaj dhe niseni me postë falas në adresën e mëposhtme.

বাংলা

Bengali

আপনি যদি এটা আপনার নিজের ভাষায় পেতে চান তাহলে অনুগ্রহ করে সঠিক বাক্সে টিক্ চিহ্ন দিন, আপনার নাম ও ঠিকানা লিখুন এবং নিচের বিনা ডাকমাশুলের ঠিকানায় পাঠিয়ে দিন।

Français

French

Pour recevoir ces informations dans votre langue, veuillez inscrire votre nom et adresse et renvoyer ce formulaire à l'adresse ci-dessous. Le port est payé.

Kurmanci

Kurdish

Hek hun vêya bi zimanê xwe dixwazin, ji kerema xwe qutikê îşaret bikin, nav û navnîşana xwe binivîsin û ji navnîşana jêrîn re bi posta bêpere bişînin.

Soomaali

Somali

Haddii aad qoraalkan ku rabto luuqadaada, fadlan sax mari sanduukha, kusoo buuxi magaca iyo ciwaankaaga, kuna soo dir boostada hoose ee lacag la'aanta ah.

Türkçe

Turkish

Bu kitapçığın Türkçesini istiyorsanız lütfen kutuyu işaretleyip, adınızı, soyadınızı ve adresinizi yazarak posta pulu yapıştırmadan aşağıdaki adrese gönderin.

Please indicate if you would like a copy of this letter in another language not listed or any of the following formats and send to the freepost address below.

- | | | | |
|--------------------|--------------------------|---------------|--------------------------|
| • Large print | <input type="checkbox"/> | • On disk | <input type="checkbox"/> |
| • On audio tape | <input type="checkbox"/> | • Braille | <input type="checkbox"/> |
| • Another language | <input type="checkbox"/> | Please state: | _____ |

Name: _____

Address: _____

Freepost RLXS-XZGT-UGRJ, Translation & Interpreting Services,
6 Floor, River Park House, 225 High Road, N22 8HQ

Consultation

Corporate plan priority 2 empowering all adults to live healthy, long and fulfilling lives

Consultation on proposal 3:

Increase the flexibility and availability of day services within the borough



This document:

- Details the need for change to adult social care in Haringey
- Outlines our three consultation proposals
- Informs readers of how you can give us your views
- Explains what happens next

Have your say:

Haringey Council is seeking your views on the proposals to transform the way adult social care is delivered to residents.

We particularly want to hear from the key stakeholders who may be directly affected by the proposals, these include adults who currently use:

- Always Day Centre
- Birkbeck Road Day Centre
- Ermine Road Day Centre
- Grange Day Centre
- Haynes Day Centre
- Linden Road Residential
- Osborne Grove Nursing Home
- The Haven Day Centre
- The Roundway Day Centre
- Families and carers of adults who use the above facilities
- All Haringey residents are encouraged to respond via the Haringey website.

**The consultation period will run from:
Friday 3rd July 2015 to Thursday 1st October 2015**

How can I have my say?

For more information on our proposed changes including Frequently Asked Questions, please visit our website: www.haringey.gov.uk/asc-consultation and then tell us your opinion.

Please note that we may not reply to individual consultation responses however all feedback will be considered as part of the consultation process.

Online

Completing the questionnaire at
www.haringey.gov.uk/asc-consultation

E-mail

Download a copy of the consultation document, complete the consultation document and scan/email it to Priority2enquires@haringey.gov.uk

By Post

Your completed consultation document can be posted to:
Transformation Team
Haringey Council
River Park House
225 High Road
Wood Green
London N22 8HQ

Workshop*

*For adults who use the services detailed within the consultation document, their carers and family members. Individual groups will be contacted directly and supported by independent advocates to respond to the consultation.

The closing date for receiving your consultation response is 1st October 2015

Executive Summary

Cabinet member for Health and Wellbeing: Councillor Morton

Haringey Council is fully committed to:

- Working with service users and their families and carers in the design of services.
- Meeting our statutory responsibilities to continue to provide services that meet the assessed needs of adults.
- Safeguarding adults at risk.

There is significant need for change resulting from the Care Act 2014, as well as the financial pressures which the council faces following the government's changes to local authority funding. In response to the increasing need for change we are proposing to change the way that some parts of the service are currently delivered, to ensure that we are able to reach and fairly support all adults in need of social care and ensure they are given the best opportunity to gain independence.

We will work closer with the community, other service providers and most importantly with the people who use adult social services, to ensure we provide the right help at the right time. We will focus on prevention and early intervention by providing access to high quality information, advice and support to empower all adults to live healthy, long, fulfilling lives; with access to high quality health and social care services when people are assessed as needing them. This new focus will ensure that we deliver the optimum level of support, being flexible and responsive when needs fluctuate.

We understand how valuable our services are to individuals and the differences the services provided have had on families and carers. However, the demand for Adult Social Services is increasing and we are facing significant reductions in budgets following the government's changes to local council funding. To meet these financial challenges and the changes to legislation, we need to transform the delivery of care and support.

I would like to know what you think of the council's proposals outlined in this consultation paper. Please submit your comments before the consultation closes on 1st October 2015. If you have any queries or require further information, please do get in touch.

I look forward to hearing from you.

The need for changes

The future of adult social care in Haringey

The traditional role of adult social care is changing. In the past, adult social services centred around assessing people's care needs and providing services to meet those needs. This remains a very important part of what social workers do, but there is increasing recognition that adult social care must do more to support people before they need care. In an era where our population is ageing, investing in prevention is key to helping more people to stay healthy and live independently for longer - and it means scarce resources can be used more effectively to target those people who need them most.

Making the change from a system that reacts when people need acute help to one that supports more people to remain healthy and independent is not an easy task. It takes time and relies on close cooperation between organisations and individuals in health, social care and the wider community. But the benefits of this change are considerable. In Haringey, it would help to increase people's quality of life; improve people's health and wellbeing; and develop stronger and more resilient communities.

Why do we need to change?

The current model for adult social care in Haringey doesn't do enough to prevent care and support needs escalating, and is unsustainable in the long-term. Last year, for every £3 the council spent, £1 went on adult social care. Without significant change in how social care is delivered, that figure would rise, resulting in difficulties for the Council in delivering other services such as bin collections, libraries and parks.

In Haringey between 2011 - 2013 there was a 5.3 percent increase in residents aged over 65 years. This is great news but there is no doubt that it also places an ever-growing demand on care services. And while demand for services continues to rise, the money available to fund them has reduced. Across the country, there is currently £3.5 billion less in council social care budgets than there was in 2010. This means that there is a pressing need for councils to deliver social care differently.

What do we want to change to?

In Haringey, we want to keep people healthy and living in their own homes and communities for longer. We want to see a greater emphasis on promoting independence, dignity and choice - with care and support shifting away from institutional care towards community and home based support.

There are a number of reasons for this approach:

- Many people have told us they prefer community or home-based support, because it allows them to remain more independent for longer
- Support provided in a community setting or at home is often better tailored to the needs of an individual and their carer
- A focus on prevention and early intervention within the community is more cost effective, and helps to delay and reduce the need for more expensive, longer-term treatment
- This approach will allow us to maximise the impact of our limited resources

To make these changes, we are planning to develop services that prevent and delay people from needing more specialist and intensive care and support.

This will mean an increase in services like supported living housing, which helps people to maintain their independence in a safe and supportive environment. It will also mean development of schemes like Shared Lives - where carers choose to look after people in their own homes - and community-led programmes like Neighbourhoods Connect, which supports local people to participate in social activities and play a more active role in their community.

It will also mean improving the work we do on prevention and early intervention so that more people are equipped with the information and advice they need to look after themselves and others better. This will help to delay and reduce the need for care in many circumstances, help people to remain independent for longer, and build more resilient communities.

Moving to this more sustainable model of adult social care would help us to reduce demand for services provided at traditional care institutions such as day centres and residential homes.

It would also mean that the council would deliver fewer services directly, and would instead commission more services from the independent, community and voluntary sectors.

We know that care can't be approached from a one-size-fits-all perspective, so we'll ensure that specialist care services remain available for people with complex care needs.

The proposals for consultation enable the council to continue to develop care and support which can be delivered within budget resources.

Alternative options considered

Before the Council set its budget a consultation exercise was carried out on a wider set of proposals and savings proposals of £5.7 million set against care packages in Adult Social care was considered but not taken forward.

The Council had also considered increasing Council Tax. It was decided that this was not the right thing to do because government funding rules mean that overall the Council would only get about £600,000 more money if it raised tax by 2%. This would not be enough to make a big difference to the social care budget but would mean that people in Haringey would have to pay more tax which could be difficult for residents.

The Council also considered using its reserves and the Council's Medium Term Financial Strategy does include some use of these reserves. However, the funding reductions are expected to continue for several years and are too high to be fully met from our reserves.

Now that the Council has set its budget, not making the Adult Social Care savings is likely to mean that the overall Council budget could fall into deficit (ie expenditure could exceed its available resources) and this is not permitted.

Legislative changes, demographic pressures and budget challenge mean that to continue to provide care and support in the current manner is unsustainable. The way we currently deliver services cannot meet expected outcomes and will not provide equitable services.

To increase the capacity to develop services run by the council would require more resources. The budget to provide adult social care has been reduced and, as such, there are no further resources therefore alternative ways of delivering services are being considered.

Consultation Proposal:

Proposal 3: Increasing the availability and flexibility of day opportunities within the borough meeting the individual needs of residents.

Background

The Care Act provides that “the local authority must promote the efficient and effective operation of a market in services for meeting care and support needs with a view to ensuring that any person in its area wishing to access services in the market” has a “variety of providers” and “variety of high quality services” to choose from.

Day services provide respite for carers and opportunities for vulnerable adults to be active and socialise during the day. Haringey is continuing to develop new forms of day opportunities and move away from traditional buildings based services, supporting and increasing opportunities in the wider community. Working with the community and other businesses to develop services will promote more flexibility, availability and opportunity.

We are committed to the priorities set out in Valuing People Now, to improve outcomes for people with learning disabilities in employment, housing and health, through person centred approaches and the promotion of personal budgets. All people with learning disabilities have the right to lead their lives like any others, with the same opportunities and responsibilities. The shift from buildings based care

to community led support will enable all adults to make informed choices to enable the best outcome for them.

It is more important than ever that we get the most value from our public spending. Considering social value involves looking at the collective benefit to a community when a service is provided. A social enterprise is an independent business that trades to tackle social problems, improve communities, people’s life chances, or the environment. Social enterprises make their money in the open market; however they reinvest their profits back into the business or the local community, thereby maximising the impact of public expenditure to get the best possible outcomes.

The proposals

It is our proposal to continue to move away from segregated buildings based day opportunities within the borough for people with a learning disability and to continue to develop access to mainstream activities – these include local leisure, educational and employment opportunities. We recognize that people with specific needs will require a building base to support them at particular times and we are proposing to retain the use of Ermine Road centre as part of the delivery of Learning Disability day opportunities in Haringey.

Closure of Roundways, Birkbeck Road and Always day centres that provide day services for adults with learning disability.

Impact

The service at Roundway provides day services for people with learning difficulties, autistic spectrum disorders. People are supported with personal care, communication, social interaction and managing behaviours which can be challenging. The building has a sensory room and people are able to relax and have time out in this room. People access the building as a base as most of the activities are community based such as bowling, swimming, and visiting various places of interest such as museums. The Birkbeck and Always sites provides day services for people with mild to moderate learning disabilities this ranges from people who are independent and require minimal support to people with mobility and communication needs whom require support to access mainstream services. Service users are supported to develop and maximise their potential to access employment, educational and recreational opportunities in the community. The buildings are used as a base and a place where people are able to have social interaction with their peers. Some of the opportunities that people are supported with are travel training to paid or voluntary work placements, support to access college and sports activities. People also access centre based activities such as IT and life skills.

The total number of adults who currently use Roundways, Birbeck Road and Always day centres is 87. Of this number, 37 adults currently receive the day services from the council in addition to 24 hours residential support. This proposal to close day centres would require the reassessment or review of the needs of the centres' current service users and with a view to identifying satisfactory alternative provision to meet assessed needs. Service users will be encouraged to use Personal Budgets to access any support required to meet assessed need. Following the reassessment or review, if, for any reason, there are service users who no longer have an eligible need, we would work closely with the service user to identify appropriate support. In addition, there will be a transition plan that will be sensitive to the needs of those that may be affected by this change, to ensure that any impact is mitigated and the process of change is safely handed.

We will work with residential and supported living providers so that adults, in particular, those with 24 hours residential support, will be supported to directly access alternative services in the community. A new expanded service at Ermine Road day centre would also provide significant support to adults to access day services within the community. This would also mitigate the impact arising from the closures.

Benefits include

The closures would facilitate a new model of day provision that is within the Council's budgetary provision. A wider range of services for a greater volume of people will be available within the community. Greater capacity and flexibility for all adults with a learning disability that have an assessed need for day services.

Delivering a new model of day opportunities for adults with Learning Disabilities from Ermine Road Day Centre, through a social enterprise.

Impact

Ermine Road Day Centre provides day services for vulnerable adults who have severe learning disabilities, complex emotional or behavioural needs, profound multiple learning and physical disabilities. People are supported with personal care, eating, drinking, communication and mobility.

Service users are supported to access a range of activities provided in the community. Some of the opportunities that people are supported with includes outdoor cycling which takes place at Finsbury park and Broadwater farm, Hydrotherapy and leisure activities.

61 adults currently use Ermine Day centre, of this number, 41 adults currently receive day services from Ermine Road day centre in addition to 24 hours residential support. We will work with residential and supported living providers so that adults who currently access these day services but who also have in a place a 24 hour care placement will be supported to directly access day opportunities. This proposal would require a reassessment or review of the care and support needs of service users, with a view to identifying satisfactory alternative provision to meet assessed needs. Service users will be encouraged to use Personal Budgets to access any support required to meet assessed need. Following the reassessment or review, if, for any reason, there are service users who no longer have an eligible need, we would work closely with the service user to identify appropriate support. In addition, there will be a transition plan that will be sensitive to the needs of those that may be affected by this change, to ensure

that any impact is mitigated and the process of change is safely handed.

There will be an expanded day service at Ermine Day Centre that combines the current direct provision with supported signposting to a range of activities provided in the community. The intention is to move away from traditional buildings based services to supporting and increasing opportunities in the wider community. Ermine Road Day Centre will play a crucial part in this new service delivery model. The reach of the service across the community would be far greater than the current provision. The intention is to have in place an inclusive local community resource offering access to creative, therapeutic and social activities. Ermine Road Day Centre would be able to support the service users that currently access Roundways, Birkbeck and Always day centre and who continue to have an assessed need.

The proposal to transfer the service to a social enterprise would have minimal impact on existing carers and service users.

Benefits include

The proposed provision at Ermine Road would be a new expanded provision that would provide support for those with assessed needs from Roundways, Birkbeck Road and Always day centres. The transferred service will increase the availability and flexibility of services within the borough meeting the individual needs of working age adults with a learning disability. It would enable the Council to continue to provide services that is within its budgetary provision.

Close the Grange Day Centre and deliver dementia day services from the Haynes Day Centre through a social enterprise model.

Impact

The Haynes and Grange Day Centres provide a service specifically for older people with a diagnosis of dementia living in Haringey.

Currently 28 people access the Grange Day Centre.

This proposal to close The Grange would require a reassessment or review of the care and support needs of the centre's current service users with a view to identifying satisfactory alternative provision to meet the assessed needs. Service users will be encouraged to use their Personal Budget to access any support required to meet assessed need. Following the reassessment or review, if, for any reason, there are service users who no longer have an eligible need, we would work closely with the service user to identify appropriate support. In addition, there will be a transition plan which could involve support at the Haynes Day Centre and that will be sensitive to the needs of those that may be affected by this change, to ensure that any impact is mitigated and the process of change is safely handed.

The Haynes Day Service is a specifically designed provision for people living with dementia. It has level access throughout and a wide range of rooms that can be used for various activities.

40 people currently access the Haynes Day Centre. The proposal to transfer the service at the Haynes

Day Centre to a social enterprise would have minimal impact on existing carers and service users.

The building in which the Haynes Centre is situated is owned by Community Health Partnership who took it over from the now dissolved Haringey Primary Care Trust. There is an agreement between The Mary Haynes Trust and the Primary Care Trust for the Centre to be used for the provision of day services for older people living with dementia. The proposal to transfer the service to a social enterprise is dependent on Community Health Partnership and The Mary Haynes Trust.

Benefits include

Greater flexibility and options for all service users using their personal budget to access services in the community. Increased economy of scale - more services can be provided with less financial input from the council. The closure would enable the Council to deliver services within its budgetary provision.

Proposal 2 Consultation Questions:

A) To what extent do you support our proposal to close Roundways, Birkbeck Road and Always day centres which provide day services for adults with a learning disability?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

Please tell us the reason for this view:

B) To what extent do you support our proposal to provide a new model of day opportunities from Ermine Road Day Centre through an alternative provider?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

Please tell us the reason for this view:

C) To what extent do you support our proposal to close the Grange Day Centre?

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

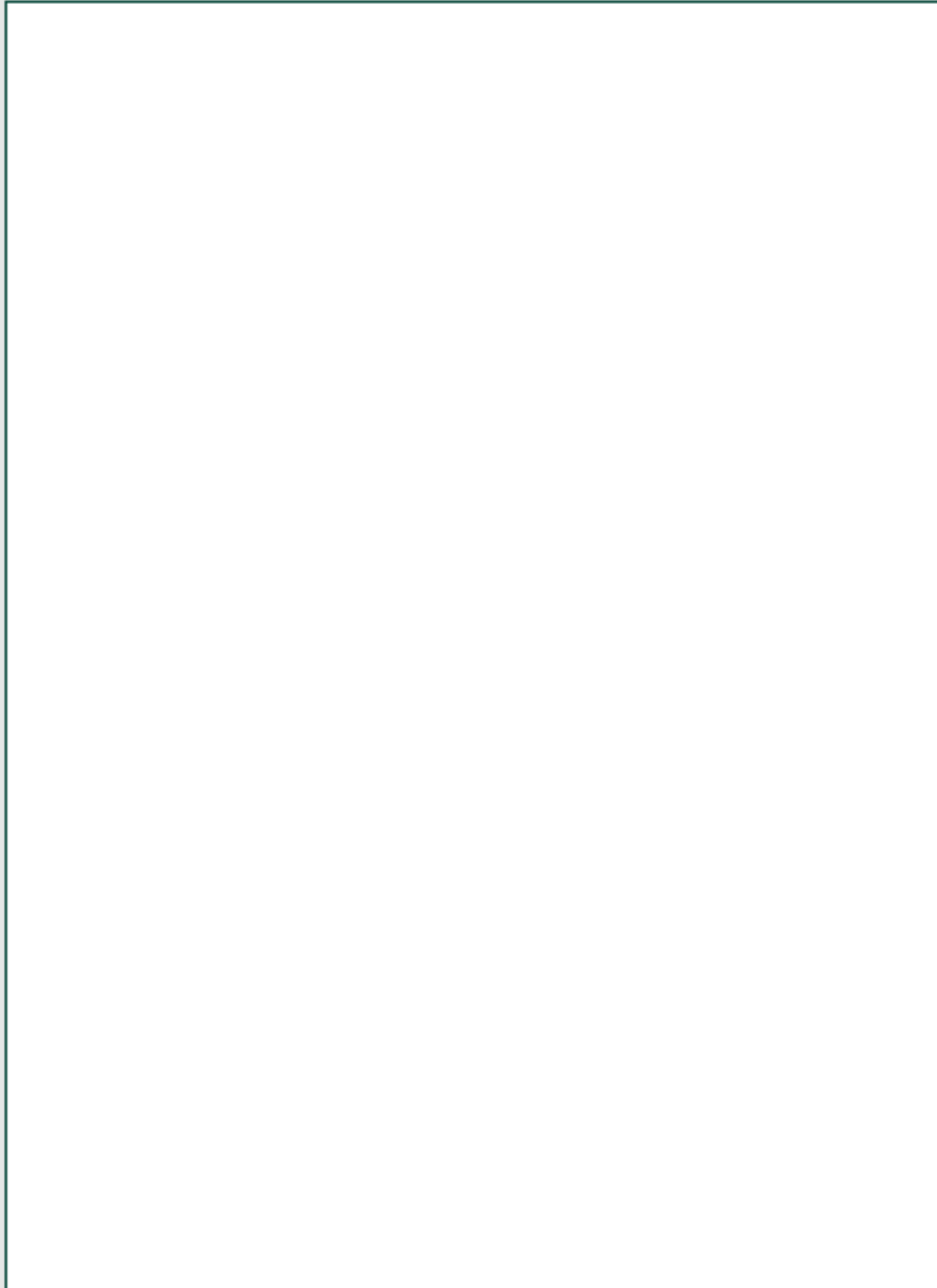
Please tell us the reason for this view:

D) To what extent do you support our proposal to transfer the dementia day opportunities service at the Haynes Day Centre to an external provider.

- Strongly support
- Support
- Neutral
- Do not support
- Strongly do not support

Please tell us the reason for this view:

E] If you have any further comments regarding the proposal to increase the availability and flexibility of day opportunities within the borough meeting the individual needs of residents please tell us below:

A large, empty rectangular box with a thin black border, intended for residents to provide their comments on the proposal. The box is currently blank.

What happens after the consultation?

Action	Date
We will consider your responses to the proposals in the consultation paper.	October 2015
We will prepare report to Council's Cabinet on the outcome of the consultation and with recommendations on the proposals. Cabinet will make a final decision on the proposals.	November 2015
Cabinet decision on the proposals will be published in November 2015 and any further actions required will be published on the Haringey website accordingly.	November/December 2015

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Transformation Team
Haringey Council
River Park House
225 High Road
Wood Green
London
N22 8HQ

It could also be sent by email to Priority2enquires@haringey.gov.uk

About you

Are you:

A Haringey resident:

- Yes No

If yes in which ward do you reside:

- | | | |
|--|---|---|
| <input type="checkbox"/> Alexandra ward | <input type="checkbox"/> Hornsey ward | <input type="checkbox"/> Tottenham Green ward |
| <input type="checkbox"/> Bounds Green ward | <input type="checkbox"/> Muswell Hill ward | <input type="checkbox"/> Tottenham Hale ward |
| <input type="checkbox"/> Bruce Grove ward | <input type="checkbox"/> Noel Park ward | <input type="checkbox"/> West Green ward |
| <input type="checkbox"/> Crouch End ward | <input type="checkbox"/> Northumberland Park ward | <input type="checkbox"/> White Hart Lane ward |
| <input type="checkbox"/> Fortis Green ward | <input type="checkbox"/> St Ann's ward | <input type="checkbox"/> Woodside ward |
| <input type="checkbox"/> Haringay ward | <input type="checkbox"/> Seven Sisters ward | |
| <input type="checkbox"/> Highgate ward | <input type="checkbox"/> Stroud Green ward | |

An adult who currently uses social care

- Yes No

If yes which service do you use:

- | | | |
|--|---|--|
| <input type="checkbox"/> Ermine Road Day Centre | <input type="checkbox"/> The Roundway Day Centre | <input type="checkbox"/> Always Day Centre |
| <input type="checkbox"/> The Haven Day Centre | <input type="checkbox"/> Linden Road Residential | <input type="checkbox"/> Haynes Day Centre |
| <input type="checkbox"/> Osborne Grove Nursing Home | <input type="checkbox"/> Birkbeck Road Day Centre | <input type="checkbox"/> Grange Day Centre |
| <input type="checkbox"/> Other: please specify _____ | | |

A carer/family member of an adult who uses:

- Yes No

If yes which service does she/he use:

- | | | |
|--|---|--|
| <input type="checkbox"/> Ermine Road Day Centre | <input type="checkbox"/> The Roundway Day Centre | <input type="checkbox"/> Always Day Centre |
| <input type="checkbox"/> The Haven Day Centre | <input type="checkbox"/> Linden Road Residential | <input type="checkbox"/> Haynes Day Centre |
| <input type="checkbox"/> Osborne Grove Nursing Home | <input type="checkbox"/> Birkbeck Road Day Centre | <input type="checkbox"/> Grange Day Centre |
| <input type="checkbox"/> Other: please specify _____ | | |

A member of staff?

- Yes No

Other: please specify _____

Please provide details

Equal Opportunities Monitoring Form

The Public Sector Equality Duty does not expressly require the council to collect equality information. However, collecting, analysing and using the information helps us to see how our policies and activities are affecting various sections of our communities. In employment and service provision, it helps us to identify any existing inequalities and where new inequalities may be developing and take action to tackle them.

In addition to the nine "protected characteristics" (Age, Disability Gender Reassignment, Marriage and Civil Partnership, Sex [formerly Gender], Race, Religion or Belief and Sexual Orientation) identified in the Equality Act 2010, we have added categories of Refugees and Asylum Seekers and Language in order to reflect the full diversity of Haringey.

We will be grateful if you could take a little time to complete and return this form. Please go through it and tick all the categories that most accurately describe you.

The information you provide on this form will be held in the strictest confidence and only be used for the purposes stated above.

Age

Please tick one box

- | | | | |
|-----------------------------------|--------------------------------|--------------------------------|--|
| <input type="checkbox"/> Under 18 | <input type="checkbox"/> 30-44 | <input type="checkbox"/> 65-74 | <input type="checkbox"/> 90 and over |
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 45-59 | <input type="checkbox"/> 75-84 | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> 25-29 | <input type="checkbox"/> 60-64 | <input type="checkbox"/> 85-89 | |

Disability

Under the Equality Act 2010, a person is considered to have a disability if she/he has a physical or mental impairment which has a substantial and long-term adverse effect on her/his ability to carry out normal day-to-day activities. Haringey Council accepts the social model of disability. However, in order to be able to identify and respond to your specific needs, it is important that we know what kind of disability you have.

Do you have any of the following conditions which have lasted or are expected to last for at least 12 months?

- | | |
|--|---|
| <input type="checkbox"/> Deafness or partial loss of hearing | <input type="checkbox"/> Long term illness or condition |
| <input type="checkbox"/> Blindness or partial loss of sight | <input type="checkbox"/> Physical disability |
| <input type="checkbox"/> Learning disability | <input type="checkbox"/> Other disabilities |
| <input type="checkbox"/> Developmental disorder | <input type="checkbox"/> No disabilities |
| <input type="checkbox"/> Mental ill health | <input type="checkbox"/> Prefer not to say |

Ethnicity

Please tick the box that best describes your ethnic group

White

- British
 Irish

White Other

- | | |
|--|--|
| <input type="checkbox"/> Greek/Greek Cypriot | <input type="checkbox"/> Turkish/Cypriot |
| <input type="checkbox"/> Turkish | <input type="checkbox"/> Kurdish |
| <input type="checkbox"/> Gypsy/Roma | <input type="checkbox"/> Irish Traveller |
| <input type="checkbox"/> Other, please specify _____ | |

Mixed

- White and Black African
 White and Black Caribbean
 White and Asian
 Other, please specify _____

Asian or Asian British

- Indian
 Bangladeshi
 Pakistani
 East African Asian
 Other, please specify _____

Black or Black British

- African
- Caribbean
- Other please specify _____

Chinese or other ethnic group

- Chinese
- Any other ethnic background

Sex

- Male Female

Gender reassignment

Does your gender differ from your birth sex?

- Yes
- No
- Prefer not to say

Religion

Please tick as appropriate

- Christian
- Hindu
- Muslim
- Sikh
- Prefer not to say
- Jewish
- Rastafarian
- Buddhist
- No Religion
- Other (please specify)

Sexual orientation

Please tick the box that best describes your sexual orientation

- Heterosexual
- Bisexual
- Gay
- Lesbian
- Prefer not to say

Pregnancy and maternity

Please tick one box

Are you pregnant?

- Yes No

Have you had a baby in the last 12 months?

- Yes No

Marriage and Civil Partnership

Please tick one box

- Single Separated
- Married Divorced
- Co-habiting Widowed
- In a same sex civil partnership

Refugees and Asylum Seekers

Are you?

- A Refugee
- An Asylum Seeker

What country or region are you a refugee/asylum seeker from?

Language

Please tick the box that best describes your language

- Albanian Lingala
- Arabic Somali
- English Turkish
- French

Other (please specify): _____

Thank you for completing this form.

If you want this in your own language, please tick the box, fill in your name and address and send to the freepost address below

Shqip

Albanian

Nëse dëshironi ta keni këtë në gjuhën tuaj, ju lutemi vendosni shenjën ✓ në kuti, shënoni emrin dhe adresën tuaj dhe niseni me postë falas në adresën e mëposhtme.

বাংলা

Bengali

আপনি যদি এটা আপনার নিজের ভাষায় পেতে চান তাহলে অনুগ্রহ করে সঠিক বাঙা টিক্ চিহ্ন দিন, আপনার নাম ও ঠিকানা লিখুন এবং নিচের বিনা ডাকমাশুলের ঠিকানায় পাঠিয়ে দিন।

Français

French

Pour recevoir ces informations dans votre langue, veuillez inscrire votre nom et adresse et renvoyer ce formulaire à l'adresse ci-dessous. Le port est payé.

Kurmanci

Kurdish

Hek hun vêya bi zimanê xwe dixwazin, ji kerema xwe qutikê îşaret bikin, nav û navnîşana xwe binivîsin û ji navnîşana jêrîn re bi posta bêpere bişînin.

Soomaali

Somali

Haddii aad qoraalkan ku rabto luuqadaada, fadlan sax mari sanduukha, kusoo buuxi magaca iyo ciwaankaaga, kuna soo dir boostada hoose ee lacag la'aanta ah.

Türkçe

Turkish

Bu kitapçığın Türkçesini istiyorsanız lütfen kutuyu işaretleyip, adınızı, soyadınızı ve adresinizi yazarak posta pulu yapıştırmadan aşağıdaki adrese gönderin.

Please indicate if you would like a copy of this letter in another language not listed or any of the following formats and send to the freepost address below.

- | | | | |
|--------------------|--------------------------|---------------|--------------------------|
| • Large print | <input type="checkbox"/> | • On disk | <input type="checkbox"/> |
| • On audio tape | <input type="checkbox"/> | • Braille | <input type="checkbox"/> |
| • Another language | <input type="checkbox"/> | Please state: | _____ |

Name: _____

Address: _____

Freepost RLXS-XZGT-UGRJ, Translation & Interpreting Services,
6 Floor, River Park House, 225 High Road, N22 8HQ

11224

Adults Social Care Consultation

Haringey Adult Social Services are seeking your views on the proposals to transform the way adult social care is delivered to residents.

Date of consultation:

Friday 3rd July – Thursday 1st October 2015

The proposals relate to three areas:

- **Proposal 1:** Re-ablement services and Intermediate Care
- **Proposal 2:** Supported Living and Shared Lives schemes
- **Proposal 3:** Day Services

Have your say:

For more information on how you can have your say please speak to



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Have your say:

For more information on how you can have your say please visit

www.haringey.gov.uk/asc-consultation





Haringey People



The Adult and Social Care Consultation



We are consulting on three proposals to transform the way adult social care is delivered to residents. Our proposals are built around helping people to remain healthy for as long as possible so that they can live in their own homes and communities for longer. For more information on the proposals and how you can get involved and have your say please visit www.haringey.gov.uk/asc-consultation

Easy Read Version

	<p>Adult social services in Haringey are changing.</p>
	<p>The services will now work towards prevention which means helping people before they need care.</p>
	<p>Health and social care and other groups in the community will be working together.</p>
	<p>There are 2 main reasons why we need to change</p>
	<p>Spending Cuts mean there is less money.</p>

	<p>People living longer means higher demand for care services.</p>
	<p>What will happen</p>
	<p>We will help people to stay in their homes for longer.</p>
	<p>There will be more community or home-based care and less care provided directly by the council.</p>
 <p>SharedLivesPlus <small>THE UK NETWORK FOR SMALL COMMUNITY SERVICES</small></p>	<p>The Council will spend more on prevention schemes such as:</p> <ul style="list-style-type: none"> • Supported living • Shared Lives
	<p>Specialist care will remain for those with complex needs.</p>

	<p>Consultation of service users</p>
	<p>There are some changes for you to look at.</p>
	<p>You can give your views about the proposals in writing or online.</p>
	<p>There will also be workshops for service users and carers to have their views. These will be assisted by advocates.</p>
	<p>Consultation period is from July to September</p>

	Change 2
	Increasing the amount of suitable accommodation
	What will change
	Part A
	Closure of Linden House as a residential home
	There are 5 service users at Linden House
<p>assessment</p> 	All 5 service users will be assessed

personal budget



People can then decide the care they want to purchase with their personal budgets.




Part B

SharedLivesPlus

THE UK NETWORK FOR SMALL COMMUNITY SERVICES




Change Shared Lives service to a social enterprise model

	Change 3
	Change 3 is about increasing availability and flexibility of day opportunities
	What will change
	Part A
	<p>Closure of</p> <ul style="list-style-type: none"> • Roundways • Birkbeck Road • Always day centre
 <p>87 </p>	<p>The total number of adults who currently use Roundways, Birbeck Road and Always day centres is 87.</p>



The total number of adults who currently use Ermine Road Day Centre is 61.

61 



We want Ermine Road Day Centre to change to a social enterprise.






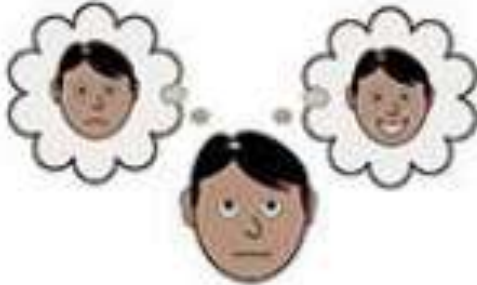

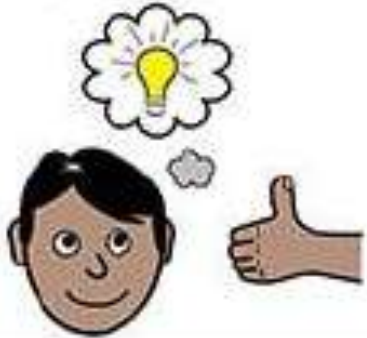
All 148 service users will be assessed

personal budget



People can decide the care they want to purchase with their personal budgets.

	<p>Do you support our proposal to provide more accommodation options through expanding Supported Living Accommodation and Shared Lives schemes</p> <ul style="list-style-type: none"> • Strongly support • Support • Neutral • Do not support • Strongly do not support
	<p>Do you support our proposal to close Linden Road Residential Home</p> <ul style="list-style-type: none"> • Strongly support • Support • Neutral • Do not support • Strongly do not support
	<p>Do you support our proposal to transfer the Shared Lives service to a social enterprise</p> <ul style="list-style-type: none"> • Strongly support • Support • Neutral • Do not support • Strongly do not support

	<p>Do you support our proposal to close Roundways, Birbeck Road and Always day centres which provide day services for adults with a learning disability</p> <ul style="list-style-type: none"> • Strongly support • Support • Neutral • Do not support • Strongly do not support
	<p>Do you support our proposal to provide a new model of day opportunities from Ermine Road Day Centre through an alternative provider</p> <ul style="list-style-type: none"> • Strongly support • Support • Neutral • Do not support • Strongly do not support
<p>good ideas</p> 	<p>Please tell us your ideas to improve the service.</p>

Frequently Asked Questions – Public consultation

Q1: What do you mean by prevention and early intervention?

A: Where possible we want to work with local communities to stop problems escalating or deal with them at the earliest point possible.

Prevention is having systems and support in place in particular within the community which prevent people needing more intensive forms of care and support.

Early intervention is when care and support is provided at the earliest possible opportunity so that it may prevent or delay a person from becoming dependent on more intensive forms of care and support.

Q2: What is re-ablement – is it suitable for everyone?

A: Re-ablement services help people with poor physical or mental health to adjust to their illness by learning or re-learning the skills necessary for daily living. The Re-ablement Service works closely with an individual for up to six weeks to build up skills, confidence and increases the opportunity for people to care for themselves. This tailored support allows the individual to regain independence and stay in their own home for longer.

Re-ablement has been successful for a number of years in helping people to maintain, or regain, their independence. Haringey already has a re-ablement team whose focus over the last few years has mainly been on adults that are discharged from hospital. We want to expand the availability of that service to give people the opportunity to remain in their communities for as long as possible and **to reduce people's need for additional ongoing care.**

Re-ablement is not suitable for everyone, it doesn't usually extend to those with complex needs as it is recognised that they do not necessarily benefit from that time limited intensive service.

Q3: What is enablement – is it the same as re-ablement?

A: Enablement, which is different from re-ablement, is the approach taken with younger adults. Enablement is usually longer term than reablement and directed to younger adults with mental health, physical, and or learning disabilities, including autism. It involves developing life skills so that people can engage safely in aspects of community life, and to develop goals to improve health and quality of life. There will be no changes to our current enablement programme as part of these plans.

Q4: What is going to happen to vulnerable people with a learning disability if proposals to cut services and close day centres go ahead?

A: We recognise that there are people with complex needs who require specialist services that includes autism-specific support, which is why we are proposing to retain the purpose built day centre at Ermine Road. The council has a statutory duty to meet the needs of all people who require adult social care services– that will not change under these proposals.

Q5: What 'alternative provider' will the council consider to deliver adult social care?

A: The council are considering a range of options to provide services to adults assessed as requiring social care.

In some cases it may be favourable for services to be delivered by an alternative provider. Before deciding to appoint an alternative provider we will carry out a range of checks to ensure that they will be able to deliver services to high standards. For example we will ensure that they have a strong safeguarding policy, they provide staff training and they have good mechanisms for listening to feedback and dealing with complaints.

For the continuation and/or provision of services, we will only consider organisations from the:

National Health Service
Independent Sector
Community Sector
Voluntary Sector

Q6: What is a social enterprise – what are the benefits of transferring to a social enterprise?

A: A social enterprise is an independent business that has social, charitable or community-based objectives. They come in many shapes and sizes from large national and international businesses to small community based enterprises.

The benefits of providing a service through a social enterprise include that they are specifically set up to make a difference to further their social mission within the community. They generate their income through the selling of goods and services, and reinvest all surpluses into the social mission within the community.

Q7: Who will decide who gets a place at the new day service (Haynes and Ermine Road)?

A: Allocation of “places” would depend on the criteria for the new services and also on an assessment of the needs of the individual.

Q8: Who will be carrying out the reassessments of service users?

A: Re assessments or reviews could be carried out by social care staff. People who use the services have the opportunity to have an independent advocate present at their re assessment or review.

Q9: Are you reviewing to reduce services?

A: No. Haringey is not reviewing to reduce services overall. It does need to be recognised, however **that individual's needs change and some people** might need more support while others need less delivered within a wider range of options than currently exists.

Q10: Will service users be able to afford the new day opportunities models (Haynes and Ermine Road) with their personal budgets?

A: Individuals who decide to have personal budgets are allocated an amount of money that is based on their “assessed eligible needs”. They then choose how to spend that money to meet these needs. That could include attending a day service.

Q11: Will the costs to the service user change with a social enterprise?

A: People who use the services only pay what they can afford to pay following a financial assessment. That does not change.

Q12: What alternatives are there to day centres?

A: We are going to be working alongside users, carers and other stakeholders to set out the alternatives to day centres. Our thinking at this stage, is that there will be an offer of day opportunities, which would look different for different people, and offer more flexibility than the current model.

The sorts of things users and carers have mentioned as being important to them in day centres are making friends and reducing isolation; giving carers a break; offering routine and a welcoming place; getting them out of the house to do something different; building confidence to do more for themselves. We would want to build these into the alternatives to day centres.

As noted above, we are considering alternative providers to deliver day opportunities in the future in the borough. These providers may include voluntary and community sector organisations, parts of the National Health Service and agencies in the independent sector. Provision may also be delivered through other council services or through provision such as further education establishments offering relevant activities.

Q13: What does 'community opportunities' mean?

A: Community opportunities are those services which already exist in the community but which people may not know about and are in place or may not know how to access. For example, these could include community centres, day services provided by other organisations, adult learning, peer support groups, exercise and leisure provision.

Q14: What will the Council's relationship with the new provider be?

A: The Council will have a commissioning relationship with the new provider. This means that we will specify the service which we want to be provided and the new provider will deliver the service in line with that specification. We will monitor the provider to make sure that they are doing what they said they would do and that it is of a high quality.

There are two broad options for how we may select the new provider. The first is for a social enterprise to be created by staff teams creating their own organisation, which we would then commission. This is known as a mutual – an organisation owned by its staff and formed by the workforce previously delivering the service for the Council.

The second is through a tendering process – that is, we will ask providers to set out how they would deliver the service and how much it would cost. We would then look at all the different bids and evaluate the best – we want to do this with some users and carers so that their views are part of the decision. Once we have selected the provider, we will work with them to put in place the new service, making sure that there is a smooth handover from existing services.

Q15: What are Haringey's responsibilities on the quality of the new provider?

A: As part of the tendering process outlined very briefly above, we will be testing the quality of the bidders and asking questions about their previous work and how they would provide a quality service.

We will monitor the service and we will be listening to the views of users and carers about how the service feels to them and whether it is a good one. We will be responding to complaints and issues and making sure that the provider is acting to make things better where quality is not being delivered.

Q16: Will the existing Haringey staff be retained by the social enterprise?

A: The employment of existing staff by a new provider is be covered by employment law, which governs whether staff will be offered the opportunity to move across to the new provider or offered alternatives, depending on the specific circumstances of the situation.

We are not in a position to state whether staff would be retained or not at this stage.

Q17: Will the alternative providers have to pay a London living wage – will it be factored into the contract?

A: The Council will always seek to fund to a level to include the London Living Wage into any new contracts. However, we are not in a position to commit to this at this stage for these services as we do not yet know how the new service would be structured and how payments would be made. We also need to factor in the savings which are one of the drivers for these changes.

LITERAL RESPONSES

Responses on the Consultation – Proposal 1

Question A

Proposal 1: To increase the council's capacity to deliver re-ablement and intermediate care services

A) Do you support our proposal to close the Haven day centre?

- There are many older people in Haringey who are very frail or disabled. The support the Haven gives is very often the amount they need to remain living at home. It provides physical and emotional support to enable some independence and inclusivity.
- Closing this day centre will increase the social isolation of older people and their carers which is known to increase risk of mental health issues and physical health admissions. Day centers PREVENT older people needing residential care.
- Day centres (specifically the Haynes Centre for us) have quite literally saved my family and I am sure the Grange does the same for families in tottenham. They provide crucial respite for families. Safe and familiar environments for vulnerable people who can become very distressed and depressed when presented with change and unfamiliarity. These centres are stimulating and I know clients and staff form important professional and caring relationships. We care for my Mother at home (as well as looking after two children under 4). If we did not have respite, where my Mother was out of the house for significant periods (somewhere she knows and feels safe with people she knows and feels safe with), to give us and/or carers a break then she would have to be living in a residential home. We want to continue to care for my Mother at home but without the Haynes Centre could not continue to do this. It would be detrimental to my own, my Mother's and my children health and wellbeing!
- Although my mother refuses to attend day centres, my late father did attend and this gave him a 'purpose'.
- The Haven day centre provides an excellent service to a group of people who would otherwise be at high risk of isolation and deteriorating mental health. Having a secure placement at the Haven has enormous benefits for them. Many of these residents will be unable to make alternative arrangements for themselves and are extremely vulnerable.
- This proposal goes against the ethos of community care and supporting individuals to live at home as there does not appear to be a replacement service.
- There are not many services available in Haringey of this nature. You will be withdrawing a valuable service which many people rely on.

- My mother's life has been enriched by attending the centre for the past three years. Before her placement there she was suffering from depression brought on by loneliness and anxiety. The staff have provided excellent care for my mother and she looks forward to attending the centre on Tuesdays & Wednesdays. My mother constantly retells stories of her days at "the club" & she now finds enjoyment in life. My mother has began to sew knit & practice other handcrafts since attending the Haven all which keep her physically & mentally active.
- I have been really happy since I started going to the Haven Day Centre. I have made a lot of friends there and really look forward to going there. If you close the centre down what am I going to do in the future? I will have nowhere to go anymore.
- The Haven Centre is good for my sister to spend a day there. She has more confidence and has made a lot of friends. As I am over seventy it gives me a day to myself.
- Although the keeping of a vulnerable person at home is a positive aim , there is still a need to ensure that there is robust communication with other people and access to services . I looked after both of my parents at home but there lives would have been very isolated except for the fact that they had a huge extended family to visit etc.
- Personally I cannot see this working out for those who have loved ones attending the Haven. They get personal treatment if an external providers s used, the neglect will be greater. Also the trust and confidence of the service users will have to be rebuilt all over again that could have an impact on those suffering from dementia etc will have difficulty settling down.
- I am a user of the service and feel very sad about your proposal to close the Haven. We have built our trust and confidence in the staff and to begin again at my age will be very stressful
- My father has really come out of his shell since going there. He loves having a laugh and talking and help others if possible. He used to sit in his studio apartment and never go out or see people or talk to. He would go back to being a recluse. My dad was saying he was eating but for.
- To lose this service would cause confusion and a great lose to the users, who reply on it for their weekly social interactive. This is the only time that many of the service users get out. Since attending the centre there has been less incidents of disorientation and walking away from home and not returning also sleeping outside and fearing to go home.
- The Haven supports people who have significant care needs and almost always suffer with a progressive neurodegenerative disorder. Re-ablement and home care would not be an appropriate substitute for the care these people receive at the day centre. This would need to be in addition to day care.
- Because more help is needed for those who are lacking support from elsewhere in their lives.

- Not possible to answer without clear details as to what you plan to put in place to replace what it provides
- I believe that the Haven Day centre is a unit where Adults with learning disabilities or Elderly can spend a quality time and a day that has a meaning in their life, full with support and activities. I understand that with the financial climate , all we need is to downsize and reduce Staff and resources but not to shut down completely the Unit.
- I don't know ten ought about the day centre to be able to comment
- Yes, I'm kind of behind this so long as your reason is, as you say, for supporting more people to live independently and is aimed at preemptive care. I suspect you also want to convert the property into residential housing but that's another matter. I'm more concerned with addressing loneliness. I can tell there are alot of alienated lonely people in Haringey in their 30s & 40s who are thirsty for some sort of safe zone of interaction with the people around them. These people are very depressed because Haringey, especially Tottenham, is an unprepossessing, grimey place with horrible pavements and little in the way of green spaces or approachable restaurants or pubs. These are the people who will be a burden to your adult services in future if you don't take care of them. They are truly depressed even though they have jobs, a home and are middle class. They go outside Tottenham to spend their money as the place is embarassing to be in.
- I don't support the closing of the haven day centre. Because some service user don't have family are friend to visited them at home. S/user go to the day centre to play game and interact with the other s/ and don't feeling isolated.
-
- Not clear how this will increase capacity to deliver services
- I work with reablement and people I look after go to the heaven
- I do not know about Haven daty centre
- It is important that every individual is given the opportunity/the right to live an
- independent life where possible, anything which enables this must be supported.
- The day centres are a vital lifeline for hundreds of the most vulnerable people in Haringey and that they must stay open!
- The alternatives are not acceptable
- We have neighbours with autistic dependents who strongly rely on these services. The quality of life for both the autistic dependees and their carers has no replacement and losing this will significantly decrease the quality of their lives
- Vital services, needed by people.

- I know that there will be residents of Haringey and their close families who regard this as a lifeline. These people's carers will crack under the additional pressure put on them to look after their loved ones with no respite. This will cause additional costs to the borough in terms of mental health and health issues and ultimately carers refusing to care for their loved ones.
- It is a socialising essential element and provides respite for carers
- People get support from meeting and talking to other people who are also attempting to achieve re-ablement. Being at home alone is not good.
- Some of your 'proposals' sound worthy but you provide absolutely no details of what services would be like in reality. This makes such a consultation meaningless. Comparing the actual services now to your few vague sentences does not pass for proper consultation. What a pity that the Council is using much needed money on such a poorly conducted exercise. This gives the strong impression that the Council is not genuinely interested in participants views but rather simply wants to tick the box that a consultation has been carried out.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- Day Centres are an essential part of helping people stay at least partly independent in their own homes. they improve morale and decrease isolation
- Social care of people is a complex set of actions and the "ablement", as you call, is in fact facilitated by Day Centres such as Haven. Its closure would mark a departure from support for people who fight for their independence. Such centres are places/spaces which provide "safe" environments for some people: not all agreed. But the removal of the Haven as a cornerstone to care, whilst being fiscally significant, cannot support the the people who need it to make their steps into the community.
- Day centres are part of comprehensive community provision which makes it possible for people to remain living in their neighbourhoods and own homes for much longer..... WHY IS THIS QUESTIONNAIRE USING AMERICAN SPELLING??
- many families need a predictable break from caring; home carers cannot be as reliable as a team of staff at a centre
- This service is essential to meet the needs of vulnerable people
- I am not a user now buty I can see a time when I will be. Please keep it open for me.

- Where are the disabled supposed to go or are then meant to be trapped in their homes without care.
- Social contact and reliable, structured care are, for many, preferable to the isolation at home, with the uncertainty about when a care provider may call
- The day centre is an invaluable resource for the people who need it
- It will have a hugely detrimental effect on the lives of the vulnerable people who use it.
- I do not believe in the policy of closures of centres at all.
- professional support and activities specific for users, and respite for carers.
- There are insufficient alternatives
- It is a vital provision in the Borough
- We need it open to support the users
- People make friends and socialise at day centres this promotes their emotional wellbeing . as proved by closure of elders day care people die become depressed. Onus on family to care 24/7 . not a healthy option.
- this would put a lot pressure on the carer which may cost more money instead of looking after one person the council may have to look after two people because of the pressure to cope without much of a break
- In the last 15 years of working in the community I have seen day services slashed and increasingly vulnerable adults with less secure environments to spend time. Increasingly I have seen an increase of vulnerable adults just wandering the streets of Haringey with very little to do closures in Tottenham for mental health as well as reduced services example at Canning Crescent, St Ann's Hospital and Mind day services.
- If the centre is lost there will no longer be a physical place for these people to meet on and be supported on a regular basis
- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from
- There are not the resources currently to support people with severe disability to access the community and participate in activities. The rhetoric is good in practice it does not happen.

- The day care centre provides a safe environment for vulnerable people to meet and engage with others. Viable affordable alternatives need to be in place before shutting down services.
- I have spoken to the people who use it and value it greatly, they don't want to see it closed
- It provides essential services to vulnerable people.
- The services are essential
- The council is pushing through shameless cuts to services that are necessary to the most vulnerable people.
- The policy explicitly states that the aim is to keep people in their own homes where possible. This will not be possible in all cases. Some clients - vulnerable people - who will need full residential care. For other people the day centre is precisely what can keep them in their homes. A day centre provides an efficient effective way to meet the needs of a range of people together. Two key advantages. 1) social - it provides a social focus for clients helping to prevent isolation in their homes. 2) efficiency - services can be centralised at the centre, group services and assisting activities can be arranged which would have to be replicated for each individual alone in their home. It is simply plain wrong, illogical and immoral to equate the desire for people to stay in their homes with closing day care centres. I would be very interested to see how the finances actually work - unless of course the plan is this based upon selling the current centre to private developers? In which case, the authors of this plan are not fit for their jobs.
- Closing centers takes away peoples social interaction.
- Because its my only means of socialising. If not for the club I am totally House bound.
- You are taken away a very important and needed community care facility
- Although closing the Haven Day Centre may reduce the economical expenditure, it may not be in favour for current users who would have the review of care and needs. This may results in reducing the number of users when they are found to be unqualifying to use the Day Centre
- My father enjoys going out and meeting with people every day and the centre is just an ideal place for him. the staff are very good and well trained.
- Day centre facilities provide a vital element of respite care as well as entertainment and sociability for users. I don't believe the Council can't afford to keep them - over £80k spent on a new logo, and wasteful use of consultants for many consultations as well as social care service functions, suggests pruning could take place elsewhere.

- This is attacking the most vulnerable and their families. There is no justification for this.
- Provides essential keeping well services
- I do not support the closer of the Haven Day Center. My reasons are that over the year's I've met many of its user's that enjoy spending a day or an afternoon at the centre. The Haven is at the hub of the community and gives its user's a sense of belonging to the community.
- No detailed proposal on what will replace the closed day centres. No assessment of the long term human and financial impact of closures. Greater reliance on carers to care for adult users at home. No justification for assertions that service will not be impacted by the shift to a social enterprise model. No appreciation that these services are preventative and are much less costly in the long run. They keep the carers as well as the service users healthier for longer.
- No detailed proposal on what will replace the closed day centres. No assessment of the long term human and financial impact of closures. Greater reliance on carers to care for adult users at home. No justification for assertions that service will not be impacted by the shift to a social enterprise model. No appreciation that these services are preventative and are much less costly in the long run. They keep the carers as well as the service users healthier for longer.
- Re-ablement is fine as far as it goes, but the most isolated people are often most vulnerable and need places to go where they can get peer support. Isolation is a killer, close everything and you lose the choice which helps prevent people getting worse and losing independence.
- What on earth is re-ablement? There is no credible argument whatsoever in the proposals for how this improves or even maintains the current level of service.
- People with long term degenerative diseases such as dementia can become unable to live independently. Their families and carers need outside help to relieve their responsibilities
- **The EqIA dated June 2015 for the Haven Day Centre states that: “The Haven Day Centre provides day services for adults over 65 years old, limited to 24 people per day, provides day opportunities to 53 Haringey residents. Service users of the Haven have a physical frailty or sensory impairment and/or require support with memory and cognition conditions (i.e.dementia, possibly up to 50%, some more advanced than moderate as they continued to attend the Haven despite the disease progressing – my addition and estimate). Over 50% of service users are aged 80 years or over and may pose a particular risk in identifying alternative options within the community. 71.7% of the Haven's service users have a physical or sensory impairment which may impact on the alternative activities and locations that they can access within the community. We will work with service users and providers of community services to ensure suitable availability for adults 80 years and above and people with physical and sensory impairment. .. Service users will be encouraged to use Personal Budgets to access any support required to meet assessed need. There is insufficient data on carers although it is acknowledged**

that they will be impacted by the changes as well as the service users. I strongly object to the proposed closure of Haven on the following grounds: 1. As the EqlA intimates, and as we were advised since 2011, many users of the Haven have dementia. As dementia is degenerative, and as alternative provision is not available due to waiting lists at the Grange and the Haynes specialist dementia day centres, some service users are well beyond the moderate dementia. The proposed closure of the Haven together with the proposed closure of the Grange Dementia Day Care Centre would put a huge pressure on the specialist dementia service provided at the Haynes Day Care Centre. 2. The Council recognises that there are people with complex needs who require specialist services. People with dementia with a degenerative condition are in such a group requiring specialist services. Further demographic projections indicate that their numbers would rise significantly increasing demand for such specialist services. 3. If the Haynes becomes the sole day centre for dementia and, as it is very likely, if after reassessment very few users are found to have reduced level of needs, damaging service reductions would be imposed on many people with dementia and their carers contrary to their needs. 4. Where access to comparable support is not available and/or not secured the carers not only lose the limited respite they get, they would have to take on more responsibilities to fill the gap created by the closures and service changes. 5. As the above descriptions of service users indicate most will not have the capacity to manage their budgets or accessing support, they would have to rely on their carers. This would be an additional burden on the carers. 6. Currently all day centres provide transport. Accessing alternative provision, even if they are available, would not be possible without transport provision leading to social isolation and loneliness both for the service users and their carers impacting their health and wellbeing. 7. These impacts are contrary to Haringey's Corporate Plan Priority 2 Objectives, to Government policies as they are contained in the National Dementia Strategy, The Care Act and the NICE guidelines. Furthermore I object on the grounds that: 1. The Council promised that "Where major changes to service users are proposed after budget setting, detailed plans will come forward and decisions will only be made after much more detailed consultation" (Para 7.1.4 of Item No 819 of 10 February 2015 Cabinet). This was reiterated by the EqlA produced to support the proposals. The consultation on proposed closures and service changes, and the subsequent co-design process, were completely inadequate and would not meet the minimum requirements for a statutory consultation. No information on the type, shape and quantity of alternative or future provision, no information on the level of need, no information on timescales for change are provided by the Council. 2. The Council's proposals rely on new untested and/or yet to be defined or developed new models of services. The Council provided no evidence that these new models would meet the current needs let alone the future demand. Although there is no objection to providing a wider range of services, it is very important that they are be in place, proven to meet current needs and proven to have the potential to meet future demand before closures are considered if adequate support to the service users and their carers are to be secured. 3. The people with dementia need continuity, routine, stimulation in familiar surroundings supported by trained expert familiar staff if needs for more costly services are to be delayed. Specialist day centres play an important preventative role helping with their wellbeing and continuing to stay at home longer. This cannot be achieved with the proposed

closures and service changes. 4. It is important to acknowledge that service users with dementia or complex needs who attend day care centres are at home the rest of the time. Without day centres they would be isolated and their health and care would be compromised.

- this is a vital service that is needed by those most in need living in the borough. this will have on a knock on effect to other statutory services if people are not able to access what is making there lives more amenable and rewarding. community will be degraded. where will the service users spend their days. haringey councils actions are abhorrent.
- The intention to support people at home is good but it could result in an exercise in hiding and neglecting problematic situation via isolation and lack of accountability. There are a diversity of phases in the process of ageing and the managment of chronic conditions that might require residential care at some point.
- It is an amazing service that supports a Dear friend and relieves his wife for a short time per week at a so needed time.
- This is an excellent service used by those very close to me. It is a lifeline for carers and instilled in them and importantly those they care for a sense of security and reliability. Dementia is a growing and debilitating condition for all those involved and more funds should be available to develop this excellent facility. It would save ,only in the long run. It is a tried and tested service and one of which we should be proud to keep.
- Whilst there is evidence that reablement can enable people with short-term physical impairments to live more independent lives, reablement will not help people with long-term conditions such as dementia and autism. The Council is exaggerating the cost savings it claims for reablement in closing the Haven as a daycentre.
- We object to the proposal to close The Haven. We do not believe that satisfactory alternative provision will be available, and that even if it exists, it is unlikely to meet **people's needs to the same extent as this service**. The consultation document states that **“following the re assessment or review, if, for any reason, there are service users who no longer have an eligible need, we would work closely with the service user to identify appropriate support.”** This creates a serious concern that there is the intent to review or assess people in such a way that they are no longer deemed eligible for services, despite the fact that their needs have not changed. This would be unacceptable, and it is likely that it would breach the Care Act. There is mention of Neighbourhood Connects being used to support current service users of the day centre. It is unclear what Neighbourhood Connects would offer to them, and it certainly would not provide them with the input and support that they receive at the Haven. From the information that is available about Neighbourhood Connects, it appears that it offers opportunities for people to interact with each other, take part in activities, volunteer, etc. Whilst this is positive, it is clearly **not a social care service that can meet people's assessed needs, and it should not be presented as such**. Projects such as this should be in addition to council services; they cannot be a replacement for them. The closure is likely to

have a devastating impact on both service users and their families; the former may be left isolated and unoccupied, and latter may not be able to cope with any caring responsibilities they have.

- My husband currently attends the day centre and this has helped him to socialise with other members of the community. It allows him to get out of the house which he is sometimes reluctant to do but with the assistance of the team who come to pick him up encourage him to do so. It gives him the opportunity to have some independence and confidence in the activities that he does at the centre. He enjoys the day trips that they have and gives me some respite, as it is difficult to look after him constantly and gives me the opportunity to do things when he attends the day centre.
- The Haven is a life-line for clients to socialise/interact with other people, partake in activities and carers to have essential time-out / a break in order to do necessary things - work, run households, shopping, etc.
- I feel there are not enough services as it is, and shutting down a day care is not a solution. The trouble I have had with my upstairs neighbour who requires social care goes to show what happens when there is a lack of services (flooding and setting a fire in her flat for example)
- I believe that for some people, it is necessary to get out from their homes and mix with others in a safe environment. They can socialise with others and maybe take part in outings or exercise classes that they may not normally do.
- It would do a lot to me because I'm living on my own and I would miss the company during the day and because I cannot walk very far. I would have to stay in the house all day on my own. I would feel very isolated as I have made many friends here. I enjoy the days at the centres because we do activities and go out into the community on trips like going to restaurants and pub lunches. I feel my health would deteriorate if the centre closed as I would cry day and night if I had no where to go.
- I do not believe closing already busy day care centres is beneficial for residents. This centre provides valuable relief time for carers whos lives are burdened by illness of their relatives. I do not believe you have laid out a suitable alternative to the services offered by this center and fear closing it may result in hardships for members of the borough.
- My experience is that there is inadequate support for people to live independently at home.

Responses on the Consultation – Proposal 1

Question B

Proposal 1: To increase the council's capacity to deliver re-ablement and intermediate care services

B) To what extent do you support our proposal to transfer the internal re-ablement service to an external provider?

- From my experience of managing these services council and NHS staff have the skills and motivation to truly reable people so that they can manage with less support. The staff are motivated to reduce services. Independent providers require active incentives to achieve the same reduction in provision and signposting to other community support.
- I believe this will reduce standards and make it profit driven. Care should be provided by the local authority!
- I don't know what this means!
- I believe the best standards can only be guaranteed by direct management by the local authority.
- Some providers go through the motion of providing care, not even having the decency to say hello to the person they are supposedly caring for.
- The internal re-ablement service supports a large number of residents providing a first class service, they ensure the resident is at the heart of the service. I believe this should be built upon rather than transfer to an external provider who will not have the same commitment to Haringey residents.
- Transferring to an external provider means increased costs, often different staffing and less services.
- I know from past experience that when the local authority outsource provision it inevitably ends up costing more.
- I am happy for the Haven Day Centre to stay open forever
- There is no robust evidence that services delivered by external providers are any more effective than in house provision.
- As mentioned above the work carried out by Haven staff now will deteriorate. and it will cause a lot of problems for the carers to deal with. I cannot foresee the external Provider supporting us in anyway they will be too busy dealing with issues and no regard or concern for us.

- I am not in favour of an external provider what makes you think that you transfer will work? I cannot see this working with the users now perhaps with new users but not us.
- I know people who have carers to their home who eventually do or if they turn up do practically nothing. Stay 10 minutes and go. Dad is a very private person. Not good having people come one day not the next or different people. Or steal from you. Haven Centre are the only people I have seen that do a proper job. They care and really look after them.
- I fear that the service which we will receive would not be as good as what they are getting now.
- Privatisation of services will change funding and availability to the community, making it an unfair process.
- In-house provision is always a more robust service than the private and voluntary sector where organisations can close overnight to the detriment of service users. Workers are generally better treated by LA than in the private sector and this in turn means they provide a better service. LA are generally more thorough as to who they appoint as paid carers.
- I was a carer for my husband and found that agency staff were not that good and there is no commitment from them
- In fact, I work in the re-ablement service and transferring this service to an external provider is not the way to give quality service to the Community, so far we have provided high quality service with dedicated and highly trained Care workers
- It would depend on the external provider. Some are too profit driven
- Because preemptive care is a sensible, win-win approach to lessening the burden of cost and resource on the council.
- Do not support a financially motivated provider to deliver reablement as there is no financial incentive for packages of care to be reduced. In-house is flexible to the needs of people to receive their full allocation of time and longer particularly at the early stages of the programme. In-house reablement has very strong links with the reablement therapists and reablement assessors providing people in receipt of reablement a seamless programme. The skilled and experienced reablement staff who have been working in reablement for over 3.5 years and have developed the mind set of a reablement approach, not an easy task transferring from traditional care.
- The Reablement in-house service provides a client-centered and non-profit making service. CRS provide an excellent service and work closely with social workers, Occupational Therapists, Physiotherapists and other departments to ensure that s/u's get the most out of this service. CRS workers are trained to a high standard and have over 3 years of reablement experience (not a homecare approach to work). They give regular weekly/daily feedback (when required) and take a flexible approach to work. Service Users who do not meet the reablement criteria are identified early on and appropriate action is taken (e.g. moved to agency or services not required - independent). I feel that if this service is moved to an external provider the above would change. Agencies are profit-making and may not always report back immediately if a s/u's situation changes. Also I'm not sure if the carers have the

amount of experience and training which the internal staff have. An agency employs 100s of staff so i'm not sure how they will manage with regular supervisions, on-going training and observations.

- We have developed a high quality reablement service with well trained and experienced staff. We work closely with the therapist team, social workers and other professionals. The service is monitored closely and any issue raised are dealt with immediately. Feedback received from the service users during the end of service survey proves that the service is doing very well.
- I'm working for Haringey in the community for ten years. Service users are happy with the quality of care we provided in their own home. Service user complaint that they are not going to the agency. Some have had bad experience some said they feel rushed. Service user said the council Reablement workers are patient and polite and they are treated with respect and dignity.
- Less opportunity to monitor the quality of service provided and ensure appropriate standards are maintained.
- As a reablement worker I have worked with many service users who have benefited from it and are very happy because they became independent again through the services provided.
- I support if services will be better and monitored by Haringey council
- It has been my experience that once these services are given to external providers they lessen the impact as profit margins tend to come into play
- This will lead to more of the money going to private profits and less to the services. There's no way that fact can be avoided. The Council will be taking from the vulnerable and giving to businessmen.
- It's about saving money not decent care for vulnerable people
- There is no history of this being successful within the community. It ends up costing more so providing less. Own it, Haringey, come on
- Why break something that is already working well?
- My father suffered terrible abuse (not Haringey) in a private care home rated excellent but the owners were solely profit driven and fooled social services and the Commission (planned visits) until I managed to get an unplanned visit at which they immediately placed a care order on each resident etc. Never trust private sector with vulnerable people's welfare. Ever.
- The external provider's main objective is to make money. In-house Council staff are fully committed to supporting their clients. There is no comparison. Privatisation of public services is a very bad idea which eventually costs the council more while not providing the service for which we pay our taxes.
- In my work I see little evidence that external providers ever provide training to their employees of the same standard that many LAs do. Training is one of the essential keys to good services. Presumably Haringey is hoping that using external providers will decrease costs - this may be true. But in my experience this is almost always because external providers pay employees less, provide little in the way of thorough training or support. Their employees are generally less content in the work and this, not

surprisingly this effects their service provision and it is service users and carers who lose out.

- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- You want to out source to a private company? Don't be stupid. They don't and wont care about the vulnerable people in their care. It's all about making money for the person running the private company. Their staff will get crap pay and training as has already happened in other boroughs. As a result, the vulnerable people you as Haringey council are responsible for will suffer. Best is to Improve the way you do things at the council by reviewING yr systems and processes and make sure you involve key workers in improvement reviews. Don't take the easy way out by outsourcing. Find ways to improve how Haringey do things internally, this builds trust and adds value for everyone concerned. Thank you. NO PRIVATISATION OF HARINGEY CARE SERVICES
- In my view 'external providers' provide a poor quality service. It's often cheaper because the pay and conditions of the employees are cut to the detriment of the service.
- Approximately 25% of the population have need for social care of one sort or another. Again, this is a complex place to find ourselves in. Who would be an appropriate "external provider" and what would be their intention. As it stands, whilst not perfect, we have a system which first and foremost respects the integrity of the person seeking care. How can this be handed over to an external provider, safe in the knowledge that the information gathered will not be handed over to a "third party". "External provider" can mean so many things, one which many people connect with is private investors/capital. The term is too loose for it to be a secure choice..... To return to the main point this is a need that on average affects 25% of the population. This percentage is variable but, with a population of 258900, this action of closure in Haringey statistically affects 64725 people and so "outsourcing" to the private sector cannot be simply or successfully achieved. People matter and people needing support need security which a private provider cannot achieve.
- it is most likely to result in a degradation of services and also poorer conditions for staff It is part of a central government agenda to privilege private companies at the expense of state provision. Almost invariably this has been detrimental to the provision of services.
- external providers work for a profit and are very difficult to monitor except by useless tick boxes; see all the public enquiries...
- It never works when services are privatised. We have many examples of this in Haringey.
- Because they are staffed by people who are interested in money and not the people they care for. External providers (i.e. private) are never as good as council workers and do not have the level of supervision or checks on their pasts and qualifications.

- I don't think public services should be transferred to the private sector so that they can make large profits out of the tax payer.
- Removes a layer of accountability, profits will be paramount
- Privatising services is unwise in the medium and longer term
- Evidence shows this kind of thing greatly reduces efficiency of public services.
- External providers are in the job for the money, and no out-sourcing will ever be cheaper than an efficiently run internally service, because the profit pressure will always affect the out-sourced supplier.
- The council should have overall responsibility for this service and to integrate with other services
- Likely to provide substandard service
- What evidence is there that an external provider would better meet the needs of the people affected
- NO! It will end up by costing much more and eventually closing
- Outsourcing is not in the best interests of residents the council have a responsibility to its residents to provide in house service by staff who understand the issues affecting persons with disability. Not for profit.
- because who is this external provider and what kind of support would be given and is there any guarantee that service would be overlook
- This would be criminal - outside agencies very rarely understand the community and its constituents.
- External providers often pay lower wages with less benefits so the service provided is undermined.
- Existing staff and providers already have the skills and are known to service users and carers a move to an external provider will break trust and confidence, doing no-one any good. It is not clear to me that the motivation to shift to an external provider is led by anything else but cost-cutting and is no way to provide individualised and appropriate care and support to vulnerable people
- In order to transfer to external provider you need robust monitoring - this does not happen.
- it would need to be clear that the external provider was of high quality, the services were sustainable and affordable to anyone who currently uses Haringey day care provision
- I am a carer and the care support I receive though agencies is inferior to the care support I receive directly from the NHS or local authority.
- These are essential public services which it is morally wrong to run for profit

- I don't think Haringey are any good but who knows what another provider would be like
- Haringey should retain responsibility
- Keep these services within the realms of public ownership and Social Enterprise.
- Where is the evidence that they can provide this effectively and more efficiently? What has been the role of private sector advisors / consultants in this? Vested interests? Will the council retain sufficient expertise in social care and a sufficient legal team to ensure that a robust contract is written and is enforced to ensure the required care is provided? Given the need for this additional level of (high-level) expertise what is the evidence (besides ideology) that this will provide actual savings
- Lowest possible care for biggest profit.
- Retaining direct management of the service ensures the service can be more closely controlled and directed, and more consistent working conditions for staff.
- To retain one's dignity, it is vital that a person living in their own home for as long as possible. We strongly agree that individuals are given the right to support this. However, with regards to the Haven, I do not want it to close or transfer to another external Provider, unless it is best for the individuals involved.
- If this keeps the Haven running as a good or better then that's ok
- I am not sure whether to support the transfer of internal re-ablement service to an external service provider. No one knows how the users will feel to have their care transferred to a new service. The users may not have heard of this external re-ablement service, and therefore this may not help them towards health recovery.
- the re-ablement staff are very respectful, they support service users in reaching their target goals and becoming independent. The Service stop re-admission to the hospital because service users learn safe method of living independently in their own homes.
- Re-ablement is a myth for people suffering dementia or severe and lifelong disabilities of any kind. Contracted out services involve a share of public money going into private profit and if properly run the gap between wages of staff and total cost should be a lot lower if services are kept in house. A social enterprise combining Haringey's services with neighbouring boroughs could be a source of economies of scale.
- this is Haringey's responsibility.
- I oppose out-sourcing as we lose the expertise & trained staff. Contract arrangements cannot cover all aspects and line of responsibility is broken.
- I do not support your proposal to transfer the reablement service to an external provider. My reasons are that there is likely to be a reduction in service quality. As seen in other areas where the services were taken over by external providers. Example: Home care. External providers have not been able to reach the targets on their quality control, which in effect is leaving service users in vulnerable situations. By keeping this service in-house the service will be able to maintain a high quality of service and will have direct control of safeguarding vulnerable adults.
- No detailed proposal on what will replace the closed day centres. No assessment of the long term human and financial impact of closures. Greater reliance on carers to care for adult users at home. No justification for assertions that service will not be

impacted by the shift to a social enterprise model. No appreciation that these services are preventative and are much less costly in the long run. They keep the carers as well as the service users healthier for longer.

- Stop privatising our services
- It's not which organisation which provides it that matters, it's the right amount of investment, and the flexibility for people to design the service and activities together with staff.
- This is just privatisation by another name and has been proven time and again to degrade service and cost the council more in the long run.
- Cost increases/lack of control
- privatisation in services see decreased wages, workers who are not paid enough and are therefore not interested in their jobs. social dislocation is thus fomented.
- In my experience as a next of kin of someone with Alzheimer. I saw that only Social Workers and the Haynes Centre staff were upfront and clear in assessing needs and providing solution. The Agency that provide day carers has been showing only an interest in managing their own budget and not a thoughtful, expert approach that takes into account the need and interest of the patient.
- This is an untested model and we do not know the financial as well as the human impact the change will have
- Such a transfer will worsen the terms and conditions of staff and the training they receive and will lower the quality of care provided. Re-ablement should remain a council or CCG responsibility.
- **The council's Reablement service is highly regarded by service users and their families, as was the council's Home Care service before it was cut. Staff in this service have decent pay and conditions, they are properly trained and supported, and they tend to stay in the service for many years, providing consistency for service users. In contrast, the private home care sector faces many problems, largely as a result of putting profit before people. Pay and conditions are poor, training and support are often non-existent, staff are often on exploitative zero hours contracts, and providers are always trying to cut costs. Some unscrupulous employers even blatantly break the law by not paying for travelling time, which means that they are paying their workers beneath the minimum wage. Standards of care are variable and sometimes appalling. High turnover of staff means that there is a lack of consistency for service users. There are some very good workers in the private care sector, who are valued by the people they provide a service to. However, this is despite the fact that they are employed by private companies, not because of this. They deserve to be treated decently, and this is often not the case. However, there are also many examples of poor care, and far too much variation in the quality of staffing, which is closely linked to the pay and conditions of staff. The idea is that the council will commission services from the private sector, and then monitor/quality assure them. This model has failed miserably, as has been seen both in Haringey and across the country. One of the main providers of privatised home care in Haringey recently failed most of its CQC inspection. Reablement is all that is left of the council's excellent home care service, and it is extremely concerning to see it going the way of all other home care in the borough – probably into the hands of a private company. We believe that quality of care will suffer, and that staff will face**

attempts to cut their pay and conditions due to cost cutting. Reablement is a specific and specialist type of care at home, one that an external provider may not be experienced in. Combined with pressure to cut costs, this may make the process of reablement less effective, leading to difficulties for the people receiving care and greater costs due to having to subsequently provide more services.

- It will be very difficult for my husband to adjust to a new setting and not be able to interact with the other members of the community who are at the day centre. It will be very difficult for me if this care was not provided to him anymore and was just left at home.
- The basis for the change would be to drastically reduce financial costs and therefore in my experience the care provided will be compromised and will be of a poorer quality.
- I know and trust the council carers and I am happy with the great service they provide
- There is no evidence that an external provider will be able to provide a better quality of care or reduced cost to residents.
- External providers' values are generally not supportive of well being but are driven by profit requirement.

Responses on the Consultation – Proposal 1

Question C

Proposal 1: To increase the council's capacity to deliver re-ablement and intermediate care services

C) To what extent do you support the proposal to close Osborne Grove Nursing Home?

- Increasing numbers of older people with nursing needs including dementia requires ongoing provision of excellent resources. If the home is not of high quality a review and improvement plan must be put in place. Spot purchasing of external places can prove more expensive in the long run.
- It will disrupt the lives of highly vulnerable people. Where are people supposed to go?! Nursing homes are a necessity to care for high need people and you cannot afford to cut this as will result in more hospital admissions and carer stress. Think of the families and how they will feel that their relative is being turfed out.
- Having researched local nursing home provision thoroughly before my sister's admission I came to the conclusion that there is a significant lack of suitable nursing home places within the borough and its close environs. Closing Osborne Grove to long-term nursing home admissions would exacerbate this shortfall.
- Cannot comment
- There are already too few nursing home places available in Haringey. I don't think it is acceptable to place elderly frail people in poor health out of borough so that it is more difficult to maintain contact with family and friends, and the loss of Osborne Grove would mean even greater numbers of people who cannot be looked after in their own borough.
- This is a missed opportunity for the Council. Closing Osbourne will mean there will be no nursing homes in Haringey which could mean for those who need nursing home support it would cost the council more in the long term. It would be better to offer beds to other authorities to raise income
- Not had any involvement with this home
- The residents at the home deserve a safe, purpose lead environment to live out their lives. Most of the residents, I am sure, worked hard during their lives and helped to build & support the authority via taxation & spending their hard earned money locally.
- You need to consider those using the Nursing Homes. I have seen external Providers not having sufficient staff to deal with. Individual they are left on their own some who could not feed themselves were left without help. Rooms were in terrible condition. It was very sad to see this.
- My views make no difference to the council you omit to consider our views it seems powerless to even try and put our views forward you lack to care for us

- The users would be disorientated by any change to their routine. This would cause them a lot of distress.
- Haringey have no direct provision now for very dependent patients. Unfortunately, the private providers in the borough are not of uniformly good quality and providing this service will remain necessary. There will always be a proportion of people who need care in nursing homes - even if re-ablement is rolled out.
- Same as above.
- Again can't answer this without very clear details as to how you plan to replace it.
- There are not enough nursing care homes in Haringey surely it is better to keep people in the borough to make it easier for people to visit their loved ones
- Osborne Grove is a nice and beautiful place, I actually work there, the service users are happy there and you can see that through their behaviour and body language. We ensure we are keeping up the hard work and I can assure you that it is not easy the Home is run 24H around the Clock.
- Again, I don't know enough to comment
- It's a good move providing you've checked that no one will suffer as a result.
- S/user Received good Quality of care. It would be a shame if the Nursing home close it should remain open for the poor people who can't afford To go into posh Nursing home were the cost his very expensive.
- There is a lot of haringey residents who have their family members there and it's very useful to have your loved ones near you when they need care
- I really do not know about Osborne Grove now
- The adults who use it NEED it. Are the council suggesting that no one is using Osborne Grove Nursing Home or that its not needed? The alternatives are inadequate and the Council know it.
- Cost are the priority not care...
- People with Autism rely on continuity and repetition. I've seen nothing in the proposals that offers these people a safe, permanent alternative leaving both the clients and the carers with an incredible gap in their support and care.
- Haringey has already closed many homes in the borough and is now having to farm people to out of borough homes where it becomes harder for residents to see and connect with their families. I don't understand who this can be touted as an 'improvement' to the services?
- Nursing homes are vital for rehabilitation or high levels of care near end of life. Crucial.
- People will lose the service from a facility for which they have already paid.
- Some time ago I had cause to do some work in this nursing home. Like any care home

anywhere there is always room for development and improvements, however compared to other nursing homes Osbourne House was providing good personalised services. They were respected by Community Health services for their nursing care in particular for skin integrity. My comments above regarding training etc apply.

- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- Every vulnerable adults has different needs. How can you say a new approach and system will suit everyone. It can not. Some vulnerable people will need to stay in a care home and some may suit home and independent living. You should assess each adults needs before deciding which homes are going to be closed. Closing all of them is irresponsible of you as council representatives.
- We need, and will increasingly need, nursing homes. Haringey have already closed Cranwood in Muswell hill Road and there is a shortage of affordable nursing care in the borough.
- I support care in the community. The closure of a Nursing home does not support the community.....it removes care from the community.
- people who live alone value the chance to be looked after in a setting other than their own possibly isolated home; a choice should be available
- We desperately need homes for the increasingly ageing population.
- Same reason as before
- Suitable alternatives not yet in place
- Essential resource for those who need it
- I believe it should remain open.
- I do not believe in the policy of closures of centres at all.
- AS above
- Insufficidnt alternative provision
- With increasing numbers of older people need to maintain rather than reduce provision
- It is a necessary facility for local people
- You are sending people out to Die.
- where and who would be caring for these people is there some good service in place
- Increasingly the most vulnerable are forced to move many miles to new facilities without any consideration to family members and friends. I very much doubt if those in charge of decision making would be happy to travel increasing distances to visit family members in care. It's scandalous.
- As the population of older people within Haringey gets older we will need more homes like this one

- I have been a visitor to Osborne Grove on at least two occasions as a volunteer with Haringey Healthwatch. The vulnerable and highly dependent people who live there benefit from being part of the local community. Several have relatives or carers who live nearby and who play a part in their lives and in the life of Osborne Grove. I fear for the residents if the Nursing Home is to be closed down. Moreover I see Osborne Grove as a resource for more than just the residents, it can be, and has been used as a centre for other groups, can also serve as a training resource for care staff and has the potential as an environment to be used in a way that would benefit wider sections of the community.
- In 2013 Osbourne Grove received a positive report from the Care Quality Commission. Residents and their family members appear to be very satisfied with the care they receive at the home. If Osbourne Grove is to close there needs to be a good quality alternative provision in place which is affordable and properly regulated. This is one of the areas where vulnerable people are often at risk due to poor quality care
- There are not enough facilities like this
- It provides essential services to vulnerable people.
- dont know it
- As before
- Care in people's now homes might be preferred but it is not always possible for a host of reasons - the person's situation, the nature of their home. Nursing homes are still required. Furthermore, providing this care in a central location will be more efficient than modifying each client's home, providing care teams that have to travel from home to home seeing one person at a time. Not efficient. Finally, a care home allows a critical amount of expertise in one place. It is safer as there are more people on hand, they can respond quicker and the team on hand will have greater range of expertise. There is no social case for closing this home. It is purely financial. If finances are a problem, a shame on all who agreed to spend £86,000 on the new logo. That is just poor prioritising and basic poor management.
- Same as Q7
- I don't know of this site but I am sure it is also needed by our community so should stay open.
- There may be lots of benefits for the proposals to close Osborne Grove Nursing home but residents with severe disabilities mentally and physically would not be able to voice out what is unsuitable and worrying them in the proposal. They could just suffer in silence.
- Osborne Grove is a nursing and residential home which helps to look after people who can't be on their own at home. They receive good care and gives peace of mind.
- Please see my replies to the questions about day centres
- Again, the most vulnerable and their families are being attacked. So damaging to the elderly, confused. A cruel proposal.

- One of HPAG has over the years been involved with residents there. Another of our committee attended a meeting about it. Both know how much this Nursing Home is needed
- I do not support your proposal to close Osborne Nursing home. With an ever growing ageing population its important to hold onto important resources in the community.
- Best to deliver nursing care from good environment. It's needed somewhere though, you won't prevent all disability and dependency.
- Do you really think you can maintain service levels by closing a nursing home?
- Provides essential services for people with dementia and their carers.
- is this a joke?
- I already talked about the variety of changing needs and Nursing Homes do figure at some point, unfortunately, when chronic conditions worsen.
- These services are in great need and should be improved. Once closed how do we know replacements will work better
- Given the growing number of every elderly people in Haringey who need residential care, it does not make sense to close this provision.
- This is a successful and well-regarded service that meets all of the CQC standards, unlike some private providers that the council uses. The closure of this service would mean that residential and nursing home provision in Haringey will be entirely in private hands. The problems caused by privatised care are well known – poor terms and conditions, high turnover of staff, poor quality care, lack of accountability and control and so on.
- I would not want the people who are currently receiving this service to be severely impacted towards their health. From the proposal it does not seem to be the case.
- Clients and carers rely on the home . It is a lifeline
- For the same reasons given before for the Haven Day Centre.
- I do not believe closing already busy day care centres is beneficial for residents. This centre provides valuable relief time for carers whos lives are burdened by illness of their relatives. I do not believe you have laid out a suitable alternative to the services offered by this center and fear closing it may result in hardships for members of the borough.
- There is inadequate support in the community to make up for the closure.

Responses on the Consultation – Proposal 1

Question D

Proposal 1: To increase the council's capacity to deliver re-ablement and intermediate care services

D) To what extent do you support the proposal to transfer the existing service provision at Osborne Grove Nursing Home to an external provider and to include a re-ablement care service?

- Reablement is the cornerstone to increasing independence and choice, and ensuring cost effective services. Investing in effective preventative services ultimately provides savings, whilst giving people the best opportunities in life. However you need to ensure that you develop the market with wide range of diverse services that can appropriately meet individual need.
- Re-enablement is an excellent idea - but it has to be balanced with the necessity of providing high quality care for people who are e.g. elderly, dementia, high or complex needs - this care cannot become compromised.
- I believe re-ablement and intermediate care services are a good thing. I believe these should co-exist with long term nursing home care which is the only option for very dependent adults.
- Haringey should be a Council we are proud of, so we should focus our expenditure in promoting services in house and using the dedicated staff who are committed to Haringey residents rather than rely on the mercy of external providers who we will have less control over.
- I have heard that Haringey Neighbourhood's Connect project is a non-starter. My mother & I have not been given any information regarding Personal Budgets & what this entails? It would seem that the service users will just be left to find out other proposed provision for themselves. It also seems that "the Cabinet" has already made their decision regarding the proposed closures meaning that this whole consultation process is void. It is clear that this process is costing the authority a considerable amount of money yet when I asked this question I was given the brush off by Cllr Morton. I should like to know the of money this consultation has cost? I also note that L.A Cllts have increased their salaries by 6.6% this financial year. The whole situation is bordering on farce and I am wholly disappointed by this LABOUR L.A's decisions to cut services used by the vulnerable with no clear provision in place after the cuts take place next April.
- Whilst caring for my parents I must admit to having a very low opinion of the Adult Social Care Services provided. There seemed to be very little coordination between Health and Soical Services , very few assessments were carried out from a multi -agency perspective , lack of any real advice reference personalisation budgets, no real access to advocacy services etc.
- I just feel the council pushing this possibility to an external provider with no consideration for the care of the Service Users or Carers and no promise can even support us.
- I feel very disappointed and feel we are being fob off. Its a shame!
- I am seriously concerned about these proposals. Whilst I support re-ablement- this implies

supporting people as well as possible to facilitate maximum wellbeing. This needs to be done by continuing to provide a range of services which can properly support all people - not just those that are well enough to use certain provision. I feel this proposal discriminates against the most needy in our community - those with progressive illnesses such as dementia and those without family and friends to support them. I fear these people will be forgotten in their homes, unable to make use of community resources.

- Poor consultation exercise without any real details of what you are actually proposing. Such a disappointment.
- I think , the best way is the decrease the number of Staff and reduce the costs in terms of expenditures and provide more tasks to Staff but less number of Staff . At least you can lay off many staff a.
- The thorny subject of culturally appropriate care givers MUST be considered
- You take care, now. :)
- The council could increase the reablement and intermediate care capacity with the existing in house reablement service. I fully understand the implications of the budget cuts, but feel an external provider may provide financial savings to begin with but do not feel as a long term goal will prove to be as rewarding. The success of the in house service is partly down to the commitment of the workforce as they feel valued, supported and receive good terms and conditions of service.
- I think the council should invest in the in-house reablement service as this will save the council money in the long-run. S/us will not get 'lost' in the system and receive a service for a number of years when they do not need it. When you have an in-house service s/us are monitored more closely and we are able to liaise with different departments/organisations effectively. Any problems encountered are addressed quicker as all staff are based in the same place. I do understand that the council needs to make cuts, however, i'm not convinced that reablement is the right service to be privatised. This may cause more problems in the future as it would not be monitored as closely.
- Reablement service monitor the service provided, by giving good accurate feedback on the service we provided to the assessment team. Our aim is to enable service users to be independent and not motivated by making profit as the agencies does. We have more experience about reablement than the agencies. We have often been asked by social workers to take long term packages of care when agencies asked for an increase and the social workers do not feel that the request is necessary. The council is currently losing a substantial amount of money from the provision service to service users who do not need the service, but due to lack of resources their P.O.C hasn't been reviewed regular to either reduce the P.O.C or to cancel the service. In - house reablement service could expand and take on some of the long some of the long term service users so their P.O.C can be monitored and the service reduced or cancelled if necessary.
- To who it may concern should reconsider out source the Reablement service I'm not going To the agency. I have a choice.
- Let the reablement workers see every one who is discharged from hospital and if they are not reablement they can be passed on to long term.
- None
- This is about saving money not caring for people

- I cannot believe that a Labour run council is hitting its most vulnerable adults and children with cuts whilst so much money is wasted on consultations logo changes and other vanity projects in the borough. This borough appears to pass on far too much money to management and various (ignored) consultations so that there is little left for the actual vital services I and I am sure many others, feel that participating in 'consultations' is a complete waste of my time as residents views never appear to be listened to. The council just barges ahead regardless no matter how vital the services are.
- privatisation policies have failed to provide adequate welfare enhancing services in the past it will do so in the future. Don't commit the same mistakes time and again. Often it doesn't pay off for the council moneywise either!
- Do not use private providers. Review the social, emotional, intellectual needs and well-being of users and carers to provide high quality person-centred care and make caring profession developmental and properly paid. Do not use agency staff except for emergencies. Create a healthy happy and stimulating atmosphere in homes.
- I am opposed to the Council's obsession with privatisation
- Please do not isolate these vulnerable adults. They need this. There are hardly any resources as it is.
- As long as you assess all vulnerable adults in Haringey first, i.e. speak to them and their carers, and you don't think one system is the answer.. And you commit to providing the best care and ensure your contract with the private company does the same, has high standards set, and is also audited regularly & it would be amazing if the leaders of these private companies actually cared about the vulnerable adults and not just their fat pay packages.
- When the questions ask about closures, it is difficult to see just how you are increasing capacity. as the main interest seems to be to save money, I can only assume that any increase in capacity is at the expense of the pay and conditions of staff.
- A question for you: How does selling community care to the private sector increase capacity?
- The Council should use all their political strength to resist the central government's agenda of reducing services for the vulnerable and needy of our society, reducing state provision, dividing the vulnerable from the strong. I anticipate as I get older (I am 66yrs old) that I will want my local council to provide services that I have contributed to financially, in such a way that profit does not come first but public service is central.
- Not everyone fits one plan; you need to retain a variety of services
- It's all in the language - you are not proposing to increase care but to get it more cheaply which means less of it and worse care. To close these centres is not the action of a caring council.
- The council must care for those unable to care for themselves like the disabled and pensioners. The private sector does not always offer the best care because they are out to make a profit from the tax payer.
- Do not cut services to the people least able to help themselves

- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- If the proposal is that out-sourcing provision is better it can only mean that an appalling level of inefficiency has been exercised in the council's own provision. No out-sourced provider can ever offer the same quality of service and value for money as an efficiently run internal service because of the pressure they have to provide profits, and more than that profits that keep increasing. This can only happen to the detriment of Haringey residents.
- There is a huge demand to provide care that is specific to needs in a personal, local and trusted environment. Re-ablement sounds like care in the community, and we know that the quality of care as well as quantity is seriously lacking
- I am completely against privatization in general when it comes to the care of individuals who are dependant and my concern, particularly in this matter is for those adults who are diagnosed with Autism. My grandson is a 24 year old Autistic young man, not in Haringey currently, so you may understand that I do understand the needs of such citizens and their home carers, who are so often their aging parents who are themselves only able to cope with their care with the help such centers offer. My second objection is on the grounds of the needs of the clients, themselves, who are largely disorientated and disquietened by changes in their routines, environment and those working with them. Familiarity with all these elements is essential for their lifeline. I think that proposals, which I understand include The Roundway, which is Autism specific, are the most threatening to the wellbeing and peace of mind of the clients and their home carers. I do not believe that any form of privatization can meet the needs of this highly vulnerable group.
- You must know as well as I that privatisation is the road to ruin. Do not be tempted to throw these vulnerable people to the private wolves
- Do not do it.
- I feel that there is too much money being paid to the people at the top get rid of all the top managers and let the worker do their job and use the money to employ lower paid managers who are willing to do the job
- I would like to hope that the council continues to consider the views of its community and transparency of any future care providers for vulnerable adults. Consideration of its duty of care and consideration of family members and friends.
- I've not see anything in the proposals which adds to existing provision so can only conclude that what is proposed is a reduction in services and the kind of support which vulnerable people and their carers depend on.
- These proposals are not designed to increase the Council's capacity to provide re-ablement and intermediate care services, but to reduce them, and farm out what's left to impersonal and underpaying private corporations.
- I just doubt you'll do it
- Resources to this sector should be increased
- Shocking proposals riddled with short-termism, poor planning and incompetent financial management. A betrayal of the people of Haringey by those with responsibility for them.

- Whilst these changes suit some users, as ever, it is not good for everyone, so individuals should be consulted. Most disabled people will not be filling out this survey so it will not be a true opinion of the people it is going to effect.
- This is a false question. The proposal to increase the service is separate from the issue of whether the service is outsourced.
- As a social policy researcher I have a keen interest in his field. I have followed the SASH campaign closely and believe its arguments are correct. I have a close friend who works as a carer for autistic people and others whose relatives require or have required intensive dementia care. It is impossible for families and carers to cope with the cuts in service that are being proposed.
- Our experience has been that communications to obtain help and advice are extremely difficult for older people, and for others. Waiting times are long and phone speaking skills inadequate. Keeping well services are needed but need to be efficiently delivered, with a quick response and access to staff who understand the needs of the caller. One problem is the increasing use of numbers to press before getting to a person. Direct lines for particular services are better.
- I think that our capacity to provide support is already much higher than stated on the proposal. Our capacity is approximately 56 service users at any one time. . To increase our capacity I think it would be beneficial if we did not have so many senior workers. We have the same amount of seniors workers as we have reablement workers. This would mean that we could have less seniors to carry out the assessments and complete the rotas for the week, but would also free up some of the staff to support the service users. I believe this will help to offer the service users greater consistency, as with less seniors completing the weekly rota its easier for the seniors to know which reablement worker to allocate to each service user.
- No detailed proposal on what will replace the closed day centres. No assessment of the long term human and financial impact of closures. Greater reliance on carers to care for adult users at home. No justification for assertions that service will not be impacted by the shift to a social enterprise model. No appreciation that these services are preventative and are much less costly in the long run. They keep the carers as well as the service users healthier for longer.
- Reablement isn't cheap. Multi skilled team and time to do the work properly are essential if it's to work.
- This whole proposal is a complete disgrace.
- Re-ablement is not appropriate for long-term complex needs, a lot of the proposals relate to services supporting people with long-term complex needs. Increasing the re-ablement capacity will not replace/ is not a substitute for the services provided by day care centres or nursing homes. If there is a greater need for re-ablement services that should be provided but not used as justification or offered as solution to close day care centres, etc. In any event the Council provided no evidence on the level of need for re-ablement services or how they may be applicable for long term complex needs.
- the framing of these proposals is an embarrassment to haringey council and any one in the council who purports to have any degree of social justice in their belief set.
- I agree with the intention but they appear to be mostly a mask for an exercise in reduction of resources.- And off course I am really concerned about a future where the Council retreats from his responsibility of care!

- We need more detailed proposals about any replacement services to include very detailed cost.
- It is entirely legitimate and welcome to highlight the importance of prevention in social care; that is, ensuring that people remain healthy for as long as possible, and that there is early intervention when problems do occur. This helps people to maintain independence and a decent quality of life, and is also cost-effective. However, we do not believe that the proposals will support these aims. Reablement is also a concept that really only works in specific circumstances, e.g. when someone goes into hospital after a fall. It does not really apply to long term and complex conditions. We believe that it is rather disingenuous to have included the proposals for the closure of Osborne Grove and The Haven in this section. The link between these closures and reablement is somewhat tenuous. Those who attend the Haven have long term social care and health needs, and people living at Osborne Grove require nursing care; these service users are highly unlikely to be using reablement services. Therefore, there is actually no connection between the closure of these services and reablement, other than the possibility that the buildings may be used for some reablement activity – but this would not be for the same client groups that currently use these services. I am responding to this consultation on behalf of Haringey UNISON. [REDACTED]
- Would like to know how the re-ablement would be implemented into the community and the transition and the impact for those who will not be able to receive this service
- There is a huge feeling of distrust towards the proposals and Haringey Council /Councillor This is purely a legal process that has to be played through in order to implement the proposals. We (clients and carers) do not believe that our opinions will be considered or have any influence on the final decision. Can you ensure that staff at the existing day centres and nursing homes retain their jobs? They have the necessary experience and training and have provided excellent quality care for our loved ones.
- I feel strongly that the council should not close existing care centres as it will adversely affect many residents, their cares and their wider support network.
- Experience suggests that intermediate care services are inadequate. Often this places a heavy burden on carers.
- History tells us that externalising such a service is not necessarily the best option because the service can fail. In house and NHS staff may be more expensive, but there is overall control of quality, staff management and training. This is a good opportunity for joint provision and working and to develop a stellar service. All services should have reablement embedded in its principles and practice .
- Disruption to the lives of vulnerable people. The council can be trusted and held to account but we could be lost in red tape trying to make changes with an external provider.
- I believe that keeping this facility within local authority control is the only way to ensure that existing standards will be maintained. External providers are profit driven which leads to a tendency to cut costs and lower standards.
- Cannot comment
- Private care homes in Haringey often provide poor quality services at high cost. Haringey LA seems to have done very little to regulate standards and assure high quality of care, meaning that social workers regularly have to place people in homes where it is unlikely their needs will be well met. Handing responsibility to another external provider will reduce the influence of the LA with

regard to quality control, whilst having to pay higher fees.

- Are there organisations out there who would be willing to take this on?
- as question on previous page
- I believe that the issue of privatisation of services needs to be discussed further in the borough along with the issue of personalised budgets and the management of them. I do not believe that the borough has a very good record of monitoring contracts once given .
- No comment. Just sad really.
- no comment!
- see above
- Same as above.
- Including a reablement service sounds a good plan but transfer to an external provider is not. There are frequent examples of external providers giving a worst service than LAs, workers are generally treated less well and homes can close at the drop of a hat requiring service users to move virtually overnight (there was yet another example of this happening just week with service users being moved peremptorily and suffering badly).

Responses on the Consultation – Proposal 1

Question E

Proposal 1: To increase the council's capacity to deliver re-ablement and intermediate care services

E) If you have any further comments on our proposal to increase the Council's capacity to provide re-ablement and intermediate care services please tell us below:

- History tells us that externalising such a service is not necessarily the best option because the service can fail. In house and NHS staff may be more expensive, but there is overall control of quality, staff management and training. This is a good opportunity for joint provision and working and to develop a stellar service. All services should have reablement embedded in its principles and practice.
- Disruption to the lives of vulnerable people. The council can be trusted and held to account but we could be lost in red tape trying to make changes with an external provider.
- I believe that keeping this facility within local authority control is the only way to ensure that existing standards will be maintained. External providers are profit driven which leads to a tendency to cut costs and lower standards.
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- Private care homes in Haringey often provide poor quality services at high cost. Haringey LA seems to have done very little to regulate standards and assure high quality of care, meaning that social workers regularly have to place people in homes where it is unlikely their needs will be well met. Handing responsibility to another external provider will reduce the influence of the LA with regard to quality control, whilst having to pay higher fees.
- Are there organisations out there who would be willing to take this on?
- as question on previous page
- I believe that the issue of privatisation of services needs to be discussed further in the borough along with the issue of personalised budgets and the management of them. I do not believe that the borough has a very good record of monitoring contracts once given.
- No comment. Just sad really.
- no comment!
- see above
- Same as above.

- Including a reablement service sounds a good plan but transfer to an external provider is not. There are frequent examples of external providers giving a worst service than LAs, workers are generally treated less well and homes can close at the drop of a hat requiring service users to move virtually overnight (there was yet another example of this happening just week with service users being moved peremptorily and suffering badly).

Responses on the Consultation – Proposal 2

Question A

Proposal 2: Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives Scheme

A) To what extent do you support our proposal to provide more accommodation options that promotes individual well being through expanding Supported Living Accommodation and Shared Lives Schemes?

- I want to see vulnerable adults getting maximum support not minimum or non-existent support.
- Shared Lives places a huge burden on others to support the vulnerable. I think you will see huge increases in carer stress and placement breakdowns. In day centres/residences there is a team of individuals who can support and contain each other. Also trained and provide a certain standard of care. I think you will increase isolation and standards will slip as carers become more burdened over time.
- A noble aim. However the council needs to be able to provide the services to allow this to happen. Closing day centres is retrograde. It is naive to think that the "community" can provide the specialist services that day centres can. Rather, day centres are part of the fabric of that community. Furthermore, whilst this is a good aim, it is not going to be realistic for all clients
- Shared Lives places a huge burden on others to support the vulnerable. I think you will see huge increases in carer stress and placement breakdowns. In day centres/residences there is a team of individuals who can support and contain each other. Also trained and provide a certain standard of care. I think you will increase isolation and standards will slip as carers become more burdened over time.

I want to see vulnerable adults getting maximum support not minimum or non-existent support.

Makes good use of space and resources in the Borough in a way that may increase service user quality of life. Use of the third sector also strongly encouraged if sufficient funding is available.

Every effort should be made to support people and enable them to live independently in their own home for as long as possible

The Haringey Community depends and rely on being assisted by the Council that so far has delivered a highly quality service.

- I want to see vulnerable adults getting maximum support not minimum or non-existent

support.

- Makes good use of space and resources in the Borough in a way that may increase service user quality of life. Use of the third sector also strongly encouraged if sufficient funding is available.
- Every effort should be made to support people and enable them to live independently in their own home for as long as possible
- The Haringey Community depends and rely on being assisted by the Council that so far has delivered a highly quality service.
- It is important for young people transitioning into adulthood to have the opportunity to increase their independence and learn the skills necessary for independent living, with appropriate support in place.
- Providing more supported living would be good if there are adequate staff who are well trained to support the adults they are working with. This is not a cheap option and to try to provide this whilst saving money will inevitably lead to a poor service.
- It's what people have said they want.
- If it gives more independence and choice for individuals
- Don't know enough about it.
- A noble aim. However the council needs to be able to provide the services to allow this to happen. Closing day centres is retrograde. It is naive to think that the "community" can provide the specialist services that day centres can. Rather, day centres are part of the fabric of that community. Furthermore, whilst this is a good aim, it is not going to be realistic for all clients.
- I support the provision of supported living accommodation but managed by the council.
- We have expressed our opposition to the proposal at every given opportunity. We feel that this proposal will jeopardise the health and well being of our loved ones at Linden House. Both proposed schemes are totally inappropriate for the needs of the Linden House service users.
- This is all written in code. "Maximising their independence" by closing day centres? Obviously people would prefer to live "as independently as possible". What does this prove? This is a cynical way of putting a positive spin on the cuts being proposed.
- Much more detail is needed with regard to any benefits. Inappropriate and badly thought out changes can have a really detrimental effect on the vulnerable, witness the changes in the benefits structure.
- We do not object to more provision in relation to these services. However, we strongly object to the following: 1) Closing Linden Road. 2) The outsourcing of the Shared Lives scheme.

- I support genuine accommodation options but I think that it is being done at the expense of the choice of residential homes accommodation. A service user I key work lives in a Supported Living accommodation and she doesn't have the choice to remain at home on her Day Centre days as her home is unstaffed when she is due to be out at the Day Centre.

Responses on the Consultation – Proposal 2

Question B

Proposal 2: Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives Scheme

B) To what extent do you support our proposal to close Linden Road Residential Home?

- I dont know about this home, but i dont support closing any homes.
- Disruption to the lives of vulnerable people. Some people will not be suitable for supported living/shared lives and you will invest a LOT of resources in placement breakdowns and supporting highly stressed carers.
- There needs to be protected accommodation for this group with high levels of expert support
- This is providing a valuable much needed service. Not every client in Haringey will be able to live within the community. The community itself cannot provide specialist care. Please explain what exactly these plans expect of the "community", please define exactly what "the community" that is going to provide these is? This is all rather wiffle waffle - ultimately meaningless. Surely it will still be the council?
- Disruption to the lives of vulnerable people. Some people will not be suitable for supported living/shared lives and you will invest a LOT of resources in placement breakdowns and supporting highly stressed carers.
- I dont know about this home, but i dont support closing any homes.
- Closing any service is a shame, but service user needs are often not best met by a residential service. As long as their welfare is prioritised above closing the centre quickly this is a necessary move.
- Don't know enough about it
- The residents have complex needs and moving will be very stressful for them. If there is a better provision which will meet their needs more effectively the transfers could have been made over a period of time, with the possibility of moving back if the new provision was not successful. To close the home at a time of severe cuts means that a cheaper service is being sought rather than the most appropriate service.
- If it will help residents to have more independence and their services delivery

monitored by Haringey Council

- Linden Residential home should stay open. Upruth residents its not in their best interests. Who are making the decision to close the home to save money his blind sights.you should never come pear money with people wellbeing. Were his the compassion.
- There needs to be protected accommodation for this group with high levels of expert support
- This is providing a valuable much needed service. Not every client in Haringey will be able to live within the community. The community itself cannot provide specialist care. Please explain what exactly these plans expect of the "community", please define exactly what "the community" that is going to provide these is? This is all rather wiffle waffle - ultimately meaningless. Surely it will still be the council?
- Those already in a residential home should be given treatments that encourage greater independence but are unlikely to progress well if the home closes.
- We feel that this proposal has seriously overlooked the complex needs of the Linden House residents. This drive to 'include' them in the community is exactly what the service users do not need because the community do not understand the needs of these service users.
- Your own section on the benefits of this proposal is 3 lines long, it doesnt even look like you believe it. Obviously if you close a Residential Home you are by definition worsening not improving service provision.
- Some people may well fall through the net or receive a less than good replacement service. A lot of money is involved in replacing the existing and looking at changes over and over again. These funds could be much better spent. Much more work however has to be done with regard to the needs of the clients and carers to make any proposals seem an improvement and this has yet to be done to a satisfactory level.
- Along with the closure of Osborne Grove, this proposal will mean that there will be no council-run residential homes left in the borough - all provision will be from the private sector. The private sector has utterly failed to provide good quality residential care. The private sector exists to make a profit, not to provide care. Staff conditions are usually poor, with low pay and zero hours contracts. Care provided is often poor quality, due to the desire to cut costs and increase profits, and also as a direct result of low pay, not least the problem of high staff turnover. There is little democratic accountability and control. Around 15 years ago, the council transferred all of its residential homes to an external provider. This was a complete failure, with serious consequences for both staff and residents, and the service had to be brought back in-house. It is extremely disappointing to see that the lessons of this have not been learned, and that we have gradually seen the **closure of all the council's residential provision**, with the lives of vulnerable people being placed in the hands of those who are only interested in profit. We object to **the use of the term "institutionalised care" to describe services such as Linden Road**. This is insulting to the staff who work there, and management seem to be using the tactic of denigrating the service in order to justify closing it. We do not believe that the service is institutionalised, and we would like to see evidence that

this is the case, or that it is more institutionalised than comparable services in the private sector. Staff in this service work according to the policies and standards set by management, so if the service is institutionalised, it is ultimately senior management who are responsible for that and who should be held to account for it. **It is stated that “residents will be enabled to actively take part in their communities” and “supported to gain greater independence.”** Linden Road is already within a local community – it is a house in the local area, it is not separated from mainstream society. We believe that residents are already enabled to take part in their local community, and are being supported to gain independence. There is no reason why such aspirations could not be met if Linden Road remains open. Again, this is somewhat insulting to the staff in the service – suggesting that they somehow keep residents segregated from their local communities and prevent them from gaining greater independence, when there is no evidence of this. Supported Living is proposed as a replacement for Linden Road. Service users with higher level needs will still need 24-hour support, personal care, help with medication, and support with most aspects of their daily lives. Please explain how Supported Living for service users such as this is in reality any different to residential care, apart from the fact that the provider does not have to register with CQC and residents have their own tenancies.

- There is an ongoing need for residential homes for people with severe learning disabilities who cannot live in the community. Closing Linden will remove this much-needed resource.
- There is a shortage of residential accommodation and you are making this situation worse by closing Linden Road Residential Home. A service user I key worked last year was moving from out of her residential home and needed to find another place to live. Due to the lack of available accommodation she was moved permanently into an NHS respite home - thus taking away a needed respite place.
- The home is a life-line for residents.

Responses on the Consultation – Proposal 2

Question C

Proposal 2: Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives Scheme

C) To what extent do you support our proposal to transfer the Shared Lives service to a social enterprise?

- whoever can give maximum support
- I think it is an idealistic scheme that isn't practicable in the long term, whether provided by the council or by social enterprise
- whoever can give maximum support
- Taps into the dynamism of the third sector without making the service all about profit. Social enterprises can also better harness the resource & goodwill of local people.
- I don't know enough about it. Which social enterprise?
- The only reason for doing this is to save money. There is no evidence that the service will be better run as a social enterprise.
- Don't know enough about the social enterprise
- If services delivery will be better and monitored
- Its all wrong. But the council already make their decision to transfer the service so i don't think my opinion mean nothing to the council.but i have a voice i will not ship over to a next providers. Their no point put my name forward. I wanted to made Redundancies and that's my decision.
- I think this is a local initiative that should be run locally with local accountability. 'Social Enterprises' are often non-profit making organisations that are run on 'business principles' which include the payment of high salaries to senior staff while employing frontline staff on low wages.
- The service is better delivered in house to maintain quality trained staff, transparency and a clear path of responsibility. If money is saved quality will suffer.

- We do not know who these social enterprises are. Nor do we know anything about their credentials, which would make them suitable for helping to care for our loved ones.
- This is privatisation in code and is only being done for the nonsensical reason that the council can get the expenditure off its books. In the long term it will cost the more (or the service will end up getting cut) as with all privatisations.
- This is an unknown because we do not really know enough about the quality of the replacement service, its cost and impact.
- We support the concept of Shared Lives, and we would like to see it expand, but we strongly object to this being via a social enterprise. We believe that this is actually unnecessary, and that the aspirations for the service could be met by keeping it within the council. We believe that the only reason for proposing a social enterprise for this service is to cut costs by cutting staff terms and conditions. This is unacceptable for staff who work in this service, and we believe that it will lead to a significant drop in the quality of service for both vulnerable people and carers. While Shared Lives is within the council, it has access to all the support services that it requires - HR, IT, legal, and so on. Due to being part of a large organisation, it receives high quality provision in these areas that are essentially free, or at least they do not have to be paid for to anything like the same extent as if they were being sourced from an external company. A social enterprise would have to meet all of these costs itself, using up resources that would otherwise be used for the provision of services, and leading to further pressure to cut costs. Social enterprises of this type are typically propped up with local authority funds for 2-3 years, but are then forced to operate on a commercial basis, at which point they run into trouble. This is likely to be the point at which there is considerable pressure to cut staff pay and conditions and reduce the quality of service provided. There will then be a risk of the service being fully privatised, or the council could be forced to bring it back in-house. A particular issue with the outsourcing of service such as this is that the council remains responsible for the service provided, and for the safeguarding of vulnerable people, but has little or no control over an external organisation. This is a concern, given the vulnerable nature of the people who use this service. We believe that social enterprises are being proposed as part of these cuts because they sound better to people than saying that services are going to be privatised. The fact is that there is very little difference between a social enterprise and a private company - in this context, both exist to cut costs, and will do this by cutting staff pay and conditions and providing a lower quality service. In terms of "social investment", we would like to know where management believe that this will come from, and what the basis is for believing this. It is clear from the information that has been provided about Shared Lives that it is not suitable for all service users, so there is a limit to the number of people it could provide a service to. Also, it has been stated that it is a cheaper alternative to residential care - would all of the service users be in residential care if they were not using Shared Lives? The social enterprise model may work well in some cases, e.g. an entrepreneur who has an innovative new idea for a business that is of social value - one which does not currently exist in the public sector, or is something that the public sector does not provide. Such individuals may choose to trade stability and reasonable pay and conditions for the opportunity to run their own business and use their skills. A local authority social care service is not comparable to this. Therefore, we would question whether the social enterprise model is even suitable for a service such as this. We have been asking management for examples of local authority social care services that have been turned into social enterprises and have lasted for longer than the couple of years of being supported with council funds - as yet, we have not been given any examples.

- We support the concept of Shared Lives, and we would like to see it expand, but we strongly object to this being via a social enterprise. We believe that this is actually unnecessary, and that the aspirations for the service could be met by keeping it within the council. We believe that the only reason for proposing a social enterprise for this service is to cut costs by cutting staff terms and conditions. This is unacceptable for staff who work in this service, and we believe that it will lead to a significant drop in the quality of service for both vulnerable people and carers. While Shared Lives is within the council, it has access to all the support services that it requires - HR, IT, legal, and so on. Due to being part of a large organisation, it receives high quality provision in these areas that are essentially free, or at least they do not have to be paid for to anything like the same extent as if they were being sourced from an external company. A social enterprise would have to meet all of these costs itself, using up resources that would otherwise be used for the provision of services, and leading to further pressure to cut costs. Social enterprises of this type are typically propped up with local authority funds for 2-3 years, but are then forced to operate on a commercial basis, at which point they run into trouble. This is likely to be the point at which there is considerable pressure to cut staff pay and conditions and reduce the quality of service provided. There will then be a risk of the service being fully privatised, or the council could be forced to bring it back in-house. A particular issue with the outsourcing of service such as this is that the council remains responsible for the service provided, and for the safeguarding of vulnerable people, but has little or no control over an external organisation. This is a concern, given the vulnerable nature of the people who use this service. We believe that social enterprises are being proposed as part of these cuts because they sound better to people than saying that services are going to be privatised. The fact is that there is very little difference between a social enterprise and a private company - in this context, both exist to cut costs, and will do this by cutting staff pay and conditions and providing a lower quality service. In terms of "social investment", we would like to know where management believe that this will come from, and what the basis is for believing this. It is clear from the information that has been provided about Shared Lives that it is not suitable for all service users, so there is a limit to the number of people it could provide a service to. Also, it has been stated that it is a cheaper alternative to residential care - would all of the service users be in residential care if they were not using Shared Lives? The social enterprise model may work well in some cases, e.g. an entrepreneur who has an innovative new idea for a business that is of social value - one which does not currently exist in the public sector, or is something that the public sector does not provide. Such individuals may choose to trade stability and reasonable pay and conditions for the opportunity to run their own business and use their skills. A local authority social care service is not comparable to this. Therefore, we would question whether the social enterprise model is even suitable for a service such as this. We have been asking management for examples of local authority social care services that have been turned into social enterprises and have lasted for longer than the couple of years of being supported with council funds - as yet, we have not been given any examples.
- Such a transfer will worsen the terms and conditions of staff transferred to a social enterprise, lower the quality of care and remove services from the democratic accountability of the council.
- I believe that - for all public services, not just Shared Lives - that the post World War 2 creation of the Welfare State was a marvellous and civilising achievement

for Britain. Everyone paid in what they could in taxes and took out what they needed, democratically controlled by elected representatives. These proposals are part and parcel of a privatisation process which is taking us back to pre-Welfare State days, when if you couldn't pay for a service you didn't get it.

- A social enterprise model has financial profit at its centre and residents' lives will come second to this.

Responses on the Consultation – Proposal 2

Question D

Proposal 2: Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and Shared Lives Scheme

D) If you have further comments regarding our proposal to increase our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation and shared Lives schemes please tell us below.

- You cannot escape the fact that some people are unwell or have complex needs and need the support of a residence or day service. They reduce isolation and the team of carers can support each other.
- The scheme sounds good until the details come out. "Shared Lives" is a great aspiration. But this does not have anything to do with nitty gritty specialised care that vulnerable clients will need to have a good quality at the end of life or when encountering a vulnerable period of their lives.
- You cannot escape the fact that some people are unwell or have complex needs and need the support of a residence or day service. They reduce isolation and the team of carers can support each other.
- Good idea in principle
- It is important to ensure users are able to live independently/semi-independently whilst remaining in their community, near family and friends. This is particularly relevant for young people from BME communities where religion and family plays a central role to their lives.
- I do not believe that you intend to help more people with these proposals, than are supported currently. I have doubts about the suitability of the provision, which can only be suitable if there is a good staffing level of well trained and supported staff. You have given no details or commitments about the service which is to be available and no reassurances about how quality will be monitored and the safety and well being of very vulnerable people is to be ensured.
- If providers are monitored by CQC and Haringey Council
- Leave Reablement open . because other Brough are doing well only Haringey having problems. Its all about saving money. But Haringey council letting down vulnerable people in the community.

- it would be a good idea to have a brief synopsis of your proposals at the top of the questionnaire, and links to the relevant sections as the respondent works through the answers.
- The scheme sounds good until the details come out. "Shared Lives" is a great aspiration. But this does not have anything to do with nitty gritty specialised care that vulnerable clients will need to have a good quality at the end of life or when encountering a vulnerable period of their lives.
- There is a great need for supported independent living. For this to work well the poor communications in Haringey council must be improved. Use dedicated telephone numbers for services and staff with trained advisors. Have enough staff to avoid long waits.
- Adult social care users in Haringey, including people with complex needs, have told us they would prefer to live as independently as possible in the community where they have the opportunity to exercise greater control over their lives. The above quote is quite misleading as we have attended numerous events where the strength of the opposition to the council's proposal was universal. Nobody at any of these meetings expressed the sentiment of the above quote. We feel that the above quote is very unfair.
- This proposal is an utter disgrace and should be dropped immediately.
- Not enough detail.
- I am responding to this consultation on behalf of Haringey UNISON [REDACTED]
- I do not support the proposal to increase supported living accommodation at the cost of residential provision, which is what Proposal 2 proposes.
- Due to my experience of Day Opportunities 'efficiencies' over the last 4 years, I'm sceptical that the overall accommodation situation will improve for service users.
- Distrust in the whole consultation process

Responses on the Consultation – Proposal 3

Question A

Proposal 3: Increase the flexibility and availability of day services within the borough

A) To what extent do you support our proposals to close Roundaways, Birkbeck Road and Always Day centres which provide day services for adults with a learning disability?

- I like going to the day centre and I don't want it to close
- An opportunity to associate with colleagues and have fun. Very happy moment for us and a form of socialising. Always a happy person anytime I'm getting ready for the day centre.
- These centres are needed to support the community if they close a lot of people will need to travel to other centers and that is not always possible. It is better to have local centers
- Withdrawal of a valued service from people who rely on their Day Centre for social interaction, structure and routine for their day, will be a terrible loss for them and for their family carers.
- I don't know anything about Roundaways, Birkbeck Road and Always day centres
- My daughter who has a disability uses these centres, she enjoys both centres as they provide different services which my daughter enjoys. Taken out she will be devastated if this centre closes.
- Day centres provide stigma-free and specialist support. A place you can feel like you are accepted by people like you. Being "in the community" does not mean you have been accepted by community or are actively involved in the community. These are people with complex needs who need specialist support.
- I do not use and do not know these centres but do believe day centres are crucial in getting people out of their homes during the day and socialising in a familiar and safe environment which vulnerable people can get used to.
- For adults with (severe) learning disabilities and/or autism, day centres like Roundway/Birkbeck Road provide an essential and IRREPLACEABLE service. Closing these centres is irresponsible.
- People require places to go and socialise. An isolated group of society needs support to do this.
- At Ermine road there is not sufficient space for a person with challenging behaviour. They will be locked in a small area of the building and not be able to socialise with others. There are a few service users who may be abused and the building does not cover that risk at present. The behaviours of the service users have reduced at The Roundway and I believe the Council should invest in people with Autism instead of just placing them in a building with others.
- I have seen the difference that day services can make to people's lives and the loss of these services will be very difficult for the people that need them.

- The impact on these people will not be minimal. It will be fundamentally destabilising. In other boroughs (e.g. Islington, Hounslow) this has been attempted with the impact of isolating vulnerable people.
- These services are needed for adults with learning disabilities who will find it hard to adjust to change
- Although my mother does not access these, I am aware of how fragile social interaction can be for the elderly and the disable. It is just not a society I wish to be part of where these services are taken from the weakest and most unable to fight for them. Unbelievable.
- I do not know the centres apart from Ermine Road but I feel the services at these centres must be needed by local people
- I am not aware of the services provided by these centres, so unable to comment. Neither do I have a family member who attends but generally would not support its closure.
- If you close these places where will they go and if they go to other centres than they become overcrowded and proper care will not be provided. Also this will other people will not be able to go due to go and what will happen to them?
- It will affect my social life
- This is going to affect my life very much. My routine and my circle of support
- Will this accommodate for the other service users? Where will they go on a day to day basis.
- This is going to affect me personally, I need this service
- The Proposal to close these centres is very cruel. Those who use them and their carers rely on going to them. They meet their friends and feel secure with familiar staff. Those who live in residential care benefit from the activities provided. The well trained Haringey staff can also monitor these vulnerable people by looking out for any changes - physical or mental.
- I like going to the day centre ad I don't want it to close
- An opportunity to associate with colleagues and have fun. Very happy moment for us and a form of socialising. always a happy person anytime I'm getting ready for the day centre.
- These centres are needed to support the community if they close a lot of people will need to travel to other centers and that is not always possible. It is better to have local centers
- Withdrawal of a valued service from people who rely on their Day Centre for social interaction, structure and routine for their day, will be a terrible loss for them and for their family carers.
- I don't know anything about Roundways, Birbeck Road and Always day centres
- My daughter who has a disability uses these centre, she enjoys both centre as they provide different services which my daughter enjoys. Taken out she will be dewasistated if this centre closes.

- There is no legitimate reason for closing such centres, when the richest in Haringey and in the UK at large could be paying a far higher rate of tax that could prevent such services from being closed. Had Haringey Labour been more vocal in opposing and explaining the source of previous cuts to such services, and indeed to recent legislation such as the Welfare Bill, more momentum might have been gathered to campaign against such unjust cuts that affect the most vulnerable in society. Perhaps Haringey should also spend less money on campaigns such as the 'celebration' of 'Haringey at 50', and more money on advertising imminent cuts to services such as these? Such services do not merely benefit their direct users; they aid the wellbeing of the community at large, and a more equal society is in turn a more trusting one that is happy to pay higher taxes, to support each other etc. The closer of such centres is to the detriment of all. It is also a cowardly assault on those who may be less able to defend themselves than other less deserving groups in local and wider society.
- Depends on what alternative provision is planned and delivered
- My daughter has gone there for years, she has friends there and a routine, by closing her centre for day care you are depriving her of this.
- I'm all for creative and flexible solutions but I am not convinced this is the prime motivation. The current resources that it is being proposed are closed - are already 'in the community'. Potentially much is lost by breaking these groups up.
- I really do not know impact on day services
- These services are vital for adults with learning difficulties and their families.
- The service user response by LDX says "where would I go, where would we go... nowhere to go!" Am going to write to David Cameron he's the one doing the cut backs, have written three letters
- the day centre users told LDX "we chose the name always because we thought we would always be there" "upset and annoyed I will lose my friends and key worker"
- service user comment to LDX "we would struggle to get through the day", "I would be at home 7 days a week", "what will we do? stay at home getting bored senseless", "oh no why?... If you cannot, please don't - its not fair - I wont be happy. Don't want to miss the centre" "society is not accessible or appropriate for people with LD. We are far away from being an inclusive society"
- Service users said to LDX "tired, bored, at home, sleep all day" "Prefer it here to Roundway, I was at Roundway before"
- service users comment to LDX "Angry about the centre closing" " what will we do stay at home getting bored senseless"
- Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community

activities as they do now.

- I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe.
- Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- It is unethical to close centers that support people with disabilities!! They DO make a change in people's life, I'll recommend for you to spend a couple of month as volunteers to see it by yourselves!
- These are vital services which must be kept, the risk to vulnerable people if these centres close is unacceptable.
- It is essential for autistic people to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. • **People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from** • **These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients.** • **I am autistic myself, so I am acutely aware of the level of expert care and experience that is needed for staff to enable autistic people and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe.** • **Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult autistic children. The Roundway service provides a trusted, expert, safe place for autistic people to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.** • **I oppose the**

proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes autistic people months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.

- I am against it for many reasons, but first and foremost because of the adverse effects it will have on the clients with respect to their psychological and social well-being.
- Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- The service users have very complex needs which can be met through the use of these services as well as providing essential respite for families and carers of these individuals ! They have a right as human beings to have the care they deserve!
- We are in urgent need of facilities that support those who are vulnerable and not yet fully understood by the outside world. It's places like the Roundway that help support these adults back onto the real world.
- There is a no doubt very old fashioned expression "Fine words butter no parsnips". It is no good talking about the hypothetical services you would put in their place, or engaging aspirational rhetoric. It is about cutting services to the most vulnerable. If the council meant what they said the day centres would be replaced by better facilities if they needed to be and nothing would be closed until these were up and running.

- Members of my family have used or worked in Day Centres previously and I know what an amazing service they provide for adults with learning disabilities. The reasons behind their closures are always economic and never in the best interest of the service users. I realise the council has to choose where to cut services to stay in line with budgets, but the care of vulnerable people should be something we are willing to pay for as a civilised society.
- As well as there being a need to reallocate people in receipt of a service, there is also a vital need to offer continuity and a consistent approach to minimise the insecurity of the person in receipt of the service. Depending on the needs of the individual should determine where they are most comfortable receiving that service and not relocated for any other reason. Many thanks [REDACTED]
- I think that it is essential to maintain day services at fixed sites
- The services provided by these excellent centres is something of which we should all be very proud. The staff are highly skilled and trained and the service users are thriving at present. To take away the familiar and much-loved services would leave service users and their families bereft - there is simply nowhere else for them to go that would cater for their needs.
- Day centres not only provide a safe social space and facilitate staff professionalism and development, but also offer short term respite for carers. Such centres are a crucial part of overall care provision.
- I have an adult son with mild learning difficulties. Although he is able to hold down a full time job, I can appreciate how essential it is to have day centres which offer specific support for people in need of such support and which gets them out of the house to meet other people.
- People with Autism are traumatised by major changes to their circumstances and it is wrong to inflict this on them. You have a duty of care to these people and you must take that responsibility seriously. They are some of the most vulnerable people in society and they need and deserve your protection.
- I know that there will be residents of Haringey and their close families who regard this as a lifeline. These people's carers will crack under the additional pressure put on them to look after their loved ones with no respite. This will cause additional costs to the borough in terms of mental health and health issues and ultimately carers refusing to care for their loved ones.
- As a social care professional but also who has a brother with autism and been a carer for a grandparent I am convinced of the importance of such Day Centres not only for those attending but also their carers. The vital need for routine and a consistent support network should not be underestimated. The enormous pressure already placed on carers will be increased unnecessarily which could lead to an even greater strain on council resources when home care breaks down due to a lack of community support.
- These centres provide essential, expert care for those with severe autism, who rely on routines, experienced and capable staff and may easily become isolated without these centres. They also provide essential respite for family members and carers.

- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities.
- I feel that it is the council's duty to provide a safe and supportive environment for people with complex needs - without day centres such as the Roundway they are at risk of isolation, neglect and abuse, and put extreme pressure on the family and caregivers who are often elderly and in poor health themselves. People with autism and complex learning disabilities need and deserve expert care and support, and I feel very strongly that this should not be withdrawn by the council.
- Day Services provide continuing support and structure for the disabled and help them to continue their development.
- until services can be replaced and developed hundreds of vulnerable people will be trapped inside their homes with no social outlet or opportunities to access the community
- Because people with autism and learning disabilities need stability and routine and to build up relationships with staff members. From experience, the individual services do not work as the staff employed are constantly changing and are not trained enough. The service users get very anxious about change and they can't build up a relationship so easily. They are also missing out on socialising with other people so can become very isolated. The carers also find it more difficult when the support worker cancels at the last minute and they have to cancel what they were going to be doing.
- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients.
- These centres employ trained staff who are expert at helping people with autism and other learning disabilities. Their existence also ensures that the carers of these people get some vital respite. No civilised authority would consider closing down these centres.
- There is not enough support for such people, yet in our modern world there are an increasing number of people diagnosed with such difficulties. Support at home does not, in my opinion, fill the need as well as it has to be completely individualised, may end up with a needy person not getting the help they need and just helps society to brush the problems under the carpet.
- This is a lifeline for the adults with autism AND their carers. This is a lifelong disability for some. They need attention and care that is not accessible anywhere else. They need specialist intervention to bring about their involvement in the community and at large. Without which there could well possibly be further challenging mental health issues. Their needs are such that they need professional help that often parents and carers may not know of or are not skilled at providing and this specialist help provides parents with an immense sense of relief without which they could possibly fall into depression themselves AND it provides Respite to

them as they are the primary carers.

- I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe. It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- Services to support adults with learning disabilities are vital to ensure they live a fulfilled life and are given opportunities to learn and develop vital independent living skills which will promote self-esteem and confidence
- People with learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children. These locations provide a trusted, expert, safe place for people with learning difficulties to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away these services will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- The Roundway provides care and support for people with autism and learning difficulties - some of the most vulnerable members of our community. It also is of valuable support for the families who care for their adult children with autism and is their only means of respite when they are struggling with the day to day difficulties of living with an autistic person.
- Adults with autism need specialist services because of the specific problems they have. It can be very difficult and sometimes even dangerous for them to access services out in the community eg busy shops, swimming pools etc.
- vulnerable adults need routine, familiar staff and a setting which also gives their carers a predictable break; home visiting is unreliable and much more difficult to manage..
- very important for people with ASD and LD to have an opportunity to mix socially with others with similar disabilities
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.

- Hard to know where to start. Knowing someone with autism I know how difficult it is for them to trust new people or new environments. Then there is the matter of the loss of trained staff in a known and safe environment. We mustn't also forget the carers themselves who are often elderly with health problems themselves. In summary I oppose the proposal to close the Roundway service because I believe that closing it will lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; and they work as a team which provides the service users and the staff with safety and support.
- In my experience, these centres are a lifeline for those with learning disabilities. They provide a safe secure environment for people to get out, socialise and expand their horizons.
- Staff working with people with autism have the necessary skills to help them get the most out of what can be a poor quality life. People without that training simply cannot offer the help needed.
- I know how critical these services are for the most vulnerable people in Haringey. It is not an exaggeration to say that for some, it would be removing one of the few services that makes life worth living. For shame on the council for even trying it.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- You have already closed the centre in Alexandra Road for adults and now you want to close these other services which will leave vulnerable people without support. You do not put yourself in the minds of these people who rely on and need these services yet at the same time MP's are claiming expenses for staplers, a cup of tea and other things that they can clearly afford out of their own pocket. You need to look elsewhere rather than making these deep cuts to mental health services.
- People need centres near to where they live- it will cause distress and difficulty moving to the other centre. It is also not appropriate to not give good support to "non-eligible" users. Just because they are not on max benefits/supported housing does not mean that they or their carers do not need help or respite. Your lack of clear plan for these users is extremely worrying.

- For anyone who knows anything about the lives of someone with autism and their carers, taking away a safe, supportive sanctuary for that person and the critical respite essential for their carers to be able to maintain their own mental health, is absolutely necessary. The proposals put forward here do not offer an alternative, there is no clear alternative for supporting adults with autism in their home in any way that would effectively meet their needs to the extent of the day centres, and this certainly won't provide respite for carers. As someone who looks after a young boy with autism, I know first hand that centres for special needs are absolutely vital, and those who prioritise this pot of funding for services such as 'libraries' in the community (when most people can read online) over the mental wellbeing of the community is hugely misguided. The council will certainly be opening itself to yet another wave of damaging press if they go ahead, as the effects will no doubt be heartbreaking.
- These are essential services that would have a profound and detrimental effect if they are to **close, in particular:**
 - **It is essential for people with autism to have routines and consistent structures and people around them.** If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right **experience or knowledge to support them.**
 - **People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from**
 - **These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients.**
 - **my son has autism and we are acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe.**
 - **we as parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.**
 - **I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support**
- Disabled and autistic people are part of our community and as human beings should be given the best possible care and respect. These centres strive to give them that. I feel that your proposals as a council are all about money, and you should be ashamed of yourselves if you vote for this.
- I find the wording of the whole survey quite devious. Haringey is obviously bent on farming out care duties and obligations to contractors (no longer undertaking these 'directly') plus the

language is nebulous and obfuscating in a way that gains little respect from anyone with half a brain. Having formerly worked in a drop-in centre in Islington, I understand very well the acute and essential need for such a 'building' based centre, which is also cost effective due to the gathering of numerous people in one place. It is disastrous to close valuable day centres. Please rethink!

- Autistic children are often very challenging and are also very vulnerable. They need trained, experienced and caring staff for themselves and to provide respite for the childrens' families. Haringey's Day Centres, especially Roundway are a public and community service that Haringey should be justifiably proud of and continue to fund.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now. I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- 'Opportunities' is a terribly woolly word: Will adults with autism be enabled to form social relationships within a safe environment? Do carers get regular respite breaks?
- My son has autism and may never work. Day centres will be crucial to him leading a varied and worthwhile life. I am horrified such essential services for such vulnerable people can ever be axed. It is heartbreaking.
- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of

people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from.

- Adults with learning disabilities need all the support they can get and should not be discriminated against.
- Alternative support for adults & carers
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- There is a desperate need for services for complex clients
- The centre is essential to the quality of life and mental health of the users and those who care for them. To close it is short sighted planning and will cause problems in other areas of provision, such as NHS and cause chronic manageable problems to become acute and possibly life threatening.
- Ending support is the wrong direction to take.
- The day centres provide a stable environment and a stable well trained group of staff to care for some of the most high need adults with learning disabilities. The clients need the stability and staff who have high skills and can get to know the clients over a long period in order for these very vulnerable people to have access to community activities. The break from caring which this gives to the families is vital. Families are under enormous strain in providing caring over a long period and having the clients attend something outside the home is a huge help in being able to keep going. Expecting exhausted families to access and use personal budgets is not the same thing - and the service users who do not adapt well to change may not cope with new staff, lack of routine, changes to the way they are managed etc.
- I work with adults who benefit from these services and closing day centres is cutting off our most vulnerable from a sense of community and the support networks they need. A familiar, supported holding is required and closing day care centres literally cuts off a much needed life line.
- Having previously lived and worked in Haringey for over five years I know that for many people these days centres are the sole point of contact with the outside world, outside of hospital. That they should be closed in the name of efficiency is absurd when many of them are simply under-utilised. This is a classic case of council mismanagement attempting to throw the baby out with the bath water.

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- I am an elderly person, just under 80 years old widow, and can envisage that I am likely to need such services in the near future. In fact I have been reassured of their existence ever since my health has been failing increasingly for the past few years.
- In particular the proposal to close the centre for people with autism means that their family has no respite and the people themselves do not have the opportunity to have some time with people who are trained to deal with their specific problems.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- It is vitally important that people with learning disabilities have a safe, secure place where friendly, professional staff they know and trust can help them socialise, learn and explore the world in a gentle and person-centred, appropriate way. Closing day centres robs them of that and is a violation of their human rights.
- It is essential for people with learning difficulties to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. This will put a greater strain on relatives & helpers & probably cost far more.
- Adults with learning disabilities need help to go out and be sociable and get their needs met

- These centres are highly specialized. To close them means for many people with learning disabilities and autism more isolation, more problems to learn all day living activities. We need special trained staff and centres for these people!
- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from
- This is a service which should remain in the hands of the council. I know of families who use these services and know how much they value them
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- Although community services can be more flexible many people with autism need routine. To change services can be traumatic for a person with autism. People with autism can often flourish more in a set, regulated, familiar environment. They find building relationships difficult so need a small number of well known, well trained specialist staff. A wide range of flexible community based options, whilst appearing more attractive is often simply unable to provide the familiarity and routine that a person with autism relies upon
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- I live just a few yards from the Roundway centre. I can see that people who use the centre have severe disabilities, and I know that to care for their need a specialised and consistent level of care is needed in an appropriate environment. I oppose the proposal to close the Roundway service because I spoke to staff and relatives of the people who use it and I know that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the

service users and the staff with safety and support.

- People with autism need routine, and closure of these centres will be severely disruptive to clients who use the services, causing their mental health to suffer. It will further isolate them and lead to greater anxiety. It will also add an intolerable additional stress to parents and carers who need the respite these centres offer them, and will mean additional financial strain in seeking support elsewhere.
- Day centres are integral for disabled and vulnerable people to meet others and enjoy a different environment and to give their carers a welcome break
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- the people who use the Roundway have complex needs and they need the expert care available to continue to get out of their homes and meet people and do things together that the rest of us take for granted, Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base.
- Without the RoundwayDay Centre , the adults with autism (who are known to me) would be deprived of the presence of trained staff , who have strategies for coping with the challenging behaviour of the adults with autism. The adults with autism will then be left in total social isolation
- These day centres are vital for people with very complex needs to get support and prevent isolation. They are also respite for carers of adult children etc., which is equally as important, and would not be provided in the same way by home-based services.

- It is essential that Autistic people have a friendly place to meet regularly, and changing routines is hard for many to adapt to. It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now. I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. The day care centre provides this resource. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- These centres provide places of support for the vulnerable in ways that would not otherwise be possible.

- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities. These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. Day centres are particularly suited to the needs of these people who would find it difficult to access services in the community. The Roundway service also provides parents of people who attend with essential respite from caring for their adult children. For many of the parents, when their children are at the Roundway, this is the only time that they have to rest or do everyday things like shopping or cleaning. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now. I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- I think that closing these two centres would seriously undermine the support for a very vulnerable section of the local community.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe.
- It puts vulnerable people at risk.
- This could be outsourced to specialised private day opportunities

- Severely autistic people have needs which can't be cared for by untrained people. I believe the most humane and efficient way to care for them is to retain the existing Day Centres which have trained staff and where people with these very specific needs can be grouped together. These centres also support family in their care of their autistic relatives by enabling them to undertake 'background' tasks such as washing clothes, buying food and cleaning the house.
- As a parent of a person on the Autism spectrum, with friends in Haringay who use these facilities I am keenly aware of how vital they are, and the devastating effect it would have on the clients and their families if they were to be closed.
- Places like these are invaluable to the people and their who use them.
- These services must continue to support parents of these clients, some of whose special needs are very demanding. Otherwise they have no respite, it's often 24-hr care. It's a change of scene for clients & allows parents to do essential errands. Help for both the parents and their special kids is really, really needed.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- 'Flexibility' in this case is euphemism for limited, closed, unavailable when needed. 'Opportunity' usually means clandestine offers from the company that offers the 'cheapest' services. I've seen too many 'flexible' choices and 'opportunities' this government has 'developed'.
- The Roundway service is a vital service for adults with severe learning difficulties. and challenging behaviours. Those attending need it, because their condition demands they have a consistent regular lifestyle, and going to Roundway provides this for them, and their carers need it, because they know it meets the needs of the attendees and gives them a lifeline, which they so deserve
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.

- The rhetoric of this proposal is flawed - buildings based services ARE opportunities within the wider community. Services have to be centred in a location, unless they are individual, home-based services. Cutting a specialist service will not increase availability and opportunity for people who need the specialist service. People who use the Day Centres are in need of specialist knowledge and intervention which will not be provided if these centres are closed. To remove services from extremely vulnerable adults, who rely on others for daily activities, is to discriminate against them. In particular, routine is absolutely essential for people with autism; lack of consistency, change and changes in routine cause distress and anxiety to people with autism which is extremely hard for them to manage, potentially resulting in behaviour which challenges others. Further, this will hugely increase the burden on carers which will impact their mental health. I think this proposal is appalling and heartless.
- Day centres are important for vulnerable people with special needs, both for the opportunities they give such people and for the respite provided to their carers. The proposal to close day centres (aka 'develop new forms of day opportunities'!) will have a negative impact on the people who need them. These cuts should be resisted not packaged as an 'opportunity'.
- This does not "promote flexibility, availability and opportunity" for the people using these Day Centres- it's a mealy-mouthed way of trying to justify a Cut to the most vulnerable members of our community.
- There are many autistic adults and their carers living in Haringey who would have nowhere else to go if the day centres are closed.
- The most vulnerable, autistic people need stability and consistent care by trained specialists, as they have at the Roundway. They cannot benefit from changing activities in the community, which they only find intimidating. The Roundway Centre is essential for their wellbeing. It also means the carers who have such a full-on and exhausting job get some respite and time to do household tasks. Anyone who thinks the users of the Roundway could be better cared for some other way should go home with one and spend a day finding out what it is like.
- The day centres provide expertise and a quality of care that is monitored and also a safe place. It is a myth that hospitable places for people with LD exist and are accessible in the wider community. There are only shopping centres and parks. In Haringey there are not enough places that can accommodate the needs of people with autism
- These centres are key for the care of some of our more vulnerable members of society.
- Day centres for adults with learning disabilities are a vital part of getting these adult as into the outside world to socialise with others in their situation. It's also gets them out of their house and gives them something to look forward too. As an individual with a brother who has autism, I know how much such schemes mean to those with special needs
- Because that is where people meet up with friends, and if they close the Day Centres people will be at home all day bored. People with Learning disabilities and Autism especially this group of people need consistency so they can get the support from Qualified Staff.
- I see parents struggling to cope with their autistic kids, and feel they need the comfort and support of a stable centre with known experienced caring staff
- These vulnerable people will be hugely affected by not having these unique, supportive spaces where they can be given opportunities that they would not normally have.

- All these day centres are needed. They may need improvements and a more flexible programme but they are lifelines for those currently using them and the many more come up through children's services into adulthood.
- There are no concrete proposals set out in this consultation, only principles. Having worked in this sector for very many years, I am clear that community based services can be developed with families, and providers, by developing and changing day services....closure without detail for meeting individual and family needs clearly is unjust, and ineffective.
- I understand from family and carers of people with learning disabilities and autism that a building-based environment with expert staff is vital for them and their families and that the closure of centres like Roundway, Birkbeck Road and Always Day Centres would put many of them under considerable stress and add a host of problems to their already very difficult circumstances.
- because it is an autism-specific centre for people with very complex needs. These people need expert, well-trained support staff to enable them to try new activities and to go out into their local community. Many of the people who attend the Roundway are non-verbal and can have 'challenging behaviour'. **This makes it especially difficult for them to go out into the community or to undertake activities such as shopping, using public transport or going to a park - activities that many of us take for granted.**
- The support provides a lifeline for the users and their carers
- These centres provide specialist support, they provide a community for users and their carers. Having a centre enables a critical mass of the specialist staff and resources that are required to provide effective services in one place. This improves the opportunities for clients, enables a social aspect and is more efficient. The "community" in the proposals is ill defined and lacks specifics and lacks the means for basic governance of the care being provided. The closure is the council abdicating their basic social responsibilities.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community

activities as they do now. I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.

- Only a minority gain most lose any contact outside of the home.
- Because the people who need & use these day services, still need day services & want to use them & will use them.. I work in adult mental health & know very, very well, that closing services does not mean the need has all of a sudden gone. All of these day services are much needed & used & should remain open.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- Parents and carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- There has been no alternative service that has been outlined in the consultation other than "soft" ideas that a "social enterprise" will be involved. Closing centres that deal with different learning disabilities and grouping them in one makes no social care sense. Further, the consultation breaches the Equality Act and the council public duty thereunder.
- It would make me lonely and sad and leave with me with no day centre. Change makes me anxious and sad.
- I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them and others around them safe.
- Closing three centres = pressure on remaining spaces, centres which don't have the capacity for the need, and huge upheaval for those least able to deal with it.

- First of all, I am horrified that Haringey Council sees fit to focus cuts on the most vulnerable people in the borough, those with severe learning difficulties, most especially those with autism as well. Closing day centres like Roundway for people with severe autism, , who absolutely depend on routines, on having the same experienced people around them day after day, people who are properly trained in autism, a complicated and difficult condition to understand. If things change, they can either suffer complete mental withdrawal, or complete **hysteria. This will put extreme stress on the borough's mental health services, and on the parent carers, who will themselves likely collapse, needing further mental health or other support. So the council's penny-pinching closure of each centre for people with severe needs will actually lead to more not less spending on care needs. And surely the borough of "Baby P" does not need any further bad publicity when "Adult P" dies or is damaged due to bad care?** A person with autism finds all change traumatic, and needs a steady continuity, or they can be traumatised for life. To be suddenly told your day or residential centre is closing and all your daily routines upset will cause permanent harm to most of the people there, screaming, flapping, and hitting out for the rest of their lives. The borough is ignoring the real and permanent harm they will be causing by making these cuts. And the home carers too will suffer, as the only time they can go out to shop, to the doctor or do housework will be when their person is being looked after. Some private care companies can supply untrained staff, for fewer hours, on an unpredictable rota, provoking mental breakdowns. People with severe autism cannot go on a public bus, they cannot go into a shop, they cannot even step into a park, all because strange faces are there. They cannot go out and make their own friends, most especially those who are non-verbal. In particular, the cuts to residential and day care centres will hit people with, by definition, an inability to cope with normal life, and also their **family carers. I have met and listened to many carers recently. For instance, there's one man who cannot go near a shop, as he likes to kick in the glass doors/windows. How will his parents shop if he is returned home? Or a woman who cannot cope with people near her. How can her family carers even get food in? Or two men who cannot make friends in the ordinary way. Each has his ONLY friends at his day-centre, and will be alone and lonely with elderly parents. Or the woman who has both a son with learning disabilities, and a mother with Alzheimer's. How can she even manage their different needs at home, let alone get out, to do basic food shopping?** All of this points to a fundamental flaw in the Haringey policy, the so-called "re-ablement" which **chucking them out of day centres is supposed to achieve. The rationale is given, that it is better for people to be in their own homes, to "re-able" them, to become more independent. That is impossible for people with Alzheimer's, which is progressive, with Severe Autism, which is not remediable, or with severe learning difficulties, especially when the task is dumped on elderly and already stressed parents.**
- Simply because it has been a service for rehabilitation, bring close to normal, the physical mental and social well being of the adult with learning disability
- Closure of Day Centres will put pressure on the remaining Ermine Road as clients move over to Ermine Road.
- It is outrageous that the council is considering closing these centres. And for a Labour Council to do this given the new and radical approach of its own party beggars belief. Time to dip into the reserves to keep these vital centre open! It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from These are individuals with autism who have complex and sometimes

challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. I have a friend who has a son with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now. I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.

- Day care services are already too stretched
- Day opportunities services for disabled people are very important to enable users to be part of our community. Not all of us would be affected but the most vulnerable residents have to pay for it. I believe the Council could save money cutting the budget in other services or changing day opportunities services to generate their own income and keep running as Council services.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- To say you don't have the money to keep these centres open is a lie given you've just spent £56 million on agency consultants fees over the last couple of years. And this year you've spent £85k on a new logo, £400k on Woodgreen high street when it wasn't particularly in need of doing. £300k investment in a chicken shop! You are intending on closing well needed centres for people with learning difficulties that as a result of doing so will cause great stress, depression, create a life of untold hardships for the people with learning difficulties & their families. It will mean some people will no longer be able to go out on a regular basis & will remain in their homes looking at four walls. The people who attend the centres are looked after by people with qualified experience, it enables them to go out daily & have something to look forward to each day & help them improve their lives. It also gives much needed respite to their families especially those that are elderly. These centres are a lifeline to it's members & their families. Many of the people who attend the Roundway are non-verbal and can have **'challenging behaviour'**. **This makes it especially difficult for them to go out into the community or to undertake activities such as shopping, using public transport or going to a park - activities that many of us take for granted.** People with disabilities such as learning

disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. I will do my utmost to bring to peoples awareness what a disgusting attitude Haringey council has towards people with learning difficulties that they put chicken shops & logos above people with learning difficulties

- as the parent of an adult with severe learning disabilities and autism, living in Islington, i know how vital for the individual and their family is the provision of day centres which employ people who have received autism-specific training. These day centres can make all the difference between enabling an adult to stay in the community, and requiring them to go out of borough in far more expensive long-stay provisions that separate people from their families, meet their needs less well and cost the local authority more in the long terms.
- Because people need these services and the continuity they provide, when people have disabilities it is important that they have easy access to a centre. Birbeck road and Always have the disabled access and service users are used to using the services provide. Changing these will distress the individuals and cause them upheavel not only that people may have limited mobility and not be able to travel easily to other veunues in the borough.
- People with problems of this kind depend enormously on such services. Closing them would remove an import means of support.
- Because we need facility like these for adults with learning disability
- First, there are no alternative places for people to go to in the local area. Second, people will lose the benefit of meeting other familiar people Third, it's not clear what will happened to people if they don't attend the above places
- No care for vulnerable adults can rely solely on home care.and it seems this is purely a cost-cutting exercise without providing real alternative solutions for the proper provision of care or day respite for carers.
- Strongly oppose the closure of three day care centres. How can anybody pretend that the current level of service provision (well regarded by users and carers alike) can be maintained if this takes place. There are various points in the proposal which are immoral, such as the idea that you would subject all current service users to a reassessment so you can fit a quart in a pint pot. This is probably also illegal since since guidance to the Care Act 2014 states that states a 'review [of a user's needs] must not be used as a mechanism to arbitrarily reduce the level of a person's personal budget'. There is no viable proposal as to what would replace the day care centres, what impact the closures would have on service users and carers and no appreciation that these services are preventative and allow carers to live longer and healthier, as well as users.
- these are essential community resources for services users that not only provide effective support for those with learning difficulties but also provide full time carers with essential breaks from their responsibilities. reduction in these services will have negative effects not only on service users, but also their carers. this will in turn impact negatively on local primary care.

- The Council promised that "Where major changes to service users are proposed after budget setting, detailed plans will come forward and decisions will only be made after much more detailed consultation" (Para 7.1.4 of Item No 819 of 10 February 2015 Cabinet). This was reiterated by the EqlA produced to support the proposals. The consultation on proposed closures and service changes, and the subsequent co-design process, were completely inadequate and would not meet the minimum requirements for a statutory consultation. No information on the type, shape and quantity of alternative or future provision, no information on the level of need, the re-assessment process, no information on timescales for change or no information on the community capacity are provided by the Council. 2. The EqlA produced are incomplete and inadequate, they do not include e.g. human and financial impact of closing the day centres. 3. The Council's proposals rely on new untested and/or yet to be defined or developed new models of services. The Council provided no evidence that these new models would meet the current needs let alone the future demand. Although there is no objection to providing a wider range of services, it is very important that they are in place, proven to meet current needs and proven to have the potential to meet future demand before closures are considered if adequate support to the service users and their carers are to be secured.
- People with Learning Disabilities and Autism need constant care and stimulation. With all the cuts backs this will not happen.
- I do not know what services the above centres provide.
- Concerns about meeting the specifications in the Care Act 2014 with regard to the assessment of those using the services at present.
- You have suggested that you are hoping to involve other agencies to provide services however, by closing these centres, you are removing buildings from which the service can immediately be delivered. These buildings are already set up in a manner suitable to the service user groups. In addition, the service users, their families/carers, and local residents are already aware of the use of the buildings. If they are closed, you are creating a need for services to be delivered elsewhere, in environments which may be unfamiliar to service users, some of which do not cope very well with change. Even if the day to day service is no longer delivered by you, private providers may find greater security providing the service from council owned buildings. Tenancies in the private sector may not be as secure as that which can be granted by you to run a service in your buildings on your behalf. In addition, losing these centres may lead to day centre services being delivered in areas which are ill-equipped to manage the needs of the service users, such as having enough space outside to park transport buses. If it means changes to the use/structure of the road e.g. the installation of disabled bays, increased refusal of dropped kerb applications etc, local residents are likely to react negatively. The service users attending these three centres deserve to have the minimal disruption to the provision of service provided to them. Changing location, staff, frequency of days attended etc may be more disruptive than you are aware. Whilst it is easy to look at how best to provide a cost effective service, the actual implications for dealing with disruption and providing stability will not rest with you. It rests with family members, carers and, ultimately, the new staff hired to provide the community enterprise/day centre service. There will be a lot happening at once and there is a risk that there will be very little support, assistance or guidance from you, as you are also short staffed.
- Roundway is the only dedicated day centre for autistic users. To close this would be to go against the government's advice under the 2009 Autism Act. LD users generally need a fixed and consistent base from which they can enjoy friendships and learn lifeskills and from which they can access community activities. The closure of these bases will be damaging for these vulnerable users.

- We object to such a huge reduction in the provision of day services for people with learning disabilities. Residential care homes and supported living projects are unlikely to provide anything near to the current level of service provided by these day centres, and service users in such facilities are likely to be left bored and isolated. We believe that some providers of such services will actually provide very little in terms of day opportunities, and it will not be possible to constantly monitor this. Vulnerable people will be separated from friends and staff that they may have known for many years, and it may prove difficult to keep these relationships going. Particular concern has been expressed about the closure of the Roundway, given that it is a specialist service for people with autism. The proposed new service may not be able to meet their specific needs. The consultation document states that **“service users will be encouraged to use Personal Budgets to access any support required to meet assessed need.”** Please confirm whether services users in residential or supported living services will receive a personal budget to purchase day services. If this is not the plan, then **who is this referring to?** The document also states: **“Following the reassessment or review, if, for any reason, there are service users who no longer have an eligible need, we would work closely with the service user to identify appropriate support.”** We are concerned that there may be a move to review or reassess vulnerable people in such a way that they are deemed not to be eligible for services. This would be grossly unfair, it would put people at risk, and it could breach legislation.
- I work in Birkbeck Road and Always Day Centres (the Community Hub service) and it is a well-enjoyed service by adults with Learning Disabilities (LD). The overall well-being of the service users will worsen by the loss of these centres and I believe that there will be an increase in their challenging behaviours.
- Disabled people should be able to have services that fit their varied needs. For some people that means a supported shared service with expert staff, which is provided in these day centres.
- Disabled people should get the services they need in a shared setting with staff who understand their difficulties and that do not have to make a profit.
- These are very vulnerable people with extremely high and complex needs and challenging behaviour. Without these condition specific centres clients will have inadequate support out in the community and be picked up by police/emergency services who aren't equipped to deal with them. It puts clients and staff in danger and at risk. It leaves staff who have a difficult job unsupported and without colleague support. Alternatively clients stay more time at home which puts an intolerable strain on the elderly parents leading to inevitable transfers into extremely costly residential placements. Clients will also be confused and distressed by more time at home. Parents will be burdened with updating and training staff about the client as there is no staff support or crossover in this situation. Councillors should take a client home for a week and care for them to appreciate just how extremely difficult and restrictive it is already before creating worse changes on top.
- They are a lifeline for clients and carers
- People with learning disabilities and autism are already more socially isolated than other people, so these day centres are essential in providing them with a safe environment where they can socialise and access community activities.
- These provide a safe place for people to go in the community.
- the staff at autism spectrum are well trained and have a lot of experience. The people at the day centre see the staff as friends. People with autism have difficulty with change in their lives and get very unsettled.

- They need care
- There is inadequate provision to cater for the needs of people.

Responses on the Consultation – Proposal 3

Question B

Proposal 3: Increase the flexibility and availability of day services within the borough

B) To what extent do you support our proposals provide a new model of day opportunities from Ermine Road Day Centre through an alternative provider?

- Not sure
- I am not sure where that is so I can't tell.
- I believe when these centers are out source the focus is not on the people who need the service but on profit or having a viable business.
- If the alternative is a good provider, who will put money into the service and provide well trained staff who are properly paid and supported to undertake the important work they will be doing, this could be beneficial. If the Provider is inadequate, this could be disastrous. It will be vital that the service is closely monitored and that it can be re-tendered if it is failing.
- I don't know anything about this day centre
- The other centre provide other services, taken away those services will limit access for my disabled daughter.
- No details given about the kind of services alternative provider would provide; therefore it's impossible to comment on this proposal.
- It is very difficult to answer the question as much has not been said about how/what the new model would look like. I proposed for the current staffing manages the new alternative model and be given the timeframe to improve the service just like what is possibly being proposed by the alternative model.
- Not sure what an alternative provider will provide. If the service better all well and good but if not what recourse does the service user have?
- Please see above
- The users of day opportunities at Ermine Road are a community and are supported by each other as we as the staff. In my opinion and concerning my sister [REDACTED] specifically they react poorly to change of any kind.

- Social Enterprise = private company and a loss of standards as the focus will become maximising income
- How is it going to benefit me?
- If it is going to support my need fine
- Ermine Road Day Centre requires a lot of improvements with the building and staff. Areas require improvement. Training of staff and service users to be provided high quality of their needs.
- Is it going to be better?
- Ermine Road is a wonderful resource - I would say a centre of excellence catering for those with very complex needs. The staff are welcoming and appear to enjoy their jobs, taking very good care of those in their small groups. To break this would be unbelievably stressful for all concerned. At least Haringey employees are properly trained.
- No details given about the kind of services alternative provider would provide; therefore it's impossible to comment on this proposal.
- It is very difficult to answer the question as much has not been said about how/what the new model would look like. I proposed for the current staffing manages the new alternative model and be given the timeframe to improve the service just like what is possibly being proposed by the alternative model.
- Not sure what an alternative provider will provide. If the service better all well and good but if not what recourse does the service user have?
- Please see above
- The users of day opportunities at Ermine Road are a community and are supported by each other as we as the staff. In my opinion and concerning my sister Lena Murray specifically they react poorly to change of any kind.
- Social Enterprise = private company and a loss of standards as the focus will become maximising income
- How is it going to benefit me?
- If it is going to support my need fine
- Ermine Road Day Centre requires a lot of improvements with the building and staff. Areas require improvement. Training of staff and service users to be provided high quality of their needs.
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- I am not sure where that is so I can't tell.
- I believe when these centers are out source the focus is not on the people who need the service but on profit or having a viable business.
- If the alternative is a good provider, who will put money into the service and provide well trained staff who are properly paid and supported to undertake the important work they will be doing, this could be beneficial. If the Provider is inadequate, this could be disastrous. It will be vital that the service is closely monitored and that it can be re-tendered if it is failing.
- I don't know anything about this day centre
- The other centre provide other services, taken away those services will limit access for my disabled daughter.
- I am not aware who this 'alternative provider' is, so wouldn't not like to comment too strongly. However, experience of private sector contractors and of the disgrace of PFI would suggest that contracting out through 'alternative providers' is a disaster that often results in a waste of public money and weakened accountability.
- Depended on the alternative provider!
- ermine Road has been providing an excellent service for years. You will be destroying my daughter's social routine.
- as before
- If services are better and cost effective
- It depends who/what the alternative provider is. I would have concerns about the quality of the services unless stringent monitoring was in place.
- what would the new model be like? unless we are told possible ideas we can't make a proper decision
- What would a new model be like? Unless we are told the proposed ideas we can't make a proper decision
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- What would a new model be like? Unless we are told the proposed ideas we can't make a proper decision
- I would like to see details for the alternative provider.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead

to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.

- Ermine Road Day Centre is the setting for several charities providing workshops (Alzheimers, Kith and Kids and many others). It MUST be open to do so.
- Autistic people don't like change, without a very good reason. I should know, because I am one!
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- I feel this is heavily glossed over in the Consultation Document. I cannot find enough detail about who the provider is or what the "expanded provision" would be.
- The more the council disperses delivery of services the poorer quality of service delivered
- The existing service is working perfectly well, the staff, service users and families are happy, therefore any changes would directly go against their best interests
- You only have to look at the negative consequences of outsourcing to see that this is a bad idea - lower paid staff with poor working conditions and limited training opportunity is no way to run services.
- Change is always traumatic for people with autism. Leave things as they are and stop trying to cut costs for essential services.
- Why would you do this when they are happy with the current provider?
- The consistency of support for those with autism/learning difficulties/dementia is vital. The council needs to ensure that care is of the highest standard provided in a not for profit manner and therefore should not be handing over the care of vulnerable people to alternative providers.
- Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss

as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.

- Although I support the policy of helping people with learning difficulties to lead a more independent life I firmly believe that there is still a need for day centres for some service users and their carers - expert care and support provided by these centres is essential for some of the more vulnerable members of our community
- An alternative supplier will in the long term be cut back and provide a lower level of support.
- no knowledge of alternative provider
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- I'm sorry to have to say this, but my experience of outsourcing is almost wholly negative. An 'alternative provider' will run the service in order to extract a profit. The profit always comes from job cuts and poorer working conditions, with the inevitable knock-on effect of a poorer experience for users. No, thanks! There's no reason why the council should not continue to run this important service. That's what the council is here for - to run local services on behalf of local people.
- When companies take over from the government, they are profit oriented, and may not provide an adequate service, often cutting corners or requiring their staff to tick boxes, rather than seeing the people they are dealing with as commodities rather than as human beings with individual needs.
- Specialist help is already in place AND is shown to work well, why then would you look at alternatives? Budget alone will not make up for the good work these people are already providing, looking elsewhere when these resources you already have are providing such a lifeline to already disadvantaged people would be a foolish move. These adults with autism need routine NOT change. They need the same safe place that they are accessing right now with the same skilled people they see right now because we now that routine and structure in their lives has been proven to work for them and make them feel safe and happy. It is a testament to our caring nation that we have established such great places for our most needy, without it we would truly be letting our people down.
- as per reasons advised in no 5
- Do not have enough information on this centre.
- current centre very valuable and appropriate
- Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a

trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.

- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities. Many of the people who use the Centre have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in supporting them.
- the only way that I know 'alternative providers' can provide a service for less money, is by cutting the wages and conditions of the staff and lowering the standard of provision.
- People with autism need continuity of care and experience & skills in communicating with them. An alternative provider means a huge upheaval and a less skilled team.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- An alternative provider? One who gives you the lowest quote? One who only cares about profit and not care? As usual quotes mean more than peoples lives, this support should be provided by the people that have been providing it in the past.
- Keep it run by Haringey so you can adapt the service. At present you dont even seem to know who's going to end up using the facility, so how can you get an outside provider? Also, how will you ensure quality control? These are vuknerable people- carers need to be able to rely on their dependents being treated with dignity and respect.
- As before
- These are essential services that would have a profound and detrimental effect if they are to close, in particular:
 - **It is essential for people with autism to have routines and consistent structures and people around them.** If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right **experience or knowledge to support them.**
 - **People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from**
 - **These are individuals with autism who have complex and sometimes challenging behaviours,** and the day service is unique in that staff are comprehensively trained in autism and in **supporting clients.**
 - **my son has autism and we are acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around**

them, safe. • we as parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to **enjoy community activities as they do now.** • I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support

- Again this is about negating the contract that you have with ALL the people of Haringey.
- Again, a devious question. Services should be provided directly by the council to avoid extra costs involved when using contractors, who load prices which the council tax payer then has to pay. For instance, this sort of thing is well evident where cleaners employed by the council are concerned. The contractor gets £13 ph per cleaner and the cleaner gets just in excess of £6, the minimum wage. It's about time council staff took full responsibility instead of being pen pushers delegating to contractors.
- Surely an alternative provider will not have the experience of the place, familiar and safe for users, or of the users it may be very disruptive.
- A specialist ASD service is required , see points above
- Would depend on pedigree and accountability
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- Disruption of routine and being moved to unfamiliar locations are not conducive to the wellbeing of adults with learning difficulties.
- Alternative provider no doubt means privatised support which so far has proved disastrous for services currently provided by public funding.

- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- The highly skilled staff provided by social services and health jointly are required alongside close regulation and supervision allowed by this structure
- Care of this sort is heavily reliant on continuity and the personal relationships that are developed day to day.
- Change often doesn't go well with those mentally ill.
- It is not likely that the continuity and skill set of the current staff will be replicated
- Privatising this kind of care is absurd, what possible reason can there be for a company to take on such a community based project, that clearly has no financial gain? It is purely to get it off the councils books and is again woefully shortsighted.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from
- The council should provide services and not contact out to third parties

- A provider which operates on a profit making as its main purpose is not what I believe is the best way to run such an essential service. Such centres are at it's best when it is runs a COMMUNITY SERVICE.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- There is no guarantee that an alternative provider will give as good or better service than that given presently.
- same as previous statement
- Continuity of care is needed
- These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients.
- Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- why take away a well trusted service that is familiar and works for the people who use it?
- These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients.
- Users are used to and familiar with the expert service and support provided at Roundway and the change will cause distress and disruption that will be very damaging. Closure will lead to a

loss of expert, trained, and trusted staff.

- I do not have any confidence in your alternatives
- It is essential for vulnerable people to have a place in the community where they feel safe and secure. Without these centres the mental health of these already vulnerable people may suffer, particularly in terms of anxiety and isolation. A safe, secure place in the community with properly trained staff that is available on a regular basis seems essential in preventing these problems.
- Even with trying to provide more support at home and other locations, it is important that the day centre is retained as it allows wider social interaction amongst the disadvantaged users.
- Again, this centre provides support and structure for its users in ways that are not other possible.
- I think there would be a derimental loss of continuity with existing services.
- It involves robbing people of a fundamental social service.
- Cost need to be cut
- I do not believe that an alternative provider will be able to provide the quality of care that the council does, or be as accountable for it as the council is. This has been the case extensively with privately run homes for the elderly where abuse has taken place.
- There have been far too many horror stories about privatising services like this, with a drastic decline in quality of service. Staff need special skills to deal with autism and other learning difficulties, and if there are already skilled, local staff to do these jobs, keep them instead!
- Alternative provider is a middleman, usually a company that is run for profit. Social services are NOT for profit they are for community and are responsibility of the government (local and national).
- These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients.
- The current provision has received excellent feedback, and as noted in the previous comment box, changes will be extremely disruptive and distressing to people with autism.
- See above. We know, from copious examples, that provision for anything by private 'providers' is generally worse quality, is less subject to democratic scrutiny and involves those who work in them being on worse pay and conditions.
- It will be a Cut in support to very vulnerable people & their families. Out-sourcing to "alternative providers" does not have a great track-record in good, accountable, service provision, especially in this field
- The current provision is well used, any alterations for cost reasons wold be unethical.
- The current provision has track record of good support for people with learning disabilities. Why change that?

- There' is nothing wrong with this current provider
- Because people who have Learning Disability and their Behaviour can challenge and the staff are fully qualified and experienced and fully trained to support people with Learning disabilities and Autism in a Safe environment.
- Privatising care is never a solution
- Many people need continuity, familiarity and routine and it takes people time to adjust to places. they need staff who know them well and an existence based on portable services is not suitable for many. Of course we all want to see person centred programmes but this is totally compatible with centre based services. Closing them down will have negative impacts on some of the most vulnerable people in the borough and their families and will eventually result in more money being spent and fewer families being able to go out to work.
- If there is a good not for profit market then this can work well. It is not a cost saving exercise, however, as TUPE and other transfer costs (pensions e.g.) nullify any savings for many years - this is the widespread experience of other outsourcing, and it is not clear that advice has been taken from others who've done this already...
- I understand that two years ago people with autism and complex needs where moved out of the Ermine Road Day Centre to the Roundway Centre as it was felt they needed a dedicated space and trained staff devoted to their needs. Surely the motivation for transferring them back is not based on evidence that they don't have these needs after all? Presumably moving them back to ERDC will cause overcrowding and a deterioration in the care these people need. As to 'outsourcing' the care to an 'alternative provider', presumably this is being considered to cut cost? And this provider will be from the private sector?- How will you ensure that a 'cheaper' provider who works on the basis of making a profit will provide at a minimum the same level of care as has been provided to date?
- the Roundway service also provides them with essential respite from caring for their adult children. For many of the parents, when their children are at the Roundway, this is the only time that they have to rest or do everyday things like shopping or cleaning.
- I believe services should be run by the local authority
- Is the council admitting that it is useless? Why should an alternative provider be able to do this better?
- More information needed.
- Because this is still the closure of the day centre. Ermine Road Day Centre is needed by the people who attend & should remain open so Haringey can provide day services from there. If Haringey wish to provide ADDITIONAL day services, then consult the users of Ermine Rd on what they would like. I DO NOT support the privatisation of day services - which is what you are really proposing in this question.
- Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service

will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.

- I suspect you mean sub-contract the service out to the lowest bidder. No thanks. The most vulnerable people will suffer.
- There has been no alternative with any concrete plans as of yet which provides absolutely no comfort for carers or users. No details of the social enterprise involved (if any). Grouping adults with different disabilities fundamentally goes against the principle of decent social care.
- Not clear who the alternative provider is and the standards they would offer.
- Again, decimates the service, and also outsources it from those who are highly trained and experienced to who-knows-what.
- And even the one care home to be left open is to be privatised, leaving the new company free to change routines, change staffing, pay less, after a minimal change-over period, all things which will permanently damage the service users.
- It will bring a new change and improvement towards the betterment of the adults with learning disabilities
- Moving over to 'privatisation' will mean more untrained staff in order to make the scheme profitable. Outside providers are also a business and profit key to any provision.
- Vital services needed to be run by an accountable council
- Depends on choice and control of provider
- Haringey Council could continue running day opportunities services in a way that each centre could generate their own income to pay salaries and reinvest it in the service. Each centre could be a social enterprise and in this way council services and staff would be encouraged to improve and provide a better quality service for users who pay for the service/salaries.
- These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients.
- To say you don't have the money to keep these centres open is a lie given you've just spent £56 million on agency consultants fees over the last couple of years. And this year you've spent £85k on a new logo, £400k on Woodgreen high street when it wasn't particularly in need of doing & £300k investment in a chicken shop! You are intending on closing well needed centres for people with learning difficulties that as a result of doing so will cause them great stress, depression and create a life of untold hardships for the them & their families. It will mean some people can no longer go out on a regular basis & will remain in their homes looking at four walls. The people who attend the centres are looked after by people with qualified experience, it enables them to go out daily & have something to look forward to each day & whilst being helped to improve their life skills. It also gives much needed respite to their families especially those that are elderly. These centres are a lifeline to it's members & their

families. Many of the people who attend Ermine road find it difficult to go out into the community or to undertake activities such as shopping, using public transport or going to a park - activities that many of us take for granted. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. I will do my utmost to bring to peoples awareness what a disgusting attitude Haringey council has towards people with learning difficulties that they put chicken shops & logos above people with learning difficulties

- I feel that attendees are used to staff that they have and have built a rapport and trust with them to change this would really effect the individual/attendees wellbeing. Dealing with health conditions is a struggle enough without having to deal with major changes of meeting new staff and other changes that will effect individuals in the long term and their carers.
- Any kind of privatisation has proved a disaster so far - keep these services within the remit of the local or national government.
- Because I think that the local authority should be the provider, not an alternative one
 - will the alternative provider charge for the service 2) will they have the power to refuse people 3) will they provide transport (free) 4) will people be able to attend same days and time they used to 5) who will be the overall responsible in case of accidents and conflict 6) the new model is not clear in this proposal. All the above are not clear.
- It's really not clear from the proposal who may end up providing this service. It's important that the duty of real care is not replaced solely by well-meaning volunteers.
- This is privatisation and will, as everybody who has ever seen the council privatise a service, increase costs or reduce the quality and and accountability of service or both. This is the council wiping its hands of its most needy residents and is completely disgusting.
- privatisation of local services is a slippery slope.
- The Council provided no information on the type, shape and quantity of alternative or future provision, no information on the level of need, no information on timescales, or any evidence that an external provider will be appropriate to meet the needs of people with severe complex needs, any evidence of a successful sustainable example of an external provider. The Council provided no evidence to support its statement that transferring the service to a social enterprise would have minimal impact on existing carers and service users.
- It will be just a business venture. The cost will be higher and the services less. you have to be caring and dedicated to look after people with learning disabilities.
- This will disrupt the routine of service users. There has been no clear information which will help create any certainty that our service users will get the same service as what they are currently receive at ermine Road. Our service users might not be able to afford to use alternative provider.
- Again, not enough detail about the replacement services. Any change is disressing for users and carers and strong consideration must be given. The proposals are bland and do not show sufficient empathy nor rigour in the way the changes would be implemented.

- As I understand it, the service users at Ermine Road Day Centre are placed together based on their needs i.e. similar service users are in a group together. With three services closing and a reliance upon social enterprise, how will you ensure that Ermine Road Day Centre does not become over subscribed? How will the service users be placed together at Ermine Road Day Centre and exactly what will your input be in this respect? How often will you be reviewing your plan to continue allowing an alternative provider to run Ermine Road Day Centre? If you do not have enough bidders, the service provided is of a poor quality etc, how do you intend to make sure the service continues to run smoothly and safely for the service users until a resolution is reached? What will become of the staff currently at Ermine Road Day Centre? Will they or staff from the other day centres you propose to close, have an opportunity to remain providing a service to the service user group, given their collective knowledge and history within the service and with the service users? What, if anything, will you be doing to ensure TUPE provisions apply so staff can remain working with service users who know, understand and trust them?
- The closure of all the other day centres for LD will create a level of demand that Ermine Road hasn't the capacity to accommodate. This will place additional demands on family carers and have a damaging affect on the lives of LD users. There still no information on what the alternatives are.
- We believe that the only reason for proposing a social enterprise for this service is to cut costs by cutting staff terms and conditions. This is unacceptable for staff who work in this service, and we believe that it will lead to a significant drop in the quality of service for both vulnerable people and carers. While Ermine Road day centre is within the council, it has access to all the support services that it requires - HR, IT, legal, and so on. Due to being part of a large organisation, it receives high quality provision in these areas that is essentially free, or at least they do not have to be paid for to anything like the same extent as if they were being sourced from an external company. A social enterprise would have to meet all of these costs itself, using up resources that would otherwise be used for the provision of services, and leading to further pressure to cut costs. Social enterprises of this type are typically propped up with local authority funds for 2-3 years, but are then forced to operate on a commercial basis, at which point they run into trouble. This is likely to be the point at which there is considerable pressure to cut staff pay and conditions and reduce the quality of service provided. There will then be a risk of the service being fully privatised, or the council could be forced to bring it back in-house. A particular issue with the outsourcing of service such as this is that the council remains responsible for the service provided, and for the safeguarding of vulnerable people, but has little or no control over an external organisation. This is a concern, given the vulnerable nature of the people who use this service. We believe that social enterprises are being proposed as part of these cuts because they sound better to people than saying that services are going to be privatised. The fact is that there is very little difference between a social enterprise and a private company - in this context, both exist to cut costs, and will do this by cutting staff pay and conditions and providing a lower quality service. The social enterprise model may work well in some cases, e.g. an entrepreneur who has an innovative new idea for a business that is of social value - one which does not currently exist in the public sector, or is something that the public sector does not provide. Such individuals may choose to trade stability and reasonable pay and conditions for the opportunity to run their own business and use their skills. A local authority social care service is not comparable to this. Therefore, we would question whether the social enterprise model is even suitable for a service such as this. We have been asking management for examples of local authority social care services that have been turned into social enterprises and have lasted for longer than the couple of years of being supported with council funds - as yet, we have not been given any examples.
- I think that Haringey Council should continue to manage Ermine Road Day Centre. If staff pay

and conditions are attempted to be reduced by an alternative provider this will be resisted by the Unison Trade Union.

- Disabled people need the support to go out and join others in community activities and that way they can be part of the community rather than isolated and open to exclusion.
- Inappropriate. They don't mix in needs knowledge and staff training requirements. Dangerous for some client groups eg ASD challenging beh with wheelchair user is not a good mix.
- The standard and quality of service will be compromised.
- It entirely depends on who the alternative provider is. My concern is that the contract to run the centre will be given to the 'cheapest bidder'
- My partner is autistic and although he is high functioning, still struggles hugely with everyday activities that most of us don't think twice about. Having expert specialised staff is critical in enabling people with autism and complex needs to integrate into the community in a way that is meaningful to them and keeps them, and those around them, safe. Individuals with autism often have complex and sometimes challenging behaviours and the day service is unique in that staff are comprehensively trained in autism and in supporting clients appropriately.
- An alternative provider might employ staff who have no experience or any form of training. That will be bad for the people who attend the centre.
- Quality care is in place
- There needs to be more detail about the proposal of an alternative provider.

Responses on the Consultation – Proposal 3

Question C

Proposal 3: Increase the flexibility and availability of day services within the borough

C) To what extent do you support our proposal to close the Grange Day Centre?

- It will disturb a lot of other service users/people like me. No closure please.
- I do not any day centre being closed down. What will be the alternative?
- This is the center my mother attends as she suffers from dementia there is no other local dementia center in the area. My mother also suffers from travel sickness and currently if they visit any other center i.e. Horsey she cannot attend because travel sickness. Which means if this center closed she would not be able to attend any other dementia centre.
- Don't know anything about grange centre
- It's good to have this centre open as it delivers a service for dementia people. Haringey needs to support every individual who has a disability and venerable.
- Mum uses facility which gives us both a break. On going to consultation yesterday for both carers & clients it was obvious how much mum trusts the staff have from clients. Mum was unable to sit through meeting and walked across room to key worker. The activities they do with clients keep them stimulated which is most definted needed. At home mum does nothing. The staff arrange they day to accommodate carers who use public transport to use mini bus for the home journey. the centre is a life line for carers and clients. Without it my life would being my own. Please could we have alternatives sent to us for proposals. Thank you.
- There is almost NOTHING in this borough for older people to do. Services are few/far between and without day centers, people will become extremely socially isolated and carers will burn out. You cannot close a day center without providing something else for people do to/for carers to access respite.
- Day centres (specifically the Haynes Centre) have quite literally saved my family and I am sure the Grange does the same for families in tottenham. They provide crucial respite for families. Safe and familiar environments for vulnerable people who can become very distressed and depressed when presented with change and unfamiliarity. These centres are stimulating and I know clients and staff form important professional and caring relationships. We care for my Mother at home (as well as looking after two children under 4). If we did not have respite, where my Mother was out of the house for significant periods (somewhere she knows and feels safe with people she knows and feels safe with), to give us and/or carers a break then she would have to be living in a residential home. We want to continue to care for my Mother at home but without the Haynes Centre could not continue to do this. It would be detrimental to my own, my Mother's and my children health and wellbeing!

- You do not provide any information on alternative care for this vulnerable group of people. Who's going to look after these people who have contributed so much to the community during their working life? Are they now just going to be neglected?? This would be immoral and completely unacceptable.
- People with dementia are often overlooked and segregated from society. The Grange is a beacon of hope to carers for respite and stimulation for people with dementia who have little social interaction outside of their home.
- I don't know much about the service to answer.
- The older people who access the Grange often find it very difficult to access "community activities" due to mobility difficulties, sensory difficulties and being very vulnerable. There are already very few opportunities for these people to integrate with others and engage in meaningful activity. For some of them this may be the only time that they get a decent meal due to difficulties with supporting themselves in frailty and cognitive impairment. These plans will leave those people isolated and give them yet another message that older people are not valued or cared about in our society. Another example of the marginalisation of older people who probably won't be able to respond to this as lots of them are not computer literate.
- My dad goes to this Day Centre and it enables him to have a good quality of life. He suffers from Alzheimer's disease and is able to do activities like play his guitar with musicians, play cards, do crosswords and interact with other people. Also this is respite for me and the interaction at the Grange Day Centre is part of my Dad's routine and helps his Alzheimer's to not deteriorate.
- I'm afraid that I find it incomprehensible that the council has just refurbished the Grange Day Centre at presumably some cost, only to close it now? Why spend all that money when you were planning to close it anyway. It stinks of "something" and it's not good.
- as question A
- The Grange Day Centre provide valuable service to the dementia sufferers who attend. Great rapport has been developed with the service users and staff who are themselves dedicated to providing a service for those who attend. although there are 28 users, possibly with more staff this could increase users. I fear that the work that has gone in the Grange by the team will be lost with a move to the Haynes Day Centre and the people who will suffer are the service users.
- No
- doesn't affect me
- I am not aware of the above day centre, as a member of family attends Ermine Road
- Do not affect me but cannot be good
- n/a - I can't comment on this
- It will disturb a lot of other service users/people like me. No closure please.
- I do not know any day centre being closed down. What will be the alternative?
- This is the center my mother attends as she suffers from dementia there is no other local

dementia center in the area. My mother also suffers from travel sickness and currently if they visit any other center i.e. Horsey she cannot attend because of travel sickness. Which means if this center closed she would not be able to attend any other dementia centre.

- Don't know anything about Grange Centre
- It's good to have this centre open as it delivers a service for dementia people. Haringey needs to support every individual who has a disability and is vulnerable.
- Mum uses facility which gives us both a break. On going to consultation yesterday for both carers & clients it was obvious how much mum trusts the staff have from clients. Mum was unable to sit through meeting and walked across room to key worker. The activities they do with clients keep them stimulated which is most definitely needed. At home mum does nothing. The staff arrange their day to accommodate carers who use public transport to use mini bus for the home journey. The centre is a life line for carers and clients. Without it my life would be my own. Please could we have alternatives sent to us for proposals. Thank you.
- As the High Pay Centre reported this week, FTSE 100 CEOs in the UK earn on average 183 times more than a full-time worker. In such a country and against such a backdrop, how can it be justified to cut a service for older people with varying dementias in one of the poorest areas of the UK? My experience of elderly care services in Haringey is that they are already poor; to cut this service that provides the absolute bare essentials of life for such a vulnerable group? "A hot two-course midday meal" - as the centre says it provides - should not be something that people have to go without, in one of the most prosperous countries in the world. It is a disgrace, and - albeit forced by central government cuts - is something Haringey councillors should be actively and loudly arguing against, rather than letting such things (as they did with the bedroom tax) pass quietly.
- Again, my answer would depend on the quality of the proposed alternative
- For the same reasons as Ermine Road. Even though my daughter does not attend I do not understand why you are punishing the most vulnerable in society
- This has been a centre for excellence in dementia care - why would you close it?
- I do not know about Grange Day service
- I do not know enough about the provision but would be opposed if it meant a reduction in the overall services provided.
- Day centres are essential for people with autism.
- See my answer to Q6
- I am against it for many reasons, but first and foremost because of the adverse effects it will have on the clients with respect to their psychological and social well-being.
- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from
- See previous answer.

- I do not have experience with dementia so have no opinion on these plans.
- I believe fixed site services are absolutely necessary for effective delivery of support for vulnerable residents
- Without an adequate alternative in place, closing the day centre would be making a decision to take away a lifeline for some of our most vulnerable adults. Can this ever be justified?
- See previous comments
- All day centres need to be open to support those who need them.
- I know that there will be residents of Haringey and their close families who regard this as a lifeline. These people's carers will crack under the additional pressure put on them to look after their loved ones with no respite. This will cause additional costs to the borough in terms of mental health and health issues and ultimately carers refusing to care for their loved ones. Not only this but I do not understand how you are going to get the residents from this side of the borough to the Haynes (which is presumably what is being proposed) Many suffer from incontinence and will not be able to stay on the bus for the amount of time required. Providing alternative transport is just going to cost more in the long run. Why also was the Grange recently refurbished when the Council was planning to close it? This does not appear to be well thought out decisions. It also appears that those in the wealthier areas are retaining their services whilst the West of the borough (the poorer and more impoverished side) yet again get their services cut. This is a Labour Council that appears to pump money into the wealthier areas (presumably where many council managers reside) and decrease services and support in those areas that really have even greater need. I am disgusted.
- The consistency of support for those with autism/learning difficulties/dementia is vital. The council needs to ensure that care is of the highest standard provided in a not for profit manner and therefore should not be handing over the care of vulnerable people to alternative providers.
- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities
- Although I support the policy of helping people with dementia to lead a more independent life I firmly believe that there is still a need for day centres for some service users and their carers - expert care and support provided by these centres is essential for some of the more vulnerable members of our community
- Closing a service will be detrimental to the disabled
- much needed service
- The same reasons stated in previous questions.
- As for question 8.

- Slowly all community services are being pared away and (sometimes) replaced by private services which come with a (often heavy) price tag. These most vulnerable people should continue to have their needs met in ways that are socially caring and that are most suitable for them. Their needs are also social, and the Grange Day Centre fits the bill nicely.
- Again not just individuals but whole families and whole communities need these support facilities in order to lead happy fulfilled lives. I feel it benefits more people open than closed.
- as per reasons given in number 5
- Not enough information on this centre.
- For the same reason as the first question.
- Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities. Many of the people who use the Centre have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in supporting them.
- Closing a centre has a severe detrimental impact on the current users. this can be seen from Camden's closure of day centres and centralising them into Greenwood Place.
- Where would the users get the help they're currently getting? - they wouldn't, & their quality of life would suffer as a result.
- Day Centres provide an essential lifeline for parents and carers of adults with special needs.
- Again, you are putting vulnerable people at risk by closing this support with no regard to their well-being.
- As before.
- As before.

- These are essential services that would have a profound and detrimental effect if they are to **close, in particular:**
 - **It is essential for people with autism to have routines and consistent structures and people around them.** If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or **knowledge to support them.**
 - **People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from**
 - **These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients.**
 - **my son has autism and we are acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe.**
 - **we as parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism.** The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to **enjoy community activities as they do now.**
 - **I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support**
- This will remove an important local community facility.
- With what would it be replaced?
- for the previous two reasons given.
- This will undoubtedly leave many who depend on this facility stranded, isolated and without any regular or accesible support.
- please see previous reasons.
- Don't know about this
- People in my community need it.
- Service users need the expertise and support offered now

- Having previously lived and worked in Haringey for over five years I know that for many people these days centres are the sole point of contact with the outside world, outside of hospital. That they should be closed in the name of efficiency is absurd when many of them are simply under-utilised. This is a classic case of council mismanagement attempting to throw the baby out with the bath water.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe.

- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now. I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- I do not support any closure which reduces the number of facilities for the vulnerable in the local community.
- Closing one centre will merely put pressure on other centres as well as on other resources, such as local health providers. This will merely cost more in both the short and long term, and is of no benefit to service users.
- same as previous statement
- Continuity of care is needed
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.

- Users of Grange day centre will lose their helpful social routines . To establish These social routines has taken time & expertise that will not be replaced by the alternatives.
- The day service is unique in that staff are properly and comprehensively trained in supporting clients. Closing any of these centres will cause difficulty for the people attending these centres, and their carers.
- Older isolated people in Haringey need places like this.
- The centre allows a focus for the social care work and is important in maintaining social relationships between its users.
- The grange centre is for people who have dementia. People coping with dementia can become easily confused in new environments and situations, having a centre which is familiar to them, both the environment and the staff, is vital to their being able to use and benefit from the services the day centre is staffed by trained people who are expert at supporting and dealing with people with dementia. It is an environment in which planned activities can take place the day centre offers much needed respite for their carers
- It will cause further deterioration of lives of people in need
- People with dementia are at risk of harming themselves or others if not properly cared for. Closing this centre will stress families and individuals who at the moment can work (and pay tax and council tax) who would otherwise have to be full time carers.
- For the same reasons given in my other answers. These services are essential for people with complex needs and allow parents/carers a break. I know it's 'austerity time' and services like this are vulnerable or somehow thought of as a 'luxury'- but that doesn't mean it's 'right' to cut such services when many people need them so badly.
- How can a closure of day centre would help those who rely on its services? Keep it open!
- As per previous comments.
- See previous answers.
- It's a cut that will affect the most vulnerable members of the community and their families
- There is not adequate alternative provision so this would leave vulnerable people with an inferior service
- Also a key centre for vulnerable residents.
- Same as before
- Parents are already under a huge amount of Stress and many have given up work in order to care for thire Adult Children with Autism. To take away the service will place a major strain on Parents /Carers to use Personal Budgets to buy in support to enable their Adult Children to go out into the Community. Many Parents/Carers of those attending the services are Elderly and have Health Problems them selves.

- same reasons Perhaps some of the local daycentres would be able to become more inclusive and create opportunities for other people with needs, and with fewer needs too, so as to create new, mutual support relationships possibilities, through diversifying. Some of these centres could also develop night support specialist local services which may save much money to the nhs and local authority.
- as response to 8.
- See Q8.
- Service is needed
- The Grange Day centre provides invaluable services to vulnerable users. The day centre: enables efficiencies of scale - a greater number of staff, greater number of users enabling the provision of different resources and activities. Day centres are critical in keeping people within their homes and within the community. It is naive in the extreme to pretend that these services could be provided on a one-to-one basis in individual's homes (thus socially isolated from other clients) and be more cost effective (add also the time taken to travel from client to client) unless the level of service that will be provided is being cut. If the service is being cut then Haringey council is betraying it's citizens. Staff salaries are low. The only conceivable saving is that the council is hoping to sell of the property to developers. Judging by the paltry amount gained for Apex house, way below the market value, this is a terrible financial decision, selling the future dignity of Haringey citizens for a short sighted financially incompetent plan. Shame on you!
- What happens to the carers, they will have less respite from looking after the person so they lose out.
- Because the people who use Grange Day Centre need it & use it. Day support is very important to people for a myriad of reasons. Importantly it is a social place for people to be with others, this is incredibly important for all people, the Grange Day Centre service users & their families. I pay my taxes for these service, I want them to remain open & not be privatised.
- Where are the users of this service supposed to go? To save just a few pennies?
- Parents and carers struggle already due to the swingeing cuts imposed; please avoid closing centres which support the most needy and vulnerable.
- No real alternative has been provided as of yet.
- Day care is a much needed provision in the borough and an ageing population will require more not less provision
- As above--services will suffer, and therefore so will patients--who are already isolated and needy.
- In particular, the cuts to residential and day care centres will hit people with, by definition, an inability to cope with normal life, and also their family carers. I have met and listened to many carers **recently. For instance, there's one man who cannot go near a shop, as he likes to kick** in the glass doors/windows. How will his parents shop if he is returned home? Or a woman who cannot cope with people near her. How can her family carers even get food in? Or two men who cannot make friends in the ordinary way. Each has his ONLY friends at his day-

centre, and will be alone and lonely with elderly parents. Or the woman who has both a son **with learning disabilities, and a mother with Alzheimer's**. How can she even manage their different needs at home, let alone get out, to do basic food shopping?

- no reason
- Can only imagine the effect on users. the centre used by my relative is remaining open but if it were closing I would have absolute horror of the effect on my relative. routine is a key element of her life.
- There are increasing numbers of people suffering from dementia and already not enough places for the people who need this specialist support
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- well I seriously hope all people at harringey council who want to close the centre end up with dementia as there will be no where for you to be looked after & no respite for your carers
- I feel this would be totally unfair as people attending the grange have the continuity and have built strong and trusting relationships with staff. Additionally if people who live near to the Grange and attend they will have the upheaval of travelling further and have to adapt to new surrounding which is very disorientating for people with dementia along with losing the familiarity and stability of the grange and services they are used. There is sure to be a decline in health of not only the attendees but the carers who support them and in the end a much higher social and health care bill as a result of the changes.
- see above
- Because the elderly people need a place like the grange, instead of being in the house all day
- Don't know much about it
- It's really important to get older people out of their houses and with peers - replacing this solely with home care would mean elderly people may lose their connection to the community and the world outside of their own homes.
- How can you pretend that closing this centre, which has strongly positive reviews from its users, can possibly maintain current dementia service provision in the borough, already at breaking point. It is a disgusting and cynical proposal which does not reflect the necessary service levels for vulnerable residents.
- will we have any community left if this degradation of care continues

- 1. The Grange Day Centre is a specialist service for people with dementia assessed to be at the significant and critical level, who lack the capacity for independent living relying on others for their needs. They have complex needs and are unlikely to find satisfactory alternative provision in the community. This is acknowledged in the EqIA which states that the service users would have the option of using the Haynes day centre, the only remaining specialist dementia service. There is insufficient capacity at the Haynes, the proposed closure of the Grange would put a huge pressure on the specialist dementia service provided at the Haynes Day Care Centre. The proposed closure of Haven would increase the pressure on the Haynes, risking significant impact on current service users at the Haynes.

2. The Council recognises that there are people with complex needs who require specialist services. People with dementia with a degenerative condition are in such a group requiring specialist services. Since all users of the Grange and the Haynes are clinically assessed as having severe dementia, it is unlikely that further assessment will find their assessed needs satisfied by a lesser provision. Further demographic projections indicate that their numbers would rise significantly increasing demand for such specialist services.

3. If the Haynes becomes the sole day centre for dementia and, as it is very likely, if after reassessment very few users are found to have reduced level of needs, damaging service reductions would be imposed on many people with dementia and their carers contrary to their needs. The physical design capacity at the Haynes is limited, currently attendance is limited to maximum of 18, increased from 15 users per day since the closure of Woodside in 2011.

4. Where access to comparable support is not available and/or not secured the carers not only lose the limited respite they get, they would have to take on more responsibilities to fill the gap created by the closures and service changes.

5. In addition to their severe or critical dementia over 65% of the service users at the Grange and the Haynes are over 80 years or over, over 60% have a physical frailty or sensory impairment; as such most will not have the capacity to manage their budgets or manage accessing support, they would have to rely on their carers. This would be an additional burden on the carers.

6. Currently all day centres provide transport. Accessing suitable alternative provision, even if they are available, would not be possible without transport provision leading to social isolation, loneliness and loss of quality of life both for the service users and their carers impacting their health and wellbeing.

7. 85% of service users at the Grange are from BEM, the proposal to close the Grange will have a disproportional impact on BEM groups.

8. These impacts are contrary to Haringey's Corporate Plan Priority 2 Objectives, its equality policies, to Government policies as they are contained in the National Dementia Strategy, The Care Act and the NICE guidelines. Furthermore I object on the grounds that:

1. The Council promised that "Where major changes to service users are proposed after budget setting, detailed plans will come forward and decisions will only be made after much more detailed consultation" (Para 7.1.4 of Item No 819 of 10 February 2015 Cabinet). This was reiterated by the EqIA produced to support the proposals. The consultation on proposed closures and service changes, and the subsequent co-design process, were completely inadequate and would not meet the minimum requirements for a statutory consultation. No information on the type, shape and quantity of alternative or future provision, no information on the level of need, the re-assessment process, no information on timescales for change or no information on the community capacity are provided by the Council.

2. The EqIA produced are incomplete and inadequate, they do not include e.g. human and financial impact of closing the day centres.

3. The Council's proposals rely on new untested and/or yet to be defined or developed new models of services. The Council provided no evidence that these new models would meet the current needs let alone the future demand. Although there is no objection to providing a wider range of services, it is very important that they are in place, proven to meet current needs and proven to have the potential to meet future demand before closures are considered if adequate support to the service users and their carers are to be secured.

4. The proposals and the process introduces a huge uncertainty both for the service users and their carers. There is little confidence in the process and a strong feeling that the decisions are already made.

5. The people with dementia need continuity, routine, stimulation in familiar surroundings supported by trained expert

familiar staff if needs for more costly services are to be delayed. Specialist day centres provide an important preventative service helping with their wellbeing and continuing to stay at home longer. This cannot be achieved with the proposed closures and service changes. 6. It is important to acknowledge that service users with dementia and/or complex needs who attend day care centres are at home the rest of the time. Care at home is not a substitute for the day care centres, rather they are complementary. Without day centres service users would be isolated and their health and care would be compromised. They are likely to need a lot more costly support services much earlier. The health and wellbeing of their carers are also likely to be impacted to need greater and costlier support.

- n/a
- Reasons already given , which relate to the rigour with which the matter is being proposed, without sufficient research, thought and detail.
- Whilst I do not agree with the instability it may cause to some of the older people with dementia this centre provides a service to, there are already organisations within the private and voluntary sector providing similar, well run services. As such, you will need to ensure that any new service and its location, will not be to the detriment of current service users (i.e. having to pay more for a new service but receive less, or having a difficult journey to and from a new service provider). You could perhaps seek to have the private/voluntary sector rent the building to provide the service and to continue the status quo in terms of location.
- The reasons given above also apply to dementia services like the Grange
- The closure of the Grange will significantly reduce the availability of services for people with dementia in Haringey – these are some of the most vulnerable people in the borough. There will be no provision in the East of Haringey, the poorest part of the borough. This will have a significant and detrimental impact on not only those who use the service, but also their families and carers, many of who may not be able to cope. It is unlikely that enough suitable alternative provision will be available for all those affected by this closure. The document states: **“Following the reassessment or review, if, for any reason, there are service users who no longer have an eligible need, we would work closely with the service user to identify appropriate support.” We are concerned that there may be a move to review or reassess vulnerable people in such a way that they are deemed not to be eligible for services.** This would be grossly unfair, it would put people at risk, and it could breach legislation.
- If there is an identified need to close it I would have no objection. "The government have cut Haringey's money" is not an adequate reason to cut any crucial social service.
- The Grange is a lifeline for clients and carers.
- See my previous response
- They need care
- There is not sufficient support in the borough to make up the shortfall in services

Responses on the Consultation – Proposal 3

Question D

Proposal 3: Increase the flexibility and availability of day services within the borough

D) To what extent do you support our proposal to transfer the dementia day opportunities service at the Haynes Day Centre to an external provider?

- I am not very sure about this sorry.
- I don't really understand so I don't know and can't tell.
- This would not help my mum. She would be stuck at home all day without any social interaction unless I take her out. which I cannot do because I work.
- As previously stated - this will depend on the right provider being chosen and the service being closely monitored.
- Don't know all I know is that my mum like going to the Haynes day centre
- Ridiculous - I have no faith in a council who will not provide services for people with dementia. You are entrusting the care of some of your most vulnerable residents in the hands of an unknown quantity. You are causing disruption to the routine of an already disrupted set of families. This is an abuse of your power as a council.
- Having had extensive experience with Adult Health and social Services (mostly terrifyingly slow and inefficient) the Haynes Centre has been a model of excellence since my Mother agreed (when she had the capacity) to attend three years ago. The managers and staff constantly reflect their excellent training and skills. They have quite literally saved my Mother from residential care and saved me from not being able to cope with her full time care (as well as looking after my young children and working part time). I feel that NOTHING should change that will affect changes at the Haynes Centre and disturb what is a highly functioning flagship centre. The location is key as my Mother is able to walk there with a carer (she cannot get into a car - other transport options are not viable for us). The people and the space are brilliant. If you understand anything about dementia you should know that change is the worst thing you can impose on a service user who feels safe and is well looked after and stimulated at the Haynes (or other centre). Moving people with Dementia from people and places they know and feel safe with can in fact speed up deterioration which of course is irreversible! If we lose services at the Haynes I will have no choice but to move my Mother into Residential care as the 15 hours a week she is at the Haynes Centre are how we are able to manage and afford care at home.
- You do not give any information on what kind of support external providers will give; also you don't mention whether or not you'll monitor the quality of support by external providers. Also, are the proposed alternatives any cheaper than the support currently provided?
- What happens to the staff who have the experience and established therapeutic relationships with members of the service?

- I don't know much about the service to answer.
- The staff at the Haven have worked hard to develop a good day centre for people with dementia. It is a waste to throw away all this hard work and experience in the pursuit of cheaper care. Provision of good dementia care is very difficult. I believe it is the LA responsibility to ensure quality services are available for our most vulnerable residents and out-sourcing to save money may look like a short term solution, but long term means the LA will be less able to assure quality of care for people who are often unable to speak up for themselves
- Since there is not yet any identified "external provider" it is quite difficult to imagine what this would look like. However, I reject the idea that by retracting council support for the Grange you are "increasing the availability and flexibility of day opportunities within the borough". Quite the reverse I should think. Most third sector organisations within the borough are also struggling for funding and resources so I should imagine if anyone steps up to take this forward it will lead to dramatically reduced day opportunities within the borough. Again this is likely to limit access for marginalised older people to necessary factions such as transport, food, social contact, mental stimulation, exercise etc. The impact on the mental and physical health should not be minimised.
- Us a family who have been left to look after mum who has severe Alzheimer's the last 9 years since our father's death, has been very stressfull on us and our personell familys. Mum needs 24 care now and we do this with a care package which includes 3 days at the Haynes. Changes would be bad for mum and us as a family. filled in on behalf of: [REDACTED]
- For the same reasons as for the Grange Day Centre. The Day Centres are invaluable and most needed to ensure its services users are not isolated, have something to look forward to and maintain good mental health as well as respite for carer's like me who need and value this support the Day Centres give.
- If this was through AGE UK, as the centre in Enfield is run, I would support this, but without knowledge of who is going to be the external provider and what kind of record they have I cannot. Dementia suffers are so vulnerable and changes to their services impact so heavily on their health that any kind of service would have to be sustainable in the long term or else councils will just find the hospitals filling up with dementia patients.
- as question A
- The service users at the Grange Day Centre will lose out as they will need to be re-assessed and they may be found due to the costs associated with providing this service that they do not qualify any longer to attend a Day Centre. For some, that is their only opportunity to leave their homes and interact with other people during the day.
- No
- no response
- as above
- no response
- I am not very sure about this sorry.

- I don't really understand so I don't know and can't tell.
- This would not help my mum. She would be stuck at home all day without any social interaction unless I take her out. which I cannot do because I work.
- As previously stated - this will depend on the right provider being chosen and the service being closely monitored.
- Don't know all I know is that my mum like going to the Haynes day centre
- For the same reason as before, transferring services to external providers is shown by research to be costly in the long term, whilst also fragmenting services (for users who already tend to find service provision complex), and to diminish accountability.
- Depends
- Please see above
- I have heard no convincing rationale for this proposal
- If staff trained, services delivery monitored
- See answer to Q8
- I would like to see what alternatives would be provided.
- I don't have dementia myself, but I doubt they like change without good reason either.
- Please see previous answer
- No privatisation. It will provide a poorer service fir vulnerable people
- I do not have an opinion on plans concerning dementia.
- The care provision will most likely be a cheaper option offering inexperienced staff and minimal stimulation
- External providers have repeatedly demonstrated an inability to provide good quality provision
- Dementia sufferers need consistency and expert care. At present they receive this, changes would adversely affect their quality of life.
- See previous comments
- Provided that the new provider can give as good support as the existing one.
- it is wrong to change the circumstances of people with autism on a whim. Put the best interests of these vulnerable people first.
- At the moment the staff are consistant and long term. This is vital for any sufferer of dementia. Any changes make them more disorientated and confused. I am worried that any private provider will havve a high turnover of staff as agency staf on zero hour contracts are employed in order to cut costs. This would obviously place the residents under stress.

- The consistency of support for those with autism/learning difficulties/dementia is vital. The council needs to ensure that care is of the highest standard provided in a not for profit manner and therefore should not be handing over the care of vulnerable people to alternative providers. The waste of resources used in the ongoing tendering processes that council's keep on undertaking could be much more effectively used on the services that need funding.
- Although I support the policy of helping people with dementia to lead a more independent life I firmly believe that there is still a need for day centres for some service users and their carers - expert care and support provided by these centres is essential for some of the more vulnerable members of our community
- An external provider will provide a poorer service and will eventually be cut back.
- no knowledge of alternative provider
- The same reasons as stated in previous questions.
- As for questions 8 and 10.
- External providers are profit oriented and less concerned about the well-being of the people. We have seen many examples of that.
- These people need to feel human when access is not available to other people and they are stuck at home they are being isolated and so to are their carers. This is not right. They just like everybody else need for their mental health and wellbeing need the Day care centre to be kept open with the same people and providers as always.
- Having familiar staff and consistency is vital for adults with autism and LD to progress as structure and familiarity is important to all aspects of their life.
- as per reasons given in no 5
- Not enough information
- East Dunbartonshire council tried this in the past for children with disabilities and later found that a good number of people employed by contracted organizations were unsuitable for the job they were doing. I had personal experience of this.
- external providers work for profit and have little commitment to the quality of service; nor are they ever effectively monitored...
- People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities. Many of the people who use the Centre have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in supporting them.
- the only way that I know 'alternative providers' can provide a service for less money, is by cutting the wages and conditions of the staff and lowering the standard of provision to the detriment of users and their supporters
- Day Centres provide an essential lifeline for carers.

- Again, the organisation that provides the lowest quote will win, this is more important to you than the care they will provide. Or rather not provide.
- Same reasons as before.
- As before
- Dementia sufferers need continuity and stability, not change, and an external/private provider would have to make significant changes.
- What are the checks on external providers for services to those in need, whether with dementia or other problems and needs - outsourcing to for-profit organisations is rarely beneficial for those people.
- Depends on ethos and accountability of provider
- Every day we read in the newspapers about poor care being provided by external providers. Unfamiliar faces, practices and locations will cause confusion and upset to people with dementia.
- Sounds like "privitisation" which so far has proved disastrous for public services.
- please see previous reasons
- As before
- The worst thing for Dementia is to change routine for these people who are already confused.
- Privatising this kind of care is absurd, what possible reason can there be for a company to take on such a community based project, that clearly has no financial gain? It is purely to get it off the councils books and is again woefully shortsighted.
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them. People with disabilities such as learning disabilities and autism are already more socially isolated and are more frequently victims of abuse and exploitation than other groups of people, and these day centres are essential to providing them with a safe environment to make friends and access community activities from. These are individuals with autism who have complex and sometimes challenging behaviours, and the day service is unique in that staff are comprehensively trained in autism and in supporting clients. I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway –

they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.

- Councils should not contract out this important service to third parties who's main objective is PROFIT
- I particularly do not support reducing services for this group of residents who by the very nature of dementia have no means to fight their own corner.
- Unclear of the benefits to the people concerned of this transfer. I am clear it would save the Borough money but who are these private providers and have they been inspected and approved for their purpose?
- The expertise built up at this centre will be lost as a new provider changes systems, terms and conditions over time. This will be of no benefit to service users as they are forced to rely on other services, such as health providers. Again, there is no guarantee an alternative provider will give as good or better service than that given now. This cannot be of benefit to those who have dementia or to tax and council tax payers.
- Doubt very much that an external provider will provide the same support
- Continuity of care is needed
- I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe.
- I know of families who use this centre; Haringey should be proud of this provision instead of planning to move it to private enterprise. The centre is perfectly placed in close proximity to Queens wood practice and so well placed for NHS and social care to work together.
- External providers will have alternative objectives, potentially including maximising profit which will adversely impact on the quality of services
- For people suffering with dementia it is important to have stability and a safe, secure area which will prevent them becoming isolated from their community. These day centres are essential in many people's lives.
- External providers often pay lower wages to workers who are not unionised. The result can often be lots of temp workers on zero hours contracts. the service to the clients suffer.
- I do not see how outsourcing the provision can save money if an appropriate level of safe and helpful care is to continue to be provided.
- There's no guarantee of quality or accountability.
- I do not believe that an external provider will be as accountable as the council is or provide the quality of care that the council does.
- Ditto previous answers.
- Please refer to question 8 for comments on the above.
- See previous answers.

- The newspapers have been full of the reports on standards in the private sector for such vulnerable members of the community. This is just a Cut to services for them and their families
- The current service is perfectly adequate and had not been found wanting. Going to an alternative provider would introduce unnecessary risk, particularly if the choice is cheap provider who is commissioned to save money due to the cuts.
- I don't think it will be in the best interests of those it serves.
- Same as before
- same reasons as before. Rethink and improve day centres do not close them. They are a community asset and can be made to work for the benefit of the whole community
- as 8.
- See Q8.
- I think services should be provided by the local authority and that standards will be better for users and staff
- What is the evidence that services equal or better to those currently being provided can be delivered at equal to or less cost? Has Haringey got the expertise to ensure due diligence in the negotiation of this contract such that service levels can be monitored and swift action can be taken to ensure required standards are met? Will Haringey retain the legal and care expertise to ensure compliance with the contract?
- Service always money led.
- I do not support the proposal at all. I do not support the privatisation of dementia services. I want Haringey to provide excellent dementia care, with well trained & well paid staff. Private care is done on the cheap, staff are overworked & do not receive any training & development. I also know that people with dementia benefit from being in a social setting rather than stuck on their own or with harassed & anxious carers.
- An external provider will put profit first, there's absolutely no guarantee, none whatsoever that a quality service will be provided. Think a little - an external provider will put profit first, they have to survive. Keep the service in house.
- Again, an external provider will focus on making money and not on the quality of care. This has been shown time and time again. If you farm out these essential services there is no way to properly ensure quality of care.
- Those with dementia need high level of care. The council need to look after the vulnerable with high quality care package. The plans have not been thought through carefully in light of the Equality Act and Social Care laws and practice.
- Not clear who the alternative provider would be - question standards of care. The numbers of people with dementia are set to rise and more dementia services will be needed not less.
- As above--external providers are usually just babysitters, not the trained individuals we have now.
- **. Or the woman who has both a son with learning disabilities, and a mother with Alzheimer's.** How can she even manage their different needs at home, let alone get out, to do basic food

shopping? All of this points to a fundamental flaw in the Haringey policy, the so-called “re-ablement” which chucking them out of day centres is supposed to achieve. The rationale is given, that it is better for people to be in their own homes, to “re-able” them, to become more independent. That is impossible for people with Alzheimer’s, which is progressive,

- depending on the reason by the council
- Again, my relative does not use this centre et but feel the same as my answer above
- essential services needed to be provided by the council
- Depends on who gets the contract. This is not a decision which can be made on money alone. It is an extremely complex and specialist service
- I know someone with autism and am acutely aware of the level of expert care and experience that is needed for staff to enable people with autism and complex needs to go out into the community in a way that is meaningful to them and keeps them, and those around them, safe.
- well I seriously hope all people at haringey council who want to close the centre end up with dementia as there will be no where for you to be looked after & no respite for your carers
- People with dementia need stability and any changes can be very distressing. The attendees have built relationships and a good rapport with existing staff and residents, so I am unable to see how this change of outsourcing services is working in cohesion with the legislation of the care act for example the principles person centred care. The attendees will be distressed in getting a new provider with new employees who they have never met and this will cause a lot of anxiety and anguish for attendees their families and carers. All of the existing staff are trained in dementia care what guarentee or proof do we have that an external provider will ensure their staff are trained to high standards of current staff. I feel you really need to consult the medical experts on the damage these changes will cause to people with dementia. I am also concerned that the cheapest provider will be chosen as long as they tick the boxes and as i have knowledge of social work and have seen how this can effect day care attendees or residents. When they cut corners this can result in a lot of safeguarding issues. Plus the care workers may be on a low wage and some may not be interested in providing the care they should. The attendess will not get the activities program they undertake and enjoy yet again another damaging change to the attendees. Attendees will be unsettled and disorientated with changes and a majority will not want to attend the new look day centre. This will put pressure on carers who will be under a lot more stress with loved ones reaction to the changes and the attendees may want to stay at home. This will lead to a decline in the health in the carers as well which will impact on social care costs as long term they will be an increase in service users health both carers and attendees.. The care act emphasis wellbeing and this changes are ignoring that principle. The car act also emphasises carers should receive support early before reaching crisis point. So in the long run this will have a negative effect all around. Please take the time to consult medical experts on this consultation proposal and then you may see its ill effect.
- see above - dementia sufferers depend on such facilities and external providers are mostly only interested in profit.
- I do not believe that the external provider is necessary and that everything should be done through the local authority
- Don't know much about it
- Again - not clear who this would potentially be transferred to.

- This is privatisation. As everyone with the most tenuous grasp of recent policy history knows, this will mean a reduction in the quality and accountability of the service, and will leave it open to profiteering at the expense of users and their carers. There is no justification whatsoever provided for the assertions that service will not be impacted by the shift to an external provider. This is disgusting and amoral.
- please do not do this.
- 1. The Council provided no information on the type, shape and quantity of alternative or future provision, no information on the level of need, no information on timescales, or any evidence that an external provider will be appropriate to meet the needs of people with severe dementia, any evidence of a successful sustainable example of an external provider. 2. The Council provided no information that an external provider will be able deliver a satisfactory comparable service while producing a surplus taking into account Council's current subsidy and current costs to service users. How is this to be achieved? i) by increasing costs to service users and/or introducing charges e.g. transport or ii) ii) by reducing costs that would impact quality of service, e.g. lower wages, untrained short-term staff, overcrowding, lower staff/user ratio, loss of stimulating activities, loss of person-centred activities and care, etc. 3. The Council provided no information on what would happen if the external provider is unable to continue. 4. The Council provided no evidence to support its statement that transferring the service at the Haynes Day Centre to a social enterprise would have minimal impact on existing carers and service users. 5. The co-design process has been a narrow, superficial exercise with minimal input from users or carers.
- n/a
- I have seen this excellent facility, which is used by a close friend and her husband , who has severe dementia. I cannot image the negative impact closure would have on them both. It has been a life line. We do not know the human and financial impact of transferring the service. places like Haynes have a preventative role. My friend's husband is well cared for and this helps her as a 24/7 carer remain well physically and mentally.
- As per my previous answer.
- For same reasons given above regarding the Roundway.
- It is stated here the there is a proposal to move the service to an external provider, but the consultation document says a social enterprise. Please state if other forms of alternative delivery apart from a social enterprise are being considered. We believe that the only reason for proposing outsourcing for this service is to cut costs by cutting staff terms and conditions. This is unacceptable for staff who work in this service, and we believe that it will lead to a significant drop in the quality of service for both vulnerable people and carers. While The Haynes day centre is within the council, it has access to all the support services that it requires - HR, IT, legal, and so on. Due to being part of a large organisation, it receives high quality provision in these areas that is essentially free, or at least they do not have to be paid for to anything like the same extent as if they were being sourced from an external company. A social enterprise or other delivery model would have to meet all of these costs itself, using up resources that would otherwise be used for the provision of services, and leading to further pressure to cut costs. Social enterprises (and some other alternative delivery models) of this type are typically propped up with local authority funds for 2-3 years, but are then forced to operate on a commercial basis, at which point they run into trouble. This is likely to be the point at which there is considerable pressure to cut staff pay and conditions and reduce the quality of service provided. There will then be a risk of the service being fully privatised, or the council could be forced to bring it back

in-house. A particular issue with the outsourcing of service such as this is that the council remains responsible for the service provided, and for the safeguarding of vulnerable people, but has little or no control over an external organisation. This is a concern, given the vulnerable nature of the people who use this service. We believe that social enterprises are being proposed as part of these cuts because they sound better to people than saying that services are going to be privatised. The fact is that there is very little difference between a social enterprise and a private company - in this context, both exist to cut costs, and will do this by cutting staff pay and conditions and providing a lower quality service. The social enterprise model may work well in some cases, e.g. an entrepreneur who has an innovative new idea for a business that is of social value - one which does not currently exist in the public sector, or is something that the public sector does not provide. Such individuals may choose to trade stability and reasonable pay and conditions for the opportunity to run their own business and use their skills. A local authority social care service is not comparable to this. Therefore, we would question whether the social enterprise model is even suitable for a service such as this. We have been asking management for examples of local authority social care services that have been turned into social enterprises and have lasted for longer than the couple of years of being supported with council funds - as yet, we have not been given any examples.

- I believe that public services should be publicly-run - i.e. I think that Haringey Council should continue to manage the Haynes Day Centre. What next - transfer the NHS to an external provider?...
- There are very few examples where an external provider gives a better service and why would they- if they are profit driven.
- Liable to use not enough minimally paid short stay untrained workers due to cheapest contract. Waste of money on profit driven provider. Winterbourne view recipe.
- This will not work, It means that some of the clients will lose their opportunity to attend a day centre as they will have to be reassessed. Will the criteria for attendance change ? How many places will there be up for grabs at the Haynes if the Grange closes?
- My concern is that very often private providers do not provide as good a service because the profit motive means that services have to be curtailed to satisfy the financial imperative of the provider, rather than the needs of the clients coming first.
- Do not think it would be in their best interests.
- They need care
- This centre provides a high level of expertise built up over the years. It is highly valued by the community who use it. It is crucial that this centre remains open for the users and their families. Closing the centre is short sighted.

Responses on the Consultation – Proposal 3

Question E

Proposal 3: Increase the flexibility and availability of day services within the borough

E) If you have any further comments regarding the proposal to increase the availability and flexibility of day opportunities within the borough meeting the individual needs of residents please tell us below:

- I think haginey should meet the care of the local community. My mother has been living in Haringey for over 50 years and when she was well was very supportive of haringey council and even though it is not a rich borough she felt it always supported the local community. This is the time in her life when she really needs the haineey support. KEEP THE GRANGE DAY CENTRE OPEN.
- No details have been given of any new or replacement provision. It is essential that provision is made for people with learning disabilities to engage in meaningful social activities with proper support. They need to be able to meet with peers and to have places to access arts and crafts activities, drama, IT, exercise, cooking, work experience, gardening, pet therapy and practice independence skills. They need to be supported by carers who are known to them and who have the proper skills and training and who regularly meet other carers so that they can support each other to provide good quality care. For this to happen there must be a base where people with learning disabilities feel safe and where the more able can drop in and the less able can be properly supported to live the best life they can, including support to access mainstream community facilities. A life consisting of being trapped at home, waiting for the occasional trip out into the community supported by a lone carer, is not a life I would want to live.
- These centres needs to be keep open for people who have a disability or are vunerable. Taken these services away will limit services for people who are in need. These centres support disable people daily activities development.
- I would like feedback and explanation about what the proposed changes at the Haynes actually mean. This: "To what extent do you support our proposal to transfer the dementia day opportunities service at Haynes Day Centre to an external provider?" is not specific enough and could be seen as deceptive if not explained properly. I can be contacted at [REDACTED] and would appreciate some feedback on this point. Thank you
- You use all kind of wholly language which suggest that you're going to IMPROVE social care, while in reality you just want to cut back on provisions by closing day centres, which will inevitably have a serious impact on the quality of provided services.
- There already is not enough service to meet the ever increasing population of people with dementia. It seems counter intuitative to reduce services, create more stress for carers who get little respite already, which will then impact on the length of time that they can cope for and people will end up in care homes sooner rather than later.

- Haringey to invest in a number of staff to open a small business to set up an alternative model in Ermine road as a base. Then they can be the alternative provided If they meet the standards.
- I am extremely concerned about the impact of these proposals on the most vulnerable people in our society. The additional plans to close osbourne grove are likely to marginalise the most frail and helpless people in the borough and cause them to have to travel further away from the places they know and the people they love. Additionally the plan to withdraw funding to the Grange is likely to be catastrophic for the physical and mental health of those older people who attend. It is extremely easy to say that they should be accessing community activities but due to physical barriers for these people such as sensory and mobility issues this is often impossible. Additionally due to cuts to third sector there is a dearth of any suitable community activities for this age group. This all contributes to leave these people marginalised, isolated and without a voice (particularly people with dementia who will be unable to complete such a form).
- The Haynes Centre has been a big help to us. closure would be devastateing for mum and her carers above named. Please contact us if to discuss anything further. Thanks [REDACTED]
[REDACTED]
- Abyssinia court was running a voluntary drop in which was a huge support but lacked support from the council. One or two additional workers would have made all the difference. As it stands, too much pressure has been put on the volunteers and it looks as though this too will fold. There was no publicity given about the centre and thus the numbers also dwindled. If this is how further groups are supported then I really feel for all the elderly in this borough. These places are a life line and isolation causes dementia to increase, putting even more pressure on an over-extended, under functioning NHS. So short sighted. Very sad for us all. Society is judged by how we look after the weak, the ill and the incapacitated. What a state we are in.
- I attended a workshop at Ermine Road on Monday 20 July 2015 and I was not convinced that the proposals would enhance the opportunities for the current users of the day centre. I am sceptical about what individuals care to support my sister's health will be delivered instead, when the overall aim is to cut costs.
- I understand that the council needs to make in the region of £70m savings and these savings have to come from across the council services. However, I feel that you are targeting the disabled and elderly without thought for the longer term consequences. As you are aware dementia is more and more in the media and people are becoming aware of the issue and that services need to be provided for this group. The proposal to close the Grange Day Centre was not in the first consultation and so I wonder why it is now in scope. Many of those who attend the Grange Day Centre have adult children who need to work so do not have the luxury of remaining at home to look after their parents. To say that those who are assessed as no longer eligible will be able to identify appropriate support - what will this look like? And not feasible or practible for the service user of their family. Will the re-assessment also include those attending the Haynes Day Centre? Will the service user who attend the Grange Day Centre and who are found to be "Eligible" be able to attend the same number of days as they do now? Dementia day care requires intensive support and to cut back on this from the service is not forward thinking for Haringey.

- I think for those carers who do not understand English language, should be provided with an interpreter on a one to one. Alternatively a short meeting to be held with carer and interpreter. Other members of the family may not be able to attend the meetings. This should be made available for certain circumstances. Better services to be reinstated.
- I think haginey should meet the care of the local community. My mother has been living in Haringey for over 50 years and when she was well was very supportive of haringey council and even though it is not a rich borough she felt it always supported the local community. This is the time in her life when she really needs the haineey support. KEEP THE GRANGE DAY CENTRE OPEN.
- No details have been given of any new or replacement provision. It is essential that provision is made for people with learning disabilities to engage in meaningful social activities with proper support. They need to be able to meet with peers and to have places to access arts and crafts activities, drama, IT, exercise, cooking, work experience, gardening, pet therapy and practice independence skills. They need to be supported by carers who are known to them and who have the proper skills and training and who regularly meet other carers so that they can support each other to provide good quality care. For this to happen there must be a base where people with learning disabilities feel safe and where the more able can drop in and the less able can be properly supported to live the best life they can, including support to access mainstream community facilities. A life consisting of being trapped at home, waiting for the occasional trip out into the community supported by a lone carer, is not a life I would want to live.
- These centres needs to be keep open for people who have a disability or are vunerable. Taken these services away will limit services for people who are in need. These centres support disable people daily activities development.
- It is a disgrace that Haringey should be in a position to have to consider reducing day opportunities for some of the most vulnerable people in the borough. In a vastly unequal society where the wealthy pay some of the lowest income tax rates in Western Europe and where even the Labour party has been deceived into accepting the discourses of 'aspiration' and 'individualism' and 'austerity' (as if these are simply common sense, rather than ideological notions to be challenged), there is scope to protect and to value such services, if local politicians speak up for them. Cutting such services in the borough where I pay my council tax makes me ashamed to live in Haringey.
- Be very careful when selecting care providers from the private sector. Pay people properly for doing a difficult job
- As I said in my previous answers I do not understand why you are trying to punish the most vulnerable in society. You need to find another way of saving money other than closing services for disabled and old.
- Plder people with demeita and their carers are a highly vulnerable group. Services should be protected and developed not undermined
- If think day oppourtunities allow people to get out of their homes and mix with others in community helping isolation and loneliness
- I think if you decide to cut day services, you should have thought about what will be available in its place. The decision was porely about money and not what clients want

- If you really have in heart "to increase the availability and flexibility of day opportunities within the borough meeting the individual needs of residents" it would be great. But everyone knows that is not what you are doing. You are closing day centres for people with disabilities.
- Stop this assault on the vulnerable! They need care. Outsourcing does not work. They need genuine carers in the community who are in place to care. Not to profit from their disabilities. Autism needs routine, a sense of familiarity. Leave Well Alone.
- Please think about how these proposed closures will effect those who are vulnerable who rely on these centres, and how much the families rely on them too. They are a lifeline and to take them away would be disastrous to all involved.
- Substance not rhetoric please.
- As a parent with a teenager who has Autism the struggle is hard enough without having services/routines disrupted that always cause a detrimental effect. Please for once in your lives listen to the parents who are the ones most equipt with the needs of their children and work alongside them,not against them to provide a quality service.
- 'Availability and flexibility ' are euphanisms for reduction in care
- Please do not make these cuts to disability provision!
- Consult the service users, their families and their carers. Do what is best for these vulnerable people. Make cuts elsewhere.
- None of these plans increase the availability and flexibility of day opportunities in Haringey and to flog them as such make Haringey Council look wicked ,and corrupt. This kind of spin just antagonises voters and is just foul.
- I think that the council could be more transparent and inclusive in it's consultation process actually getting out to all sections of the local community rather than expecting us to find out on the grapevine that changes are afoot and there is a consultation form on the internet.
- These services are extremely important to the adults who use them, and to their carers. They should be protected and their quality ensured by keeping them under the management of Haringey Council.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.

- These day centres are a lifeline for some of the most vulnerable members of our community and their carers, providing expert care and preventing isolation - to remove these will put a huge strain on their carers.
- On the contrary these proposals will decrease the availability and flexibility of day opportunities.
- No knowledge of increased provision only knowledge of axed provision with no consultation and against the Best Interests of vulnerable people
- It is essential for people with autism to have routines and consistent structures and people around them. If this is taken away, there is a huge risk that these clients will become isolated, anxious and that their mental health will suffer. They are less likely to go out into the community if they are on their own with staff who may not have the right experience or knowledge to support them.
- These adults are vulnerable and need specialised support. Removing these services will impact greatly on the lives of all of these adults and be a huge step backwards for most. Supporting these young people full time without any despite is a huge strain on parents which are potentially frail, have health problems themselves or other siblings to also care for. I previously supported a young man who uses these services and o can confirm that without my specialised training, specific knowledge and the relationship I built with him the support I provided would have been unsuccessful. I hope when Haringey council make this decision they consider the adults human rights and equality of these young people to have a fulfilled life which makes sense to them and supported to have opportunities that without these services would be impossible. Supporting someone with autism or LD as a member of staff is no easy job but when you hit a milestones for make a break through, your week is complete as you know what a difference you're making to that persons life. The young man I used to support who is now in desperate need of your services is a bright, affectionate and wonderful young man but will slowly deteriorate without someone who knows him well and how he needs to be supported.
- It will be a horrendous crime committed by Haringey council to close any of these centers. To give the reason of inadequate budgets is an excuse when Haringey council squanders money on: £400,000 on Woodgreen/Turnpike high street - when it was not a necessity. 100's of thousands on Consultants, 100's of thousands on bonus's & the list goes on. You are treating the most vulnerable in an excusable manner of disregard for their well being.
- The Roundway is a centre which has expert trained staff , who understands the needs of their clients and provides a safe, trusted environment for people with autism and learning difficulties. It is essential that such a valued service is not lost in Haringey.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.

- Your proposals will hide care behind closed doors. Rather than increasing the availability and flexibility of day opportunities you are simply cutting services from the people who need it most. I'm appalled that a socialist run Council can behave in such a Tory manner.
- For many people on the autism spectrum, flexibility of opportunity will not be helpful. They need structure and predictability to feel safe.
- What is wrong with the current arrangements? If it isn't broken it doesn't need fixing.
- At present my son is at school. I don't want there to be no support for him when he gets to adulthood should he need it. I think consolidating services is all very well, but the aim seems to be to cut costs by closing centres, sacking staff and excluding people not on maximum benefits/ supported housing. This is very shortsighted- the reason those people are able to live at home or are relatively independent is because they have a centre to go to giving them skills and a purpose, whilst providing much needed respite for carers, many of whom will be quite elderly. If you cut provision to these people, carers will run into difficulties, and your social support bill will escalate as it becomes too hard to keep people at home. You have no idea how hard it can be looking after people with challenging behaviour or who need help with every aspect of daily living. It's all very well to say you'll liaise + sort out current users of the centres, but what will be available to people like my son in 5 year's time when he leaves education?
- Day centres are essential – day centres of all kinds. Very often people with physical, mental or social problems have scant social contact, and safe centres in buildings specifically designed for the vulnerable are life-saving places for people to meet or get respite, relieving the users from stress, loneliness, isolation and more. These centres do not have to be elaborate or provide luxury extra services, but should be at least simply safe meeting places with access to (simple) refreshments. Previously working in a such a centre (not in Haringey), I know just how valuable they are.
- It should be possible to increase the opportunities for residents in need of day care and/or/activities at a reasonable and affordable cost (why does not the Council cancel a 85k proposed spend on re-branding - what use is that to residents and those in need in the borough, for instance?) without closing existing facilities.
- I wonder what "availability" and "flexibility" means if it is through replacing public service with private and for-profit service . . .
- These services need highly skilled regulated teams with adequate staffing levels and number of venues
- I do not think that it is realistic for all families to expect people to apply for and manage personal budgets. I myself have two children with support needs. Battling to access funds is exhausting and fraught with problems. I have applied for funds and been turned down, suffered delays of many months before even getting an assessment, experienced the disconnect between services. When families are caring for adult children or for family members with dementia there are often multiple complex demands from caring for several generations too. Day centres provide a stability and continuity of care which is vital and are a form of respite for families as well as direct services to the users. They also act as gateways to additional services, and as hubs so that families meet others in similar situations and can share support and insight.

- Simply use the buildings more often, there are numerous care and childcare opportunities for utility when it is not being purely reserved for the care of the disabled. Combining uses for these centres will only strengthen the community, closing them will only cause embitterment and harm.
- I am particularly concerned re the needs of autistic people who have needs that often make it difficult for them to interact outside their family circle, and the current provision at Roundhayes allows them to do this with trained and sympathetic staff. I would support this provision being maintained.
- As someone who has worked with autistic people and people with dementia I find it disgraceful that a council would think of taking away an important part of these peoples' lives. These centres are a haven of friendliness, order and peace where these people can express themselves, build meaningful relationships and explore the world safely. In an advanced and civilised society we should be protecting these peoples' dignity and rights, not destroying their lives and making them depend only on the health service for their needs.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism. The Roundway service provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- I don't believe it is possible to increase the availability of help needed by people with disability by closing the day care centers. Perhaps you could increase flexibility and availability by providing other day opportunities in addition to the day centers?
- I believe that maintaining day centres provides purposeful activities for people with autism. They also provide much needed respite for overworked families
- The concept is good but unless there are sufficient resources available for the necessary support the quality and safety of provision looks likely to drop. This is because a major driver is the Government's continuing severe budget cuts and tight hold on the Council's purse strings.
- I would be happy for truly increased opportunities, but not at the expense of closing any of the existing facilities

- Out sourcing these services is just a way of sidelining the people who use them.
- Keep all the day centres open.
- I oppose the proposal to close the Roundway service because I feel that closing it would lead to the loss of expert, trained staff who are trusted by the people who use it and their parents/carers. It takes people with autism months to get to know new people and to trust them enough to speak to them or go outside of known environments with them. The Roundway provides the perfect support for people with autism and complex needs as the staff have been working with the service users for many years; they are trained in autism and in communicating with people with autism; they have detailed activity plans and strategies in place for each service user; they operate from a building which is known to the service users and is safe for them and adapted to their needs; they work as a team which provides the service users and the staff with safety and support.
- Cutting these services, which is the less palatable and more accurate way of describing "increasing availability and flexibility" of service, will ultimately result in higher costs for the Council. Vulnerable adults deserve protection, both legally and ethically, and those who are proposing to reduce their access to familiar, excellent and consistent support without honestly reflecting on the impact on service users and their families should be ashamed of themselves.
- Adding new services to the existing ones would be an increase. Presenting the closure of council/community facilities as 'increasing' availability is a contradiction in terms.
- Please care for those who need these services- don't Cut provision for the most vulnerable and their families
- This is a disingenuous comment 'increasing flexibility' means cutting services and support for the most vulnerable who need stability and familiarity. There is no excuse for changing the status quo under the pretence of increasing 'availability'.
- I can find no information on what the specific proposals are for increasing day opportunities. What would this provision be? This is misleading as there are no concrete proposals except to close things down
- Harringey needs to do more as a council to support adults with special needs instead of treating them like they're a burden on the budget
- They should run together, to give choice and develop quality
- You don't increase the choices by closing down existing day centres or decommissioning existing services. We all know that the result is that people with the highest needs will be stuck at home, some in precarious circumstances, alone and with nothing to do, wholly dependent on their families. "Stimulate the market place, as the Care Act says- but not at the expense of lifeline services.
- It is not clear that the Council has already assessed the individual needs of service users and families. This should precede a consultation, and should improve the quality of any offer; consultation before reassessment risks legal challenge, family distress, and a poorly designed service....this is therefore not value for money.

- To call cutting services 'the proposal to increase the availability and flexibility of day opportunities within the borough meeting the individual needs of residents' is misleading and deceptive. I understand that you don't have much choice under the current government but to play along in this devastating regime of making the poor pay for the mistakes of the rich, but it would be great if a Labour-led borough could think of ways of counter-acting the demoralisation of its residents and giving them a bit of hope that we might be able to put an end to austerity in five years' time.
- the day centres are a vital lifeline for hundreds of the most vulnerable people in Haringey and that they must stay open!
- Shoddy, short-sighted, highly financially questionable proposals. The council is taking the concept of care within the "community" as an excuse to divest itself of responsibility. The "community" which is expected to take over specialised caring roles for clients with complex, diverse and difficult needs remains ill-defined. There is scant evidence that both service levels will be retained to match the basic needs and that savings can be made. Making cuts when you have agreed to spend £86,000 on a rebrand is scandalous - those who vote for this are not worthy of the community they are hoping will absorb these responsibilities (also their voters). A shame on all concerned.
- For the majority of disabled people going to a day center is their only contact with the outside world, and providing one person to take them out, not every day, leaves them on their own for longer periods than now. Also if they have family looking after them the family have less daytime respite causing more fatigue, more stress more illness, then more use of the National Health. Some carers are in their seventies and eighties and need the regular hours break. It will cost a darn sight more putting the disabled person in permanent care within the borough than is saved. As ever short sighted cost cutting by short sighted people. The Pros do not outway the Cons.
- Firstly, I think the council should stop wasting money. The councillors should give back their pay increase & take a pay cut. Don't waste any more money on very poor & secret re-branding exercises. Engage meaningfully with the service users of all day centres in the Haringey & find out what they want, not threaten & frighten vulnerable people & their families & carers with cuts, cuts & more cuts. Oh & one more thing, stop planning to knock down their homes on top of cutting their support & services.
- Please stop trying to copy and emulate Barnet by outsourcing everything!
- How about cutting the salaries of the council's top executives as well as the fortune spent on consultants? Look after the borough's most vulnerable; Haringey has a poor track-record of doing so and needs to be very mindful of this.
- The council will be subject to the Equality Act responsibilities that shall be brought to the fore by residents. Its a damning indictment of poor care standards that have continued in Haringey for years. The council tax and local rates payers have not been asked about how they feel their money should be spent. The consultation has not been thorough or detailed in any way. No concrete alternatives have been demonstrated by the council thus far. Different needs require different care.
- A range of centres in the borough ensures coverage and spaces and no ridiculous long journeys for those unable to cope. It's obvious.
- Closing day centres , I am horrified that Haringey Council sees fit to focus cuts on the most

vulnerable people in the borough,

- if the council decides to do some changes they should favour the participants
- I could not attend the focus groups but from this document, the words "will give greater flexibility" is typical 'outside consultancy'. Not consulting the people it affect, the users. Also re the cost coming from users personal budgets. How much money do you think they have? Will their income increase? and how much will attendance cost? Maybe this was discussed at the focus groups so I'm sorry if I sound angry. Haringey have withdrawn funding to 'Age UK' so the Day Centres for the Elderly have been withdrawn but seem to have it for erecting sculptures of acorns around wood green which are hardly priority.
- Please do not insult the people of Haringey by renaming cuts as a "proposal to increase the availability and flexibility of day opportunities". The suggested changes are nothing but damaging cuts. Time to support your own party and defend the most vulnerable in our borough.
- You are not planning to "increase the availability and flexibility" you are planning closures. There are already options for people who want to spend all day in their own homes - you need to retain and in fact increase the options both for day and residential care which are currently not available for all and in many cases those that do exist are not up to standard.
- Haringey council should improve these services and keep them running as council services to be proud of them.
- I do not believe closing centres such as the Roundway does increase the availability and flexibility of day opportunities. In Islington, there has been a new autism-specific day centre (Spectrum) set up, in addition to the more general learning disability day centre (Daylight) and these are highly valued resources which provide flexible and person-centred choices. They reduce isolation for the service users, provide a hub and a focus for their day, and enable existing support structures to sustain - in their absence you would get breakdown of care arrangements, further isolation, crises and more expensive out of borough placements.
- The only decent option is increasing these services, reducing the costs so that more people can avail themselves of them and keeping them away from any external providers.
- These facilities should remain open and not run by the private sector. They'll not have the patient's interest at heart and it is more about the money. secondly these facilities give the patients somewhere to go where they can be involved in activities like bingo, exercise and craft which is an improvement from spending their days inside the home not doing anything.
- Wherever possible try and retain day centres that provide specialist care - to reduce all care outside of the home to one centre would surely create huge demand on one small place.
- The council is sweeping its most vulnerable residents under the carpet. None of these proposals can possibly be justified if the impact on users and carers is taken into account. What a complete disgrace - hang your heads in shame.
- all the lonely people, where do they all belong?

- I strongly object to the proposals to close day centres and /or to transfer services to external providers on the grounds that: 1. The Council promised that "Where major changes to service users are proposed after budget setting, detailed plans will come forward and decisions will only be made after much more detailed consultation" (Para 7.1.4 of Item No 819 of 10 February 2015 Cabinet). This was reiterated by the EqIA produced to support the proposals. The consultation on proposed closures and service changes, and the subsequent co-design process, were completely inadequate and would not meet the minimum requirements for a statutory consultation. No information on the type, shape and quantity of alternative or future provision, no information on the level of need, the re-assessment process, no information on timescales for change or no information on the community capacity are provided by the Council. 2. The EqIA produced are incomplete and inadequate, they do not include e.g. human and financial impact of closing the day centres. 3. The Council's proposals rely on new untested and/or yet to be defined or developed new models of services. The Council provided no evidence that these new models would meet the current needs let alone the future demand. Although there is no objection to providing a wider range of services, it is very important that they are in place, proven to meet current needs and proven to have the potential to meet future demand before closures are considered if adequate support to the service users and their carers are to be secured. 4. The proposals and the process introduces a huge uncertainty both for the service users and their carers. There is little confidence in the process and a strong feeling that the decisions are already made. 5. The people with dementia need continuity, routine, stimulation in familiar surroundings supported by trained expert familiar staff if needs for more costly services are to be delayed. Specialist day centres provide an important preventative service helping with their wellbeing and continuing to stay at home longer. This cannot be achieved with the proposed closures and service changes. 6. It is important to acknowledge that service users with dementia and/or complex needs who attend day care centres are at home the rest of the time. Care at home is not a substitute for the day care centres, rather they are complementary. Without day centres service users would be isolated and their health and care would be compromised. They are likely to need a lot more costly support services much earlier. The health and wellbeing of their carers are also likely to be impacted to need greater and costlier support.
- My view and suggestions won't make any difference to what has already been decided. there have been many changes over the last two years and as a parent carer, it has been very stressful for me. People with learning disabilities do not like change, that is a fact. Care in the community is a good idea but I do not see it working. Care should start at the very top. Making life more difficult for the poor and vulnerable does not make any sense.
- Why do we keep having these costly consultations? Put the money into excellent care like Haynes.
- Perhaps working with the private and voluntary sector to provide services in conjunction with you or on your behalf will benefit service users overall but not in the manner you are proposing. If you remove services (e.g. closing three centres), you will actually reduce the availability of day service opportunities as new considerations will have to be given by carers (etc) to the type of services provided by a new provider, the service user group using the service and whether it is suitable for a particular service user, the number of service users able to use the service at any one time, the location it is being provided in, the frequency with which a service user can attend, the ability/training of staff providing the service etc. Regardless of what you will do to ensure an adequate number of centres (etc) are put in place to replace the ones closed, the number that will actually be suitable and/or available for individual service users will reduce. In the consultation documents I have seen, I have not identified any specific examples of how you feel certain sectors can be brought in to provide a service while you close yours. For example, in the Adult Social Care Consultation FAQ, you

have said at question 5 you will consider organisations from the NHS, Independent Sector, Community Sector and Voluntary Sector to provide services. I have not seen any specific examples or references to establish how your proposals will work in practice. For instance, which services do the NHS currently run for services users with learning difficulties or autism within Haringey or other London boroughs? Who are some of the key providers within the Independent or Voluntary Sector currently providing autistic / learning difficulties services within Haringey or other London boroughs? There are no actual examples for anyone to draw reference to. If there were clear examples, I believe it would be easier for 'us' to consider the practical applications of your plans. I expect you will place greater reliance upon care staff within Supported Living Schemes to integrate service users in the community and to find activities for them to do. I have not seen in this section of the consultation FAQs or guide, what steps you will be taking to ensure organisations running Supported Living Schemes have sufficient staff to do this. There is no mention of how you be increasing the budget for service users to have the transport and level of support they may need whilst out in the community. There is no mention of how your social work team will assist carers to establish what services are within your borough which may be suitable for those with autism and/or learning difficulties. The removal of services seems certain in your literature however, the replacement of the same seems to be based on ideas and not certainties with specific examples or scenarios as to how things will be implemented or run in future. Your residents who will be affected by the changes you propose, require more knowledgeable social workers within your staff group. They need to have places within the community in which they can feel safe. They need to have the right levels of support at all times. They need to have continuity of service where possible. They need to have a council who understands that increasing availability and flexibility of day opportunities cannot first be done by the removal of services, nor by placing its provisions into the hands of other sectors, while they carry out a 'distant overseer' role.

I am not convinced by the arguments in the Proposal 3 paper that the proposals will increase availability and flexibility of day opportunities. Closing all day centres bar Ermine Road, and transferring all day centres to the private sector will have a damaging impact on their users and the users' parents and families. I also think these proposals may eventually prove illegal under the Care Act.

- I am responding to this consultation on behalf of Haringey UNISON. [REDACTED]
- You will NOT increase the availability and flexibility of Day Opportunities - you are destroying it! Day Opportunities is already currently under-resourced and these proposals will all but finish it off. You can't vote for a cut of 40% to the Social Services budget and hope to offer genuine options for the future running of Day Opportunities.
- Sickening to see the most vulnerable weakest members of society targeted. And their poor carers who do the most sterling job giving up their own lives, health and well being already.
- The closure of the Grange will limit availability and flexibility of day opportunities for residents - not increase them. The whole point of a day centre is to provide much needed interaction, socialising, getting out of the home and seeing familiar smiling faces in a safe environment, on a regular basis. The only alternatives for those who lose a place at a day centre is being stuck at home looking at 4 walls for 24/7 waiting to die or a carer providing a sit-in service which is just not the same as a Day Centre. In both these instances, the resident's health is very likely to deteriorate because there is little/zero interaction /stimulation. The social enterprise model is a risk that understandably clients and carers/families find worrying. The quality of service will be compromised because of reduced finances, this will impact staff. Why can't Haringey Council ensure all staff keep their jobs or have a choice. Clients need

highly trained and experienced staff that know them and their needs. There is great distrust and suspicion of the proposals and of Haringey Council and councillors.

- I know from personal experience how stressful it is trying to support an adult with autism. Parents/carers are already under a huge amount of stress and many have already given up work in order to care for their adult children with autism / learning disabilities / parents with dementia. The Roundway service for example, provides a trusted, expert, safe place for people with autism to go and learn new skills, to be supported to access community activities that they would not be able to access without extremely structured support from a safe environment and base. To take away the Roundway service will be placing a massive extra strain on parents/carers to use personal budgets to buy in support to enable their adult children to go out into the community. Many parents/carers of those attending the Roundway are elderly and frail and have health problems themselves. Without an established, safe and expert day service like the Roundway – they will be at a loss as to where to get equivalent appropriate support for their children to enjoy community activities as they do now.
- Run them but more cheaply
- Haringey are not increasing anything they are destroying facilities for residents - vulnerable residents in the borough. This is unethical and unacceptable.

Letters and emails



[Redacted]

[Redacted]

[Redacted]

23 July 2015

Dear Sir

NOTIFICATION OF PROPOSED CLAIM FOR JUDICIAL REVIEW

OUR CLIENT: [Redacted]

DOB: 5 JUNE 1984

We are instructed by our above named client in relation to proposed judicial review proceedings against Haringey Council in relation to the proposed closure of the Roundway Day Centre.

We note that on 3 July 2015 Haringey Council commenced a consultation regarding a 'transformation' in the delivery of its adult social care. The consultation is due to close on 1 October 2015. One proposal is to close 4 day centres for adults with disabilities, including Roundway.

Our client is [Redacted] and has autism, learning disabilities, and requires complex care. She has attended day centres since the age of 19 and has attended Roundway for approximately 2 years. We are instructed that she is settled and happy at Roundway and that our client would experience a significant amount of distress if Roundway were to close. We are instructed that if Roundway closes there will be no appropriate day services for people with autism and complex needs in the area, including for our client.

Please take this letter as notice of our potential challenge pursuant to Regulation 54(b)(i) of the Civil Legal Aid (Merits Criteria) Regulations 2012. This states the following:

54. For the purposes of a determination for investigative representation in relation to a public law claim, the Director must be satisfied that—
 - b) the individual has—
 - (i) notified the proposed defendant of the individual's potential challenge and given a reasonable time for the proposed defendant to respond.

Please also note paragraph 7.38 of the Lord Chancellor's guidance:

In relation to investigation representation, regulation 54(b) creates a new requirement regarding notification to the proposed opponent of the potential challenge. This is distinct from the requirement for full representation for judicial review applications to have followed the pre-action protocol, and involves notification only of the potential for a challenge rather than an exposition of the legal grounds for that challenge.

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The potential grounds of claim may relate to the lawfulness of the ongoing consultation, breach of the local authority's public sector equality duty, breach of the Care Act 2015, and breach of the *Statutory guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy* dated March 2015.

[REDACTED]

FAO Mr S Lawrence-Orumwense
Haringey Council
Corporate Legal Services
L7 Alexandra House
10 Station Road
Wood Green
London
N22 7TR
DX: 156930 Wood Green 5

Also by email to: stephen.lawrence-orumwense@haringey.gov.uk

25 September 2015

Dear Sir

PROPOSED CLOSURE OF ROUNDWAY DAY CENTRE

We refer to our previous correspondence in relation to our client [REDACTED]. We now write on behalf of a second client, [REDACTED], to express our remaining concerns.

As outlined in our letter dated 5 August, our clients' primary concern is the apparent lack of detailed information available in respect of alternative provision to service users at the Roundway Day Centre ("Roundway") in the event that the centre is closed.

We note that you have now confirmed your agreement that [REDACTED] requires a buildings-based service, especially due to the high risk of her absconding. You also confirmed that a learning disabled and autism specialist service will be made available at Ermine Road and [REDACTED] will be able to access this service. You say that there will be space at Ermine to accommodate this specialist service and robust security measures will be put in place to address the risk of absconding. You say there will be appropriately skilled staff there to meet [REDACTED] needs. We note, however, that what this expanded service at Ermine Road will look like has not yet been finalised.

Although we acknowledge that you have confirmed [REDACTED] can attend Ermine Road and have provided some specific information about an autism specialist service that will be made available for her there, we are concerned that this information has not been made public. Other service users at Roundway have neither seen this information nor received any written confirmation from Haringey Council ("HC") that they will be able to access an autism specialist day centre service following the closure of Roundway. We therefore submit that these other service users and their families, including [REDACTED], have not been put in a position whereby they are able to fully respond to the consultation as they do not have the relevant information about the expanded service at Ermine Road, whether they will be able to access it, and regarding what alternative services will be available for them if they are not able to do so.

Background information

We are instructed by [REDACTED] by his mother and litigation friend [REDACTED]. [REDACTED] is 36 years old. He has autism and learning disabilities, requiring complex care. Since 2001 [REDACTED] has resided at a residential placement at [REDACTED] from Monday to Friday. [REDACTED] stays with [REDACTED]

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at weekends and she has further contact with [REDACTED] during the week, for example, if he has a doctor's or other appointment to attend. [REDACTED] requires 1:1 supervision 24 hours a day. We are instructed that he can exhibit challenging behaviour if he is not engaged well in activities. We are instructed that [REDACTED] can shout, kick, and bite if he becomes unsettled, and that he periodically goes through cycles of being less settled every few months, during which his challenging behaviour typically increases.

[REDACTED] has attended Roundway for 4 years, since 2011. [REDACTED] attends 5 days per week from 9.30am to 3pm. At Roundway, [REDACTED] takes part in many different activities. We have been instructed that [REDACTED] is difficult to entertain indoors because he is not interested in computers or television. He does, however, take part in arts and crafts activities at Roundway. He mostly enjoys the outdoor activities at Roundway and he is able to take part in cycling, running, walking, bowling and other visits to the community. When in the community, [REDACTED] requires either 1:1 care – but only if the carer is confident and very familiar with his needs. Where the carers are less confident he requires 2:1 care. We are instructed that [REDACTED] enjoys attending Roundway, is friendly with the other service users, responds well to staff, and any change to his daily regime would cause him a significant amount of distress. [REDACTED] particularly enjoys the number of opportunities to engage in activities in the community.

[REDACTED] has a history of absconding, which presents a real risk as he is unaware of the dangers of traffic. He previously attended Ermine Road day centre but was moved following a series of incidents. On one occasion, he was taken into the community by a carer who did not fully appreciate his care needs. He was left on his own from a short period of time during which [REDACTED] ran away. There were a number of difficulties in locating [REDACTED], and the police had to become involved. We are instructed that there have been no such safety concerns at Roundway. We are instructed that the most important of [REDACTED]'s care needs is that he is cared for by individuals who have an understanding of autism. Issues with absconding have only occurred in the past when [REDACTED] has been looked after by carers who did not understand the extent of his needs.

Within the consultation document HC suggests that service users such as [REDACTED] who reside at a residential placement could access support within their residential placement during the day time if Roundway closes. We are instructed that this is not a viable option for [REDACTED] because Cassini House has neither the staff nor resources to provide care to [REDACTED] during the day. We are instructed that Cassini House is unable to provide the activities and stimulation during weekdays necessary to prevent [REDACTED] challenging behaviour from increasing and so that he can enjoy a good quality of life.

As explained above, currently no information has been provided to [REDACTED] or [REDACTED] about what services [REDACTED] would be able to access in the event that Roundway closes.

Request for information

We submit that clear information in response to the following questions must be made available in order for people affected by any closure of Roundway to provide an intelligent response to the consultation:

1. Will service users who are in residential placements be able to access the expanded service at Ermine Road?
2. Does HC believe that the same day service [REDACTED] enjoys at Roundway can be provided at Cassini House?
3. If so, how will this day service at Cassini House be achieved for [REDACTED]?
4. Will there be appropriately skilled staff available to provide autism-specific support to [REDACTED] without Roundway at Cassini House?
5. If not, will there be sufficient services in the market place available to [REDACTED] as a disabled adult with autism and complex needs, i.e. are there enough providers and what will the demand be for these services versus supply?
6. What are these alternative services that can be purchased by [REDACTED] via a personal budget?
7. What planning is being conducted by HC now to ensure that sufficient services will be available to meet [REDACTED] eligible needs?
8. If Roundway closes, in respect of service users living in residential placements and those who are not transferred to Ermine Road, how will HC discharge its duty under s 5 of the Care Act 2014 to

"promote the efficient and effective operation of a market in services for meeting care and support needs with a view to ensuring that any person in its area wishing to access services in the market (a) has a variety of providers to choose from who (taken together) provide a variety of services and (b) has a variety of high quality services to choose from?"

9. If Roundway closes, in respect of service users living in residential placements and those who are not transferred to Ermine Road, how will HC comply with the DoH's 'Statutory Guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy' dated March 2015, in particular chapter 4 in relation to the planning and provision of services for people with autism locally and chapter 7 in relation to supporting people with challenging behaviour and complex needs?

Without information in response to the above questions, service users and families affected by the closure of Roundway, including [REDACTED] and [REDACTED] will not have sufficient information about whether they will be positively or negatively affected by it. Furthermore, HC would not have all of the necessary information regarding the availability of appropriate services in the marketplace to make a lawful decision to close Roundway.

Given that the consultation is due to close on Wednesday next week, please provide information in response to the above questions as soon as possible.

We look forward to hearing from you.

Yours faithfully

[REDACTED]

The Lewis & Mary Haynes Trust: Objections to the proposed merger of the Grange and Haynes dementia day care centres and closure of the Haven day care centre.

The Trust objects to the proposed merger of the Grange with the Haynes dementia day care centre are on the grounds of:

- Insufficient capacity at the Haynes centre
- Unsatisfactory travel for clients from east of borough
- Alternative provision unlikely to be adequate replacement of day care
- Personal Budgets unlikely to cover alternative provision
- Need to meet future demand for dementia day care
- Inconsistency with National Dementia Strategy & Haringey Dementia Commissioning Strategy

Insufficient capacity at the Haynes centre

1. The Haynes Centre was designed to accommodate 20 clients [REDACTED], PCT project manager instruction to architects at day centre design meeting, 5 May 2004) This is borne out by the provision of 20 places in the dining area and the furnishing of the main space.
2. The Consultation paper refers to 40 people currently accessing the Haynes Centre, and that is correct. However, some clients come two days and others for three, and because of illness or for other reasons, only about 18 come each day.
3. Impact of merging the Grange with the Haynes: We do not have the latest take-up figures but using January 2011 figures, the combined Grange (152 place days) and Haynes (181 place days – based on 15 users at that time) will be 333 place days, or 111% of the Haynes capacity. The present take-up at the Haynes has increased with the rise in users from 15 to 18, and as a result of the closure of the Woodside Centre. Furthermore, closure of the Haven will require dementia day care for up to 27 people (EIA for Haven closure, June 2015)
4. Transfer of service users from the Grange to the Haynes – reassessment of Grange users: The Consultation paper states that the closure of the Grange would require reassessment or review of the current users with a view to identifying satisfactory alternative provision to meet the assessed needs. Because all users of the Grange and the Haynes are clinically assessed as having severe dementia, it is unlikely that further assessment will find their assessed need satisfied by a lesser provision. In addition, since the reassessment or review will be conducted “with a view to identifying satisfactory alternative provision to meet the assessed needs” there is a risk here of needs assessment criteria being adjusted to reflect the limited number of places at the Haynes.
5. Reassessment of Haynes users: Although the Consultation paper makes no reference to reassessment of present users of the Haynes Centre, the Equality Impact Assessment states: “The Haynes service users would also be subject to a re-assessment of their care and support needs.” The same considerations set out above would apply.
6. While it is certainly true that the Haynes centre, with 281 sq metres net floor space, is larger than the Grange, nearly a quarter of that (62 sm) is used for kitchens, offices, toilets etc. A further one-third (87 sm) is made up of smaller rooms used for therapeutic activities (reminiscence, art, music, library) leaving 30% (78 sm) for dining and 20% (54 sm) for the sitting area.

Page 1

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Cllr Morton
River Park House
225 High Road
London, N22 8HQ

30th September 2015

Dear Cllr Morton,

HARINGEY COUNCIL'S ADULT SOCIAL CARE CONSULTATION

I am writing on behalf of the Healthwatch Haringey board who have considered the consultation proposals and are aware of feedback from a number of service users and service user organisations. We note that the information available to service users and their carers to enable them to respond to the questions in the consultation does not seem to be any more advanced than in January / February when the Council agreed the Medium Term Financial Strategy. We had anticipated that some more work would be undertaken prior to the consultation on each of the individual facilities and services under review.

The consultation has been extensive and provided many opportunities for engagement and feedback which is to be welcomed; there is no doubt that the team involved have been very committed to the process. We appreciate that these are complex issues and that this makes it difficult to obtain meaningful feedback from service users and their carers. However, the questions were simplistic in many cases and did not reflect the fact that choices involve trade-offs between alternative options. For example, to ask someone the question..."do you think the Council should provide more reablement opportunities" encourages a "yes" response but it is neither clear what is being given up to fund this nor how much reablement is being provided to replace a current service, or the form it will take.

The concern highlighted above reflects the fact that the consultation is being undertaken before the alternative models of service provision have been developed, scoped and costed, and indeed themselves consulted on. This makes it impossible for a service user or a carer to give a rational and meaningful response to what are complex issues. A specific example relates to the future of Osborne Grove nursing home where one of the questions asked for consultees to agree / disagree with an option that the service should



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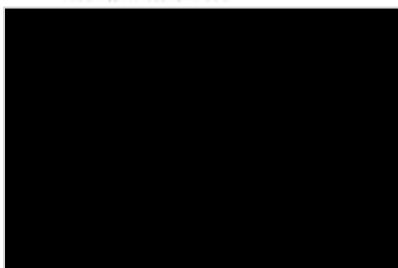


be privatised with an external provider managing the service. There are no detailed proposals relating to the future options for Osborne Grove and therefore it is not possible to give a meaningful answer to this question.

To make the consultation more meaningful we think it is necessary to commission some reports, outlining the scope of the new services and, where appropriate, provide option appraisals to clarify choices and promote some innovative and creative thinking. An options appraisal by an appropriately qualified independent consultant would be appropriate in the case of Osborne Grove, for example, in order to see how nursing beds could remain available in the borough in the long term whilst at the same time meeting other objectives around reablement and income generation. We suggest that this approach could also be applied to the day centres which are scheduled to close or be transferred to a social enterprise.

We hope that before making any final decisions on Adult Social Care services the Council will acknowledge the need for further detailed information to be provided to support a more meaningful consultation and decision making process. The proposed changes will alter the landscape of Adult Social Care in Haringey for the foreseeable future and it is essential that decisions are based on a thorough assessment of the alternative options which does not appear to have been the case to date.

Yours sincerely





CATHERINE WEST MP

Member of Parliament for Hornsey and Wood Green

Cllr Peter Morton
Cabinet Member for Health & Wellbeing
Civic Centre
High Road
London N22 8LE

29 September 2015

Dear Cllr Morton

Adult Social Care Consultation

I have been contacted by a number of residents concerned about proposed cuts to day centres in Haringey and welcomed the opportunity to discuss this in person with you when we met recently. This letter is my formal response to your consultation on proposal 3: increasing the availability and flexibility of day opportunities within the borough meeting the individual needs of residents.

I am concerned at plans to close day centres that are a vital lifeline to hundreds of vulnerable people across Haringey. In particular, I am concerned at proposals to close the Roundway, which is a well-respected autism-specific centre for people with very complex needs. Its experienced, highly trained staff are well able to support people with high levels of need, many of whom are non-verbal and can have challenging behaviour. Routine and structure is particularly important for people with autism so it is likely that removing this support will have an impact on users' mental health. For families of people with autism, this valuable service provides essential respite and the comfort of knowing their loved ones are in safe, expert hands. The importance of this cannot be emphasized enough as carers of adult children with autism are often elderly themselves and have physical or mental health problems.

Whilst I appreciate the difficult decisions that Haringey Council is being forced into as a result of significant government cuts, I would like to see this building remaining as a site for people with disabilities so the excellent facilities are not lost to the local community. Over the long term, it is more cost effective to use in-borough services and for those families who rely on them it provides a much needed continuity of care.

I do hope these considerations can be taken into account and look forward to hearing the outcome of the consultation.

Yours sincerely

Catherine West MP

On 1 Aug 2015, at 23:33,

Dear Cllr Morton,

Thank you very much seeing me yesterday, thank you for your welcome and for listening to our concerns regarding the proposals for the Grange and the Haynes. **I do hope that I've been able to** communicate not only our many concerns but also reasons including:

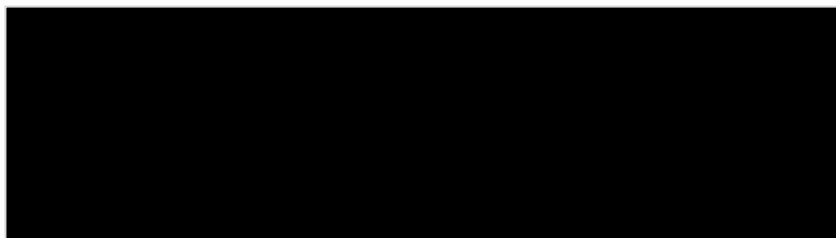
- likely impacts on the current day care service that we all consider as excellent and the impact on the quality of life of our loved ones;
- no further information being made available as promised at the February "higher level" decisions stage for a meaningful consultation process;
- the yet untested and very early stage of development of alternative service models, and their future success;
- our other concerns on transport provision, the re-assessment process, alternative provision leading to isolation, timescales, the future higher costs of alternative provision, etc.
- how it is difficult to engage carers with such (continuing) uncertainties, and achieve confidence in the process.

I did not have the opportunity to type my notes before the meeting but happy to do so and send them if you feel that may be helpful.

I would be happy to be on the service co-design team as per your suggestion, from end of September when we return to London.

Thank you again,

Kind regards,



Cllr Peter Morton
Civic Centre
High Road
London N22 4LE

BY E-MAIL

30 September 2015

Dear Cllr Morton,

Proposals to merge the Haynes and Grange dementia day care centres and to close the Haven day care centre, and to outsource the provision of dementia care to a social enterprise

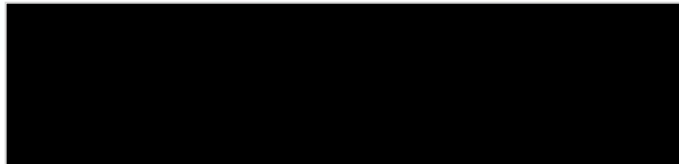
As you may know, this Trust provided the capital funding for the construction of the Haynes dementia day care centre. In addition, we have, over the past 14 years, co-funded the establishment of the Admiral Nurses in Haringey, provided funding for the garden at the Grange, provided core funding for the Alzheimer's Society in Haringey, and funded several projects undertaken by the Older People's Psychology Service at St Ann's Hospital.

I am now writing on behalf of the Trust to express our opposition to the proposals to merge the Haynes and Grange dementia day care centres and to close the Haven day care centre. Our reasons are set out in detail in the attachment to this letter but can be summarised as:

- Insufficient capacity at the Haynes centre to accommodate the increased usage proposed
- Highly unsatisfactory transport arrangements for clients from the east to west of the borough
- Re-provision proposals that do not meet clients' needs Personal Budgets unlikely to cover alternative provision
- Consequent inadequate provision to meet future dementia day care needs
- The proposals run counter to the National Dementia Strategy and the Haringey Dementia Commissioning Strategy

We have been disappointed in the lack of detail on these proposals, particularly on the nature of the "satisfactory alternative provisions" to support those with dementia who will not be able to attend the merged service at the Haynes centre.

...

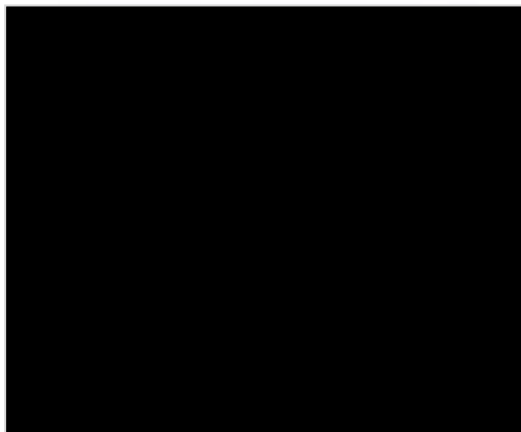


Cllr Peter Morton
30 September 2015
page 2

Outsourcing services: the Trust is neutral on the principle of this proposal. We look forward to working closely with the Council on the procurement of a provider. The only comment we have at this time is that, all things being equal, we would support a proposal from the present management of the Haynes to form a social enterprise company and continue in that role.

The Trust hopes the Council will take our objections into account and reject the proposal to merge the Grange and Haynes dementia day care centres.

Yours sincerely,



22nd July 2015

I AM ONE OF THE SERVICE USER WHO GOES TO ONE OF THE DAY CENTRE. I HAVE BEEN AT 4 DIFFERENT DAY CENTRES IN THE PAST 42 YEARS. DAY CENTRE IS ALL I KNOW. I GO TO MEET UP WITH ALL MY FRIENDS WHO I HAVE KNOW FOR YEARS AND YEARS.

1. WHO ARE YOU TO SAY THAT YOU ARE CLOSING DOWN SOME OF THE DAY CENTRES

2. WHAT RIGHTS HAVE WE GOT IF YOU CLOSED THE DAY CENTRE DOWN. HAVE ANI GOT A SAY NO MORE

3. THE CENTRE IS SO IMPORTANT TO US ALL. IT IS WHERE WE COME TO MEET PEOPLE WHO CARE ABOUT US THE CENTRE MAKES US FEEL SAFE FROM HURT

4. I FEEL SO VERY SAD AND UPSET HURT AMAZED AND DISAPPOINTED. ABOUT ALL OF THIS, IT SHOULD NOT HAVE TO BE LIKE THIS, WHY CANT PEOPLE LIVE US IN PEACE WE DO NOT WANT THE DAY CENTRE TO CLOSED

5. PLEASE DONT CLOSED OUR CENTRE DOWN. IT IS SO VERY IMPORTANT TO US ALL. IT GET US OUT OF THE HOUSE UNDER OUR PARENTS NOSE. SO THE PARENTS CAN DO THINGS WHAT THEY CANT DO WHEN WE ARE AT HOME. PARENTS HAVE A LIFE TO.

6. IN THE PAST 15 YEARS ALL THE COUNCIL HAVE DONE IS TAKE TAKE TAKE EVERYTHING

PAGE 2

22nd July 2015

Away from us ALL. WHY DO THAT TO US ALL

7. How can we move on in life. If we have no life you have taken our life away we don't have anything to do more.

8. WHAT HAPPENS TO US ALL NEXT. STAY AT HOME GETTING ON OUR PARENTS NERVES. AND MAKE OUR CAREER OR PARENTS SICK. WHO WILL LOOK AFTER US THEN.

9. THIS IS OUR LIFE WHY DOES IT HAVE TO CHANGE WE ARE HAPPY OF THE LIFE WE HAVE

10. WHO WILL SPEAK UP FOR US ALL. THE OUTSIDE PEOPLE DO NOT SPEAK ENGLISH GOOD AND THEY DO NOT KNOW US.

11. IT TAKES YEARS TO GET TO KNOW US ALL WE ARE LIKE A FAMILY WE ALL SHOCK TO GATHER. SO PLEASE DON'T TAKE ~~OUR~~ OUR FAMILY AWAY FROM US

12. THE WAY WE GET TREATED IS DISGUSTING AND SHAMEFUL. PLAYING WITH PEOPLE'S LIVES WE WANT LET YOU DO THIS TO US WARE NOT PEOPLE WHO CAN BE PUSHED AROUND SIDE TO SIDE WE ALL STAND TOGETHER WE WANT LET YOU CLOSE THE CENTRE DOWN.

THANK YOU FOR LISTENING TO ME.
ON BEHALF OF:

Councillor Peter Morton,
Cabinet Member for Health and Wellbeing,
River Park House,
225 High Road,
London N22 8HQ

Dear Peter,

I am writing with the enclosed 5 page response from the Older Peoples Reference Group to the consultation regarding the Council's plans to reduce the social care budget and change the provision of services for older people.

As you know I have written before during both these rounds of consultation and the objections expressed stand. On this occasion, and before you come to decisions on future direction and closures in November, I would urge you and fellow councillors very strongly to look at the fundamental limitation of your current approach to savings and social care, and that is reliance on market-led provision. There is more than ample evidence of how badly the current array of domiciliary and residential care is failing the most at risk. And in this environment day care remains essential. As so many in the sector will tell you volunteer coordination, new signposting and better digital coordination cannot fill the gaps.

The purpose of proposing A Model of Social Care Fit for the People of Haringey is to outline that surely now you have a great opportunity to put peoples needs first, and in doing so demonstrate both trust in the reservoir of capacities of users, carers and their agents and representatives in Haringey, and make co-production an economically and socially viable alternative. If you do not seek to change the social care market in this way we fear the breakdown of any residual trust that exists, and undoubtedly worse crises for those at risk. This appended paper is necessarily brief but is offered in the spirit of partnership and an appeal for dialogue which we do not feel has happened to date. A wide range of people in the Older Peoples Forum, as well as linked user and carer groups such as SASH, unions such as Unite Community, community interest groups such as 38 Degrees and others have been party to discussions here, and points included which the in-house consultation with Good Innovations did not reach.

With best wishes,

A Model of Social Care Fit for the People of Haringey

The Council is proposing new model of social care and has enthused about co-production as part of its consultation on what will result from the swingeing cuts which it has made in its budget. Many of us do not think these cuts necessary, and have put the case that other ways could have been found of dealing with the admittedly drastic reduction in finance demanded by the government [letters from Older Peoples Reference Group to Councillor Morton during first and second rounds of this consultation process]. Notwithstanding these differences, and with the over-riding impetus to continue to protect and improve the amount and quality of care which is available to older people, and indeed all adults, who are or may be at risk, the following points are made in the spirit of partnership.

1] Establish a principle of putting peoples needs first and of marshaling resources within the borough to be the primary agency of meeting these needs.

The social care market which has grown exponentially in the past two decades and now dominates the provider spectrum has the unfortunate driving tendency to hold down labour costs and cut corners on quality with a leveling down of actual care possible for individuals, and in too many cases resulting in real dereliction of care such as that evidenced by the CQC with Sevacare in Haringey. At the same time commercial providers business models are prone to being unsustainable and further instances of crashes such as that of Southern Cross in the residential market are likely, and in the domiciliary care market the UK Home Care Association's own break-even marker of £15.70 per hour is seldom achieved. In Haringey we know that the vast bulk of contract or spot payments are significantly below that level. Day care has already been vastly reduced in the borough and is a much more specialized market for providers [for instance, a south Islington NGO providing support to families living with HIV survivors has its largest client base from Haringey].

In an environment where needs are acknowledged to be increasing through ageing, life expectancy, single occupancy, and circumstantial poverty at the same time as reductions in overall social care provided [see LGA and AgeUK for national overviews] since 2010, it must be highly likely that this commercially dominated market will only continue to drive down care standards and the pressure to tighten eligibility criteria by commissioners will also continue, even while the Care Act 2014 extends rights of assessment to all and gives new support to carers.

Instead of 'this is what we can provide' and 'we shall see where you can fit into this' we could move to a 'what is it that will help you in your circumstances?' and 'let's see what resource and support we can build in which actually suits your needs'. The best practice of course already tries to do that. And the Council's documentation suggests that it wants to make a transformative shift of this kind.

Examples such as Re-ablement and Shared Lives are indeed important and worthy of more development. Neighbourhood Connects services through better signposting and voluntary connection are also worth developing. These services can help plug gaps but are also confined by their own terms of reference and targeted groups and time periods. The bigger questions of what happens to people needing domiciliary, day care and –even if more preventive support takes place – residential care, remain to be confronted. The Better Care Fund allows for more working together of Council and health facilities through the CCG, but is not 'new money', and the Kings Fund has shown that cuts in social care are costing the NHS more. Planned hospital discharge, locality teams, named key workers [as for example at The Ark in Hackney] and Re-ablement where appropriate can all be vital, but none of themselves will necessarily change the social care market.

One example can show how leaving the social care market as it is to determine options for care will only bring further spending crises.

Care home charges are now on average 25% above that allowed for in block contracts. Those with sufficient means not covered by local authority payment pay the higher amount. But the Care Act now gives equal rights to all who need residential care and includes them within local authority responsibilities.

Meanwhile care home companies, including at least one of those used by Haringey, have issued warnings of their precarious future in this sector.

Personalised budgets are one way that both legislation and local authority care have been able to open up ways of providing support to people at risk and work best for those with the self-confidence and competence to utilize them but outcomes across the country as well as in Haringey are far from demonstrating clear benefit to the majority of users or carers. However a co-operative model of using direct payments could overcome existing problems for many of employing their own care support person and pool some of the cost and knowledge issues which have discouraged many [research by Community Catalysts, Mutuo and Co-operatives UK].

There are various examples in the UK and further afield of co-operative working, social-public authority partnerships, and multi-stakeholder mutual structures as well as community interest companies contracted to provide services [many of these are well summarized in Ed Mayo [ed.] 'The Cooperative Advantage']. We understand that the Council may be open to a higher profile social enterprise contribution to social care. **The point being made here however is not just “tweaking” the mix, but that now is the time to re-determine the social care market locally so that it puts Haringey users and carers needs first.**

Options include:

A] A social co-operative, supported by the Council, but which within its governance arrangements gives voice to users and to staff, making the concept of 'co-production' much more than a consultation exercise but a real governing force in design and delivery, and with accountability built in towards all stakeholders. A working assumption is that there are economies of scale and cost benefits from local capacity realization to counteract the observation that co-operatives will not compete well in market terms. In an unpublished paper Robin

Murray proposes it is entirely feasible “to develop a model of care where co-operative costs are decisively lower and the standards of care higher, so that co-operative care outruns the private equity care chains”. A home care co-operative could recruit locally, link with existing best practice and induction training, be more likely to retain workers and give continuity of care to individuals, and draw on mutual goodwill in providing services rather than the ever-changing turnover of staff with users, and lack of attention to basic need as at present with the dependence on private company providers. It is noteworthy that the director of health and social care at NICE has reported that their independent experts guidance is that home care visits should generally be at least half an hour [not fifteen minutes as is the current norm] and that regular training and recognition is essential [see The Guardian 23/09/15 – Gillian Leng]. There is no evidence that commissioner checks alone can achieve this.

B] An integrated health and social care co-operative. Both the CCG and Haringey Council currently agree to finding the means of jointly establishing more locally based preventive and restorative care while saving on high end costs wherever they can. The step not taken so far is creating a structure which can oversee, encourage and seed ways in which people will support each other, set up good neighbour networks of skills and time share, and create work opportunities for those living locally with under-utilised skills [including young people who could help older people, and optimizing older peoples under-used capacities].

C] Establishing a mutually owned social care agency, separately governed but initiated by the Council [and potentially the CCG as the other current commissioner of social care]. This would be the equivalent of a public-social partnership. One existing example in child care of such a model is the Foster Care Co-operative which works across numerous local authorities and has mechanisms for dealing with commissioner-provider conflicts of interest. The Council could consider with the CCG establishing a mutual community interest company [CIC] learning from the experience of Your Healthcare in Kingston and Richmond, and other CICs in Kent and Essex. Essex Cares for instance attracts investment for placements but has the local authority ethos and support. In this instance it is

suggested that particularly for Haringey where there are differences between the readiness and reach of North Middlesex and Whittington Hospital community services [and neither of these health bases being in the borough] there is a strong imperative for a unified and publicly accountable adult care agency. The multi-stakeholder model gives full membership and accountability to service users. The continuity and projected mixed use of Osborne Grove could be managed within such a model.

The above by no means exhausts the potential array for social care, led from the perspective of putting the **public good first**. There are ways of connecting housing improvement and retrofitting with fuel poverty and social isolation initiatives which could be co-operatively organized and contribute to the social economy of Haringey while specifically helping the most vulnerable people. The Circle model of self-directed support and membership network building could be explored. The key issue however in re-configuring the services for users and carers in the borough will be the willingness of the Council to develop a trusting relationship with those who are most involved in representing people at risk as well as with direct users and carers.

2] Recognition that - in terms of the Care Act, the Human Rights Act and other relevant legislation, and the widely accepted best practice imperatives of dignity, respect, privacy, self determination and sociability as requisites for all people in need or receipt of care - the Council has a responsibility to make the best use of capacities at its disposal, physical spaces and human capabilities as well as financial ones.

In light of the above we again urge that bases such as The Haven and The Grange not be discarded. While networking and volunteer coordination are undoubtedly going to be of increasing importance, and digital communication too, the **retention of place** is fundamental to the sociability and most often the self determination of frailer older people who need continuity and known surroundings. At the same time the loss of such physical bases will impede the

development of much-needed outreach and 'go-to' environments, whichever alternative models are adopted. And too much reliance on

digital communication can exclude, not include, significant numbers of frail elders. In the words of the Rowntree Foundation[2013] in Widening Choice for Older People

<https://www.jrf.org.uk/report/widening-choices-for-older-people-high-support-needs>

where there are high support needs such as multiple long term health conditions or signs of dementia then what matters is ensuring reciprocity. People with diminishing capacities lose most, and can contribute least to their own welfare when what they know is taken away.

If the Council is serious about its commitment to a Living Wage and to equity and empowerment as well as an end to poor quality care then it can no longer afford to rely on private companies to be the main determinants of what kind of care, and wage, is paid. A mixed economy of care can be consolidated for greater benefit if the vision and infrastructure are negotiated in trust with all stakeholders.

Adopting Unison's **Ethical Care Charter**, as have three other London boroughs to date, would be a significant step.

GP/23/09/15

I'm the sole carer of my husband who attends the Haynes Day Care Centre for people with dementia, and also member of the Relatives Support Group there. I recently joined the Carers Reference Group set up by the Haringey Healthwatch, and as its representative attended the Dementia Steering Group last Wednesday - we were in the same room, but unfortunately I had to leave after the meeting promptly to collect my husband from his day centre much after their usual time.

I wanted to talk to you last Wed but that was not possible. Could I please seek some information from you re: the BCF. I refer to the BCF Community Event on Thursday 4th June 2015, and the presentation that you circulated the following day. **I refer specifically to page 23 of the presentation "BCF Scheme & Service Overview" which summarises components of the BCF in a table format under 4 headings with indicative resources for 2015/16.** Under Scheme 1: Admission Avoidance, a number of services are listed and £13.5m resources for 2015/16 is shown.

The services listed include Dementia Day Centre, as carers we would strongly agree that good dementia day care centres keep people with dementia healthy longer in the community, reduce their isolation, enhance quality of their lives, delays the need for residential care and reduces the need for hospital admissions. As carers we think that care at home does not provide such benefits and may in fact lead to isolation, lack of adequate support and default use of A&E services; carers' health and wellbeing are also effected with double impact on NHS.

Could I please ask you to give further information and explanation for the inclusion of the Dementia Day Centre on the BCF Overview table: does it refer to existing services, does it refer to such services needing to be provided and/or developed to help deliver BCF objectives, has there been any assessment of the level of need, does it reflect the major changes to dementia day care services following the recent decisions of the Council, does it take into account the increasing numbers of people with dementia, and does it indicate some BCF funding may be available to provide dementia day centre services, etc.

Thanking you in advance,

Re: Adult Social Care Consultation: Proposal 3 Increasing the availability and flexibility of day opportunities within the borough meeting the individual needs of residents

Dear Sir/ Madam,

We are submitting the following report as the National Autistic Society's consultation response to Haringey's Adult Social Care Consultation: Proposal 3. Our consultation response focusses exclusively on Haringey Council's proposal to close the Roundway day service, known locally as the 'Autistic Spectrum service'. The National Autistic Society strongly oppose the plans to shut the autistic spectrum service at the Roundway.

The following report details the findings of a survey we conducted with parents and carers and residential staff caring for adults who attend the Roundway day service. It concludes that parents, service users, and staff want the Roundway service to remain open. It is an autism day service of high quality, which has enabled those attending it to achieve fantastic outcomes – an achievement often out of reach and extremely difficult for people with autism, learning disabilities, complex needs and challenging behaviour.

The National Autistic Society is fully aware of the budgetary constraints and pressures currently faced by local authorities, and we appreciate that Haringey are operating in a tough financial environment, however, we remain extremely concerned about the proposed closure of day centres for those with learning disabilities and autism across the borough of Haringey – in particular, the closure of the autism specific service at the Roundway.

I have met some of the families fighting to keep the Roundway service open and it is clear to me that it is a much loved service which provides essential support for autistic adults, and vital respite for their parents and carers, many of whom are older and dealing with their own health and care issues.

At the NAS we have over 50 years experience of providing services and support for autistic adults with accompanying complex needs and behaviours that challenge. We know better than anyone that it can be difficult and challenging to get support and services right for people with the most complex needs. Our experiences have taught us that services for this group must be well planned and structured by skilled, experienced care professionals with a sound knowledge of the autism spectrum and how it can exhibit in people with learning disabilities and challenging behaviours. This is what the Roundway service provides.

The revised statutory guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy recognises the unique challenges in providing support and services for people with autism, complex needs and behaviour that challenges. As a result, the revised guidance now includes an entire chapter dedicated to supporting people who fall under this category. We urge Haringey Council to take this into account, along with the evidence and recommendations presented in the following submission.

Chief Executive, The National Autistic Society

GOOD MORNING, MEMBERS OF THE TRANSFORMATION TEAM

Just to let you know that I have responded to this (very widely publicised consultative document) **several times ...mostly on line**. I have - on three or four occasions - been timed out which causes great inconvenience, loss of valuable time, energy and effort. I have attended some workshop meetings from which I have been asked to leave and to express my concerns in private rather than **at the "workshop" meeting itself**. Unfortunately I am now more or less housebound 24/7 because - as the result of a car accident some years ago (fractured spine and other serious injuries) I suffer from a progressive and disabling neurological condition which means I cannot get out and about independently. I am also the registered carer of my husband [REDACTED] [REDACTED]

[REDACTED] **Since he was diagnosed with vascular dementia and Alzheimer's disease, cancer, stenosis of the spine some four or five years ago - [REDACTED] has no assigned social worker and was "discharged" from the Clinics at St Ann's two or more years ago**. As a self-funder I pay for each and every service provided by Haringey. My husband has been hospitalised on several occasions suffering from a life threatening disease/trauma not directly related to dementia. Once discharged from hospital however, neither the NHS or Social Services now provide the Home from Hospital package of care that was, until April 2014, extended to those vulnerable patients who had been in hospital for two weeks or more. I have been told on more than one occasion by one or two persons **working in the "Caring" professions** that it is a waste of public resources to provide such services (including physio or other domiciliary home visits) to persons deemed non-rehabilitatable by reason of dementia or other unpredictable, progressive, incurable and **"terminal" Disease**. Any service provided by Haringey (including that available from outsourced but charitable agencies such as **"Metropolitan"**), the personal alarm system and for one or two sessions per week to

attend the HAYNES DAY CENTRE, is means tested - euphemistically dubbed an assessment of **one's defined (i.e. Haringey's) care needs**. The idea of **personal budgets that cannot possibly meet** the very considerable capital and day to day expense that taking over the full responsibility to provide (T.L.C) consistent day in day out care for a dearly loved one incurs. In 2012 or 2013 I was awarded a personal annual budget of £300. This did not cover the capital and **'running costs'** that my beloved husband needed for more than 3 weeks. I have had to install up to date facilities **adapted for my husband's and my special needs**; The house we live in is on three floors so we have had to move to the ground floor whilst essential alterations are made to the house to cope with both of our severe and progressive mobility problems. Despite the fact that we are tax payers and have paid the council taxes/rates in full for some 50+ years, I was informed by the **Council's tax office that we are not entitled to any sort of rebate** in consideration of the fact that we are both disabled and cannot get out and about unless accompanied by a personal Carer upon whom we have called (by private arrangement) for the past decade or more. Notwithstanding the fact that I had requested that my husband attend the Haynes Day Centre it was not until September 2014 that he started to attend. There was an absolute dearth of information

as to whom I should address my request, as a self funder, - although rumour, indecision and misinformation abounded.(

In January 2015 - after a similar long delay - my husband attended the Haynes for two sessions per week - Wednesday and Friday.

The management and staff of the Haynes are quite exceptionally devoted to their calling; their compassion, care and loyalty to their 'Clients' is second to none. To those who attend the HAYNES the state of the art facilities (made possible by the generous bequests of the late Haynes sisters), the social contact with their peers (perhaps the only opportunity for those dear persons who have progressed some way along their 'dementia journey' and who are necessarily confined within the same four walls for the vast majority of the time IS OF SUPREME IMPORTANCE. Any change to their familiar programme will most certainly disturb and confuse these persons; moreover the absence of the staff whom they know and recognise and with whom they have built up a trusted relationship will undermine their very limited confidence and feelings of security. Moreover, and very importantly, these brief periods of time afford their designated, registered carers [on duty 24/7 365 days and nights a year] a small window of time when they can attend to other work/interests which is simply not compatible with their unrequited caring responsibilities. They have peace of mind knowing that the Haynes, as presently constituted, managed and staffed, is a sanctuary - a place of safety - in which their loved ones' well-being and quality of life is regarded THE overriding priority.

The idea of spreading the butter further, to ration the scrapings to cater for the needs and concerns of those whose 'centres'

have been closed down is both cruel and shortsighted. It may not, in financial terms, even be cost effective. Transport, scheduling time tables to "share" the ETHOS, mission statement of the Haynes will add substantially to the cost and staffing levels needed

to oversee these new arrangements. Neither the present "clients' who happen now to populate the many distant and disparate areas within the extended boundaries of Haringey nor the "employees' of the outsourced agency/private enterprise can actually deliver a remotely comparable service (and how far would the personal allowance go?) to these, the most vulnerable, frail and too often ignored, PERSONS, suffering from the depredations, confusion and loss that these Diseases inflict .. a living death that tightens its stranglehold day on day on day. There is NO CHOICE - these PERSONS and those "registered carers" for ever committed to their loved one's "best possible" quality of life and well-being must keep on keeping on...

As the registered Carer and wife of 61 years to my beloved husband it would seem that we are now soon to be parted for ever;

he is gravely ill and hospitalised. If, DV, he does "survive" this present "set back" I fear the terrible toll this has exacted from his very PERSONHOOD. I stay by the telephone all night awaiting the call that may not come .. this night, tomorrow or for many days, weeks or months.... It grieves me greatly to witness my husband's agonies of desperate confusion, restless agitation .. unable to communicate coherently (dysphasia) or even to swallow without choking (dysphagia) ...the palpable pain ..and tortured cries ...

I pray that those others entrapped in the relentlessly cruel and ruthless grasp of these devastating diseases will at least be able to enjoy some quality of life, cradled in the assurance of committed care - not passed hither and thither like some insensate parcel marked "Not known. Return to Sender".

I too am appalled by the knowledge that Haringey has substantial funds held in reserve - albeit somewhat reduced since 2010. The amount of publicity - professionally designed, printed, published and distributed by Royal Mail - appears to rely on outdated computerised records that are inaccurate, duplicated but generated by the touch of a button - the new telephony recently installed - for which the caller is obliged to pay for whilst waiting upwards of 20 minutes to get through at all - wasting the time and energies of the caller,

whilst “**earning**” the toll exacted from the waiting queue of callers **You are now in queue number 11...etc etc.** It also seems that in common with HM Government vast sums are spent on updating computerised hard and soft ware which nonetheless remain unfit for purpose; many staff are equipped with tablets, mobile phones, lap tops, desk tops for their personal use at work. Many do not know how best to use these technologically advanced devices, despite the induction and training courses that are offered to them too.

Of what possible use are the endless charts, pages and pages of statistics and multicoloured appendices, indices ? How many feedback forms, surveys and questionnaires are collated and then scrutinised, analysed and published on the internet and in printed form .. **in many cases the “facts and figures” are homogenised into a bland “one size fits all” but meaningless statistic... the amount of paperwork. on line publications grows ever more profuse - much of the information duplicated over and over for the ‘enlightenment’ a.k.a. obfuscation** of numerous committees, sub- committees, cabinet meetings and the like. I am frankly shocked to learn that the administrative overheads, the distribution of council papers, minutes, agendas, notices, reports, directives, day to day correspondence and other printed material (also published on the internet) and the cost of staffing and running the Cabinet Office etc etc costs in the order of £1 million per annum.

Be that as it may, I am reliably informed, even now that certain reserve funds are ring fenced - to **be prioritised and used only in what constitutes a “crisis” or “emergency” as defined by the Council and Senior Civil servants. - which sometimes turns out to be “in the interests of the Council staff to whom we owe a duty of care” etc.** It seems to me - as one - according to many - of the dinosaur generation who is opposed to change and therefore doomed to extinction - that the relentless politicisation of medicine, social services, education .. the whole gamut of the many established professions - has degraded the mores and modus operandi of these distinguished and autonomous institutions - which are, quite rightly, subject to the rule of law. The spools of red tape that beribbon so many of the dictats, directives, guidance notes, statutory instruments and the like entangle and confuse those trying to follow the letter of the law. More Bills have been passed, with the Royal Assent, in the last decade than ALL the STATUTES enacted since the reign of King John. Many of these Bills are poorly drafted and if enacted need drastic revision - another BILL is drawn up...

Whilst not wishing to denigrate those who represent us in the corridors of power many of whom regard themselves committed to the service of those they represent, not prone to self aggrandisement or to single minded self interest, I feel very strongly that it behoves all policy makers to examine their priorities ranking them according to their duty of care to those least able to protect or help themselves - NOT to questions of political expediency or power hungry self-interest to score points over those who would oppose you;

I hope very much that the Priority2 enquiries team of “transformers” will take the time and trouble to read and consider the views of an elderly resident and, if appropriate add them to the consultative papers to which I have already replied. I believe that my comments - and those of my dear [REDACTED], were he still able to communicate, are worthy of respect and careful appraisal. My long experience belies the strength of these exhortations; I realise that - if truth be known - my battering my head against a brick wall will do nought but to give me a bad headache. The political imperative must prevail. Conobor!

CAN YOU PLEASE EXPLAIN HOW AND WHY I WAS TIMED OUT (with no pre warning) when I took the time and trouble to respond to your consultation. I have received nearly a dozen letters/notices/emails etc. about this - and have spent many hours keying in my considered replies.

The copy is lost ,, I tried to copy it on my data base in PDF format before it suddenly just disappeared from the screen. if Haringey decide to expunge feedback - without any pre warning - perhaps it would be more considerate and sensible to ensure that the material is saved ,,

[REDACTED]
[REDACTED] We do not qualify for any social care and are self funders in every respect. What services we have from Haringey we pay for .. what special equipment and adaptations to the house that are mandatory for someone with my husband's needs, and indeed mine are our responsibility - we do not even have a designated social worker to whom to turn for advice, information or some minimal support, interest or compassion. We are totally on our own. The outsourced services recommended by the Council are all interested only in money .. not people. These agencies charge extortionate fees from those in need of care, often vulnerable, elderly and socially isolated.

The carers these agencies employ are grossly overworked and underpaid - covering a large area such as Haringey much of their (UNPAID) time is spend chasing from one 'client' or another. GPs seldom if ever visit their elderly, vulnerable and incurably ill patients. We are told that it is a waste of public resources to call upon highly paid professionals to examine, treat or offer a modicum of human kindness and understanding to those who are suffering from an incurable disease and that in these days of growing demand, increased population and the escalating expectations of those who are quite blatantly prioritised to the detriment of those who have contributed throughout their lives, struggled to remain independent and self reliant and who, even now, continue to pay their way, taxed and taxed ..

Yes I am a very angry old woman ... because every day I witness waste and incompetence, lack of care or even interest in others .. I hear excuses about lack of funds .. but the higher executive level of civil servants receive generous salaries, gold plated pensions often deciding to take early retirement and then take up "consultancy" appointments in other local authorities, the private sector or the higher echelons of the civil service. Ageism is rife - despite the fact that such discrimination is illegal as are other discriminatory prejudices still, very sadly, extant.

Yes, I am frustrated. I am constantly harassed to give feedback, to be interviewed by "researchers", fill in endless surveys, reports and questionnaires. There are far too many behind computer screens, filling in forms, writing reports, checking charts and looking over their shoulders for line managers or studying guidance notes or the latest regulation, rather than pursuing their chosen "vocation" or giving "hands on care", instruction, information" or the wisdom of experience and the genuine wish to commit themselves to their vocation rather than to secure the highest possible reward for themselves at the expense of those they purport to serve.

Please let me know why your enthusiasm for feedback is not matched by the realisation that expunging the work, effort, out of pocket expense and TIME that respondents expend is totally disrespectful, inconsiderate and most certainly does nothing to endorse the

oft emphasised comments ...*we greatly value your feedback, your comments are invaluable etc etc.* Sound and fury signifying nothing.

The “selfie” tranches that exist in sections of today’s communities as well as the me-time demands of some others are puzzling to we older folk who have experienced hardship, war, austerity and the rigours of self discipline and self reliance and all manner of “deprivation”. rationing and regimentation.

If by chance this electronic message does not land up in some spam box or is thrown into the trash can, I would hope to receive a brief acknowledgement **by email only** and maybe, just maybe a response to my query ..

I am unable to get out and about but hope to be able to attend the workshop to be held in August - we are told that advocates and support workers will be present ... to explain what to me is the inexplicable.

██████████ born Middle Land ██████ and resident in Highgate since 1942, as were my parents, maternal grandparents and other close relatives. Change and decay are inevitable and should be accepted with good grace; but I nonetheless regret the passing of some of the values of a bygone age and the imposition of a dog eat dog globalised world.

Hornsey Pensioners Action Group (HPAG)

Response to Consultation by Haringey Council on Adult Social Care services

September 24th 2015

The text in the consultation emphasises the importance of preventative care, keeping older people well.

We agree. This is a message that our group has campaigned for over a long period. Many things help keep people well; these include low cost health services such as physiotherapy & podiatry, eating well, local facilities for exercise classes, swimming and, not least, opportunities for older people to socialise.

The provision of community health services is currently provided by the NHS, and in past representations we have noted inordinately long waits.

In Haringey, hot meals to residents is provided by recommended firms, lower charge after means-testing.

Provision of facilities for exercise and centres at which older people can meet with one another, get advice and help is a local authority responsibility. In some they were able to get a hot meal. These work well at present and it appears that this consultation wants to close some of them.

According to the stated aims, this is illogical to close them. Please keep open these centres where people get face to face attention with others.

It also appears that the closure of Osborne Grove Nursing Home is proposed.

Members of HPAG have had much involvement with the home. It cannot be verified that patients would fare better with '*re-enablement*' than by remaining in the home.

In fact there are too few residential nursing homes to aid the transition from hospital to own home in Haringey. More Intermediate care was mentioned but no plans outlined.

Do not close Osborne Grove Nursing Home.

The recommended alternative schemes that would operate as Social Enterprises could not replace the facilities proposed to be withdrawn. It is possible that such enterprises would supplement the work of the centres and nursing homes; we note that Caring Connections was appreciated when supported for a short time by Haringey Age UK.

However, it is not acceptable to out-source council responsibilities to Social Enterprises.

In general, out-sourcing requires contract definition; this cannot cover everything and guarantee good quality of service. The path of responsibility would be broken and residents deprived of council care.

If the proposal to close the centres went ahead our members and pensioners across the borough would feel bereft.

Clr Peter Morton
Civic Centre
High Road
London N22 4LE

BY E-MAIL

30 September 2015

Dear Cllr Morton,

Proposals to merge the Haynes and Grange dementia day care centres and to close the Haven day care centre, and to outsource the provision of dementia care to a social enterprise

As you may know, this Trust provided the capital funding for the construction of the Haynes dementia day care centre. In addition, we have, over the past 14 years, co-funded the establishment of the Admiral Nurses in Haringey, provided funding for the garden at the Grange, provided core funding for the Alzheimer's Society in Haringey, and funded several projects undertaken by the Older People's Psychology Service at St Ann's Hospital.

I am now writing on behalf of the Trust to express our opposition to the proposals to merge the Haynes and Grange dementia day care centres and to close the Haven day care centre. Our reasons are set out in detail in the attachment to this letter but can be summarised as:

- Insufficient capacity at the Haynes centre to accommodate the increased usage proposed
- Highly unsatisfactory transport arrangements for clients from the east to west of the borough
- Re-provision proposals that do not meet clients' needs Personal Budgets unlikely to cover alternative provision
- Consequent inadequate provision to meet future dementia day care needs
- The proposals run counter to the National Dementia Strategy and the Haringey Dementia Commissioning Strategy

We have been disappointed in the lack of detail on these proposals, particularly on the nature of the "satisfactory alternative provisions" to support those with dementia who will not be able to attend the merged service at the Haynes centre.

.../...

Cllr Peter Morton
30 September 2015
page 2

Cllr Peter Morton
30 September 2015
page 2

Outsourcing services: the Trust is neutral on the principle of this proposal. We look forward to working closely with the Council on the procurement of a provider. The only comment we have at this time is that, all things being equal, we would support a proposal from the present management of the Haynes to form a social enterprise company and continue in that role.

The Trust hopes the Council will take our objections into account and reject the proposal to merge the Grange and Haynes dementia day care centres.

Yours sincerely,

I

> recently received a letter regarding proposed "changes to day
> services for older people". I sent an email to the email address on
> the letter on Tuesday but did not get a reply.

>

> Will

> this meeting relate to proposed change to Osborne Grove as well or
> just to day services? It is unclear to me because Osborne Grove is a
> nursing home and that would seem not to fall into the category of day
> services.

> What is

> this meeting actually about? Is it about reablement?

>

> Thank you for the clarification.

Adult Social Care Consultation

At a recent meeting of the Carers Reference Group on the 23rd September, a decision was made to submit this document as part of London Borough of **Haringey's** consultation on the changes taking place in the provision of adult social care services.

We care for adults and children with a variety of abilities and disabilities. The proposed closure of the various day centres and residential homes will impact significantly on ourselves and those we care for.

It has been stated that community activities are available within the borough and will form a replacement to those which are currently provided within the day centres. Has there been a scoping exercise as to whether the voluntary sector can fill this gap? We are aware of the cuts which the voluntary sector are themselves undergoing and have great concerns that they will not be able to meet this demand.

Independence for those who are vulnerable can be a fine balance. We support involving those we care for in community activities but having a base within the centres provides stability for both carers and those cared for. The relationship which builds up between staff, carers and vulnerable adults with learning difficulties, autism, dementia, mental health issues and disabilities associated with old age is paramount. Subtle changes in the behaviour and mood of service users can alert staff to concerns and distress which will not be picked up by meeting a succession of workers at various venues.

The importance of this cannot be stressed enough and to us forms part of good safeguarding practice. Promoting wellbeing and early intervention is you say the key but we would disagree when the above is considered.

Individuals who are currently in supported or residential housing are no longer going to be able to access the services in the remaining centres. The onus will be on the "provider" to organise and pay for activities within the residences. How is this going to be governed? If providers deliver activities "in house" residents will conversely become even more isolated.

Carers find it hard enough to gain any respite and have appreciated for many years the support that the centres and dedicated staff have provided in our day to day lives. We see for ourselves the impact of attending the various centres (now earmarked for closure) has on our children, husbands, wives and grandparents. It is fine to say that those with disabilities can access community activities but it will be the carer who will have to organise transport to and from differing venues. The comfort of knowing that our relatives and friends are being looked after for a given period means we can have some "time out" for ourselves. Despite the Care Act, it would appear that you are now taking away the little respite we receive.

At present there is one centre specifically designed to support the needs of those living with autism, and that one is earmarked for closure. Change is particularly difficult for

this group. Mixing adults with autism and those with learning disabilities is a challenge and there should not be an expectation that "one size fits all".

Although it is stated clearly that all clients will be assessed, you need to include the Carer in the assessment.

We know that Ermine Road will continue providing services for those with learning disabilities but with a move towards functioning as a social enterprise. With the social burden increasing in Haringey, Ermine Road will not cope with all those who need help.

Personal budgets are not working at the moment with delays and mountains of paperwork. The process needs to be overhauled before proceeding with any of the changes.

People with dementia with a degenerative condition require specialist services. Demographic projections indicate that their numbers would rise significantly increasing demand for such specialist services. With the proposed closure of the Grange Day Care Centre for people with dementia and the Haven Day Care Centre for older people where many have dementia the Haynes Day Care Centre would become the sole day centre for dementia and, it is very likely that, if after re-assessment very few users are found to have reduced level of needs, damaging service reductions (rationing) would be imposed on many people with dementia and their carers contrary to their needs.

Where access to comparable support is not available and/or not secured the carers not only lose the limited respite they get, they would have to take on more responsibilities to fill the gap created by the closures and service changes. Most service users indicate will not have the capacity to manage their budgets or accessing support, they would have to rely on their carers. This would be an additional burden on the carers.

Currently all day centres provide transport. Accessing alternative provision, even if they are available, would not be possible without transport provision leading to social isolation and loneliness both for the service users and their carers impacting their health and wellbeing.

The Council's proposals rely on new untested and/or yet to be defined or developed new models of services. The Council provided no evidence that these new models would meet the current needs let alone the future demand. Although there is no objection to providing a wider range of services, it is very important that they are in place, proven to meet current needs and proven to have the potential to meet future demand before closures are considered if adequate support to the service users and their carers are to be secured.

To summarise, we would like Haringey Council to consider how the changes proposed will affect Carers. The changes will reflect back on to families who are already stretched in their caring role. It is an irony that the Care Act is said to improve our lives and wellbeing when services for those we care for are being removed and causing an adverse outcome on us.

██████████ on behalf of the Carers Reference Group – 30 September 2015

To whom it may concern,

I have come to the understanding that Jamnagar Council are debating the decision of the closure of the 'lovers' day centre. This letter is to exemplify the beneficial and extraordinary difference the centre makes to both those who attend and young people outside the centre. It provides a valuable outlet for those people that use the centres facilities but also an opportunity for young people to be provided with work experience that contributes to both their education and life experiences, they have also expressed their appreciation for the centre.

I am writing from a phenomenal project, I am sure you are familiar with - I have first hand experienced the inspiring work that the centre provides and the amazing people that currently use this opportunity as a safe and fun haven within their lives. This has led me to come to some self-realisation to make a change and contribute to my community and others which otherwise would not have occurred if the centre was closed down. I would love to be assured that the centre would be able to continue to provide us to many other individuals.

I express that the closure of this centre would cause a consequential and detrimental loss in many peoples lives impacting on staff, young people and the individuals that are cared for. It is a valuable asset to the community, and I hope that this letter will lead to the reevaluation of your decision. Thankyou for your consideration.

Yours,

To whom it may concern,

I am writing to oppose to the closing of the Haven Day Centre.

I am apart of the NCS The Challenge group, I visited the day centre twice to learn about the people there and their life history for a piece of drama that we had to create. This

was a great opportunity for me and my group as it give us personal knowledge that we needed to understand how life was for them

The day centre was a great place to go for us, other young people in the community and for the elderly that visit there also. Many of the people there have said that this is the only place that they have to go, where there is a friendly and relaxed environment and where the people who work there care about them. It is a wonderful place to go where they and us can meet new people and enjoy a quite and fun day of activities or just to relax.

The service that was provided is very beneficial for the people there ie the elderly and also for us as young people, we had the chance to help the community.

Although the centre is there to help the elderly it is also there to help young students gain good work experience.

The centre is an extremely helpful for a lot of different people.

I personally would hate to see the day centre close down, it would be a shame

to have a community group destroyed for unnecessary reasons.

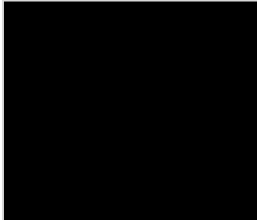
I hope you take what I am writing into consideration when making your final decisions. Thank you.

Yours Sincerely,

To Whom this may concern
I have been attending
"The Haven" day centre
for twelve years. It
has been a great
privilege and comfort
to go there every week,
to socialize and enter
into many activities
that I so enjoy to be
looked after by the wonderful
staff who are so attentive
to our needs. At eighty five
this is indeed a haven, and
it will be a great loss
to many people and to
Harrington if it closes, —
Please do not close it,
Yours sincerely



CITY AND ISLINGTON
COLLEGE



6th August 2015

Dear 

Re: Student Work Experience Placements for Health and Social Care courses

I am writing to say thank you to you and your colleagues for offering the Health and Social Care students at City and Islington College such a valuable opportunity to do their work experience placement at Haven Day Centre.

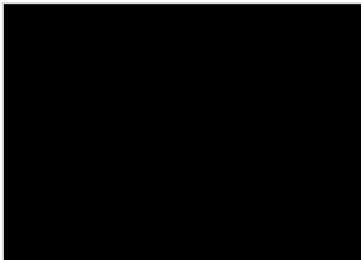
It is very important that the Health and Social Care students do their placement in a setting that is going to increase their knowledge and understanding of the needs of older people and your organisation always provide them with that. Every student that I have ever had on work experience at Haven has commented on how helpful and supportive the staff are towards them, and that the service users are very friendly and welcoming.

They have also often told me how surprised they are by the wide range of activities you offer your service users and how much they have learnt from being in the placement not just from the staff but the older people as well.

I have always been very impressed when I come and do the student's monitoring visits with the positive atmosphere, and it is very apparent that the service users are being provided with excellent provision.

Once again many thanks for giving all the students such a high quality work experience, and I hope Haven Day Centre and the college will continue to work together in the future because it is such an important part of the students course to have a rewarding and enjoyable placement.

Yours sincerely



Sent: 12 July 2015 16:22

To: Priority2enquires

Subject: Re: Adult Social Care consultation

I have received an invitation to a focus group at Osborne Grove Nursing Home on Wednesday 22nd July to discuss changes proposed for day services in Haringey. As my sister is a long-term resident at Osborne Grove, I wonder whether there is any point in me attending as my sister is not in receipt of day services. I would be grateful if you could clarify. I am eager to discuss what is happening with Osborne Grove, but I live on the South Coast near Portsmouth and do not want to come such a long way to a meeting if it is not relevant to my sister's future.

Sent: 15 September 2015 12:51

Subject: Adult Social Care consultation - statutory obligation concerns

Importance: High

I am getting in touch directly as I have just stumbled across the Adult Social Care consultation and need to understand what has happened around LBHs engagement, **and get accessible documents speedily so that you aren't in breach of your statutory responsibilities.**

Please send me all the papers for this (these consultations) as a hard copy in plain English as a reasonable adjustment ASAP. Address at the end of the email.

Please also provide a new/alternative date for the end of this consultation, to enable the 90 day consultation period that LBH is committed to, to enable engagement of disabled people and women in Haringey.

Please also clarify:

- 1) **How the EqIA were completed and which organisations** were approached to contribute the EqIA
- 2) How the consultation was **publicised; method and dates** (given that LBH has been informed numerous times that over half of disabled people in Haringey do not use the internet and therefore **relying on the internet to consult is, in and of itself, discriminatory**)
- 3) **Which VCS were approached** to respond to the consultation and **which equalities streams you considered them to be representing.**

As you know Haringey Women's Forum is the borough's women's organisation and the home of the borough's DPO so that fact that we were not informed about this consultation (given our reach and experience with women, disabled people including MHSU, BMER communities and LGBT, with particular experience around multiple marginalisation) makes us somewhat concerned that LBH has not met its obligations around equalities or its commitments to consult.

It is, of course, disappointing to discover a significant consultation that effects the vulnerable people you represent and work with by pure chance (via a online petition!) nearly three months in. HWF and the boroughs DPO are very keen to work with LBH to make the most of our limited capacities to ensure the most vulnerable are not disproportionately effected by austerity measures; in order to do so, however, we ask LBH to meet its statutory obligations and engage the VCS in a timely and appropriate manner.

I look forward to receiving the papers and new data shortly and working more closely with LBH in the future.

Date: Wed, Jul 22, 2015 at 11:15 AM
Subject: CLD Letter re Adult Care Changes
To: priority2enquiries@haringey.gov.uk

I received two letters dated 3rd July inviting me to a consultation meeting on 16th July about Changes to your Adult Care Provision. I received these letters on 17th July.

These were sent to an OLD ADDRESS

Please update your system to include my NEW ADDRESS

Can you please CONFIRM when this has been done as this is not the first time I have requested changes.

As I was not able to attend, could you please inform me about changes to provision at ERMINE ROAD DAY CENTRE which is where my brother [REDACTED] attends.

Thank you

30th September 2015

Dear Sir/Madam

I Re Proposal to close The Haven Day Centre

I do understand the financial situation that the Council is in.

However, I do not understand the following when making your decisions.

1. How can you propose to cut older peoples services and then WASTE £86,000 on a new logo that is totally unnecessary. You may change the logo, but you will not change the people.
2. Our generation are your past, your present and will continue to be your future. People are living longer and this brings its own set of problems and the ageing population will continue to increase.

The new logo represents a council that is warm and caring, how can this be, when you clearly do not want the responsibility of older people.

I was assessed some years ago as needing a day centre. My needs have increased and yet my day centre may be taken away. There is no where else that could be even a close substitute for The Haven.

Tottenham is due to be regenerated, however, at public meetings there has not been any thought about how older people who will no longer have a service can access the 'new regenerated Tottenham.'

Haringey Council Adult Social Care: Consultation 3 July 2015 to 1 October

CONSULTATION SUBMISSION FROM SAVE AUTISM SERVICES HARINGEY

SUBMISSION 1

QUESTIONING THE EVIDENCE FOR HARINGEY'S 'NEW MODEL' OF SOCIAL CARE

SAVE AUTISM SERVICES HARINGEY is a group of parents and carers of adults with autism in Haringey (including some with learning disabilities, mental health problems, epilepsy and other complex needs). Some of us have professional experience of health and social care; some are involved in voluntary organisations active in this field; all of us have personal experience of the difficulties of securing appropriate care and support for people with autism in Haringey. We have close links with Haringey Autism, the local branch of the National Autistic Society, with Haringey People First, which represents people with learning disabilities in the borough, Kith and Kin, the Haringey Carers Forum and the Social Care Alliance of Haringey.

'Good quality data is an important part of robust governance and arrangements to secure value for money. Poor quality data can lead to flawed decision making and wasted resources, and can leave vulnerable people at risk.' (Audit Commission 2015)

SUMMARY

The accompanying SASH submission draws attention to numerous *Unanswered Questions* that hamper progress in the present consultation on 'transforming' adult service. This submission looks closely at the evidential and methodological flaws that undermine Haringey Council's proposals for adult care.

In their promotion of plans for the 'redesign' of adult social care services, Haringey councillors and officers have cited three sources of evidence and policy guidance. These include the Local Government Association's Adult Social Care Efficiency Programme (which reported in July 2014), advice on 'reablement programmes' provided by Gerald Pilkington Associates management consultancy (which organised a conference for Haringey staff in September 2014) and an internal 'desk-top review' to assess the 'reablement potential' of current service users (conducted by council officers in October 2014).

- **For the LGA, 'transforming services' means ensuring that 'the savings delivered are not seen as "cuts" but have come about through an approach to delivering better outcomes for customers at lower cost'**
- LGA evidence refers to modest savings in adult care achieved by a number of councils over a three year period up to 2014. By contrast, Haringey, having already imposed drastic cuts since 2011, is aiming over the next three years to achieve annual savings three times greater than those achieved in the LGA programmes. The LGA warns that cuts on this scale may compromise basic standards of care.

- Intensive short-term ‘reablement’ programmes designed for the rehabilitation of the frail elderly may reduce long-term costs, but even the academic researchers cited by Haringey council are sceptical whether this approach can achieve similar goals for people with autism, learning disabilities, dementia and other complex needs
- Though Haringey Council officials claim that 45% of service users can benefit from **a reablement approach, its own ‘desk-top’ study leaves many key questions unanswered** - particularly concerning the selection of cases and the criteria for ‘reablement/enablement potential’

Let’s look more closely at the three sources of Haringey’s new social policy.

The Local Government Association: Transforming Services

A glance at the *Final Report* of the LGA’s efficiency programme is sufficient to confirm that this is the origin of much of both the substance of Haringey’s proposals and its aspirational rhetoric. (LGA 2014) This document reports on 44 projects carried out over the preceding three years in which the LGA ‘supported councils to make transformational approaches to making efficiency savings’. These included ‘a range of technical and structural transformations’, ‘bold and innovative approaches to public service reform’, offering ‘workforce optimisation, culture change and creative new delivery models’. Words like ‘radical’, ‘innovative’, ‘new’, ‘creative’, sometimes yoked together for extra impact – ‘radically new’, ‘bold and brave’, ‘bold and clear’, ‘bold and innovative’, even ‘innovative and creative’ - are sprinkled throughout the text.

The challenge facing the programme was that councils were required to make ‘8-10% savings over three years’ to balance their books; they needed to make ‘3% savings per year’ to meet competing demands (recognising growing demand as well as shrinking resources). One contrast with Haringey is immediately apparent: after making drastic cuts over the past four years, the Council is now planning to make even deeper cuts over the next three. Its budget projections for adult social care envisage a cut in spending from £88.1m in 2014/15 to £69.8m in 2017/18 - a reduction of £31.2m or 20.7%. This amounts to an annual cut of 7% over this period, more than twice that envisaged in the LGA’s bold and transformational programme. Before looking more closely at the LGA’s proposals, it is worth noting its sombre concluding caveat:

‘Indeed some councils are beginning to believe that they cannot make the level of savings required without putting their basic services for vulnerable people at risk.’

What are the ‘big lessons’ that emerge from the LGA programme?

‘Managing demand’

The object is to achieve a ‘fundamental shift in expectations’ through a ‘dialogue to transform attitudes, culture and behaviour’. Citizens must accept ‘a duty to contribute as well as a right to support’. The cynical denial of the imperatives of austerity is presented in the familiar rhetoric of empowerment and independence: ‘it is not about cutting services in response to financial pressures, but about proactively helping and encouraging people’ to adopt healthier lifestyles, etc. The LGA report quotes the claim made by Gerald Pilkington (see below) that ‘reablement’ programmes can achieve savings as great as 60%, together with the claim that ‘diversion’ can redirect 75% of applicants for Council care into the voluntary sector or ‘the community’.

'Transforming services'

Blending the old radical critique of 'traditional models of social care' and 'paternalism' with conservative prejudices against the 'culture of dependency', the LGA insists that 'the individual must take more responsibility for their own care'. There is 'no one magic solution', but social enterprises, 'robust performance management', 'workforce optimisation' and a 'relentless focus on efficiency' are all recurring themes. The trick is to ensure that 'the savings delivered are not seen as "cuts" but have come about through an approach to delivering better outcomes for customers at lower cost'.

Learning Disability services

The *Final Report* includes two case studies of councils which have introduced programmes aimed at reducing costs in learning disability services: in Tameside and Croydon. LD services are identified as a particular problem, because spending continues to rise, a trend that is attributed to increasing life expectancy and declining mortality. Recognising that LD services present 'an ongoing challenge' to local authorities, the LGA has embarked on a new project involving five councils (Barking and Dagenham, Darlington, Cumbria, Kent, Wiltshire) to explore this area (due to report in 2016). The 'single biggest challenge' in LD services is that of 'younger adults' and the transition to adult services is identified as a key point at which to effect a 'culture shift', to promote independence – 'progression not maintenance'.

The specific proposals are familiar – reviewing all placements, discouraging expensive out-of-borough placements, using technology to replace night staff, cutting day services, transport, employment, etc. But two points stand out.

First, the scale of the cuts achieved by these model projects was evidently small: Tameside managed a 5% reduction over three years (Croydon's figures are not given). This is on a much smaller scale than the 20% cuts proposed by Haringey over the next three years.

Second, the Croydon model focuses on 'identifying those receiving more services than required to meet their needs'. But it has nothing to say about identifying those receiving fewer services than they require to meet their needs, which, as is well known in the sphere of autism and learning disabilities, is a substantial population.

In conclusion, the LGA report emphasises that it 'will not be easy' to achieve the proposed 'transformation' of adult social care, and that it will require 'political leadership and vision' together with 'strong management'. Perhaps feeling some deficit of these qualities within the ranks of the Council, Haringey officers have sought external expert advice – from a management consultancy with a track record in raising efficiency in central and local government: Gerald Pilkington Associates.

Gerald Pilkington and 'Reablement'

In its pursuit of the promises of substantial savings in social care expenditure offered by the LGA model, Haringey Council invited Gerald Pilkington, former leader of the Department of Health's Care Services Efficiency Delivery Programme and now a consultant on 'efficiency

targets' to 152 councils, to advise on how these policies could be implemented. Pilkington claims that in his work with services and academic research teams, he 'has built the most comprehensive body of evidence on homecare reablement within the UK, having written much of the work himself.' (Pilkington undated)

Pilkington describes a method which is the antithesis of 'evidence-based policy' – his approach is more accurately characterised as the pursuit of 'policy-based evidence': first decide the policy, then find the evidence to support it. He refers to a body of evidence that has been 'written' and 'built' largely by himself, in the sense that evidence is 'produced' by a witness in a court of law, and presented by an advocate who tries to make the most persuasive case on behalf of a client. 'Evidence' of this sort is selected to advance an established conviction, in a way similar to that of a propagandist who presents selected facts in the pursuit of a political argument or polemic. By contrast, scientific evidence is the outcome of a process of disinterested inquiry or experimentation. It begins from a 'null hypothesis' – the default position that there is no relationship between two phenomena (say, a policy intervention and a particular outcome). If the investigation shows this hypothesis to be false, then it is possible to claim a positive result – evidence which may legitimately inform the development of policy.

In the various versions of the single study which Pilkington presents as 'evidence' supporting his policy, he and his colleagues declare that its 'overall aim' is 'to provide robust research evidence on the immediate and longer-term benefits of homecare reablement'. (DH 2009a, DH 2009b) In other words, the study begins from the presumption that homecare reablement is beneficial and seeks to produce 'robust research evidence' in support of this presumption. It can be safely assumed that evidence which might cast doubt on the presumption of benefit is not likely to receive much attention. Indeed even evidence which is not considered 'robust' in its support for the dogma of reablement is likely to be neglected.

Two early 'interim reports' of the Pilkington study can be found on the CSED website (DH 2009a, 2009b); a final version was published in the form of a 'working paper' by the Social Policy Research Unit at the University of York in November 2010. (Glendinning 2010) This 'prospective longitudinal study' presents detailed evaluations of reablement programmes in five English local authorities over a 12 month period. Given the uncritical way in which this study is now being used to promote the policy of reablement as means of rationalising services in many local authorities (including Haringey) it is worth drawing attention to some of the reservations and caveats expressed by the authors themselves, particularly in the final version.

The authors acknowledge that the study was funded by the Department of Health, which is greatly concerned about problems of hospital discharge and readmission, because of inadequacies in social care services – and is committed to the policy of homecare reablement as a means of tackling these problems. The close institutional and financial relationship between the Department of Health and the team engaged in this project raises serious questions about the independence of this sort of academic research. The authors also acknowledge that the study has not been submitted to independent review and has not been published in a peer-reviewed journal, the usual standard for academic research. The study was not randomised, there were issues of selection bias and of attrition of subjects as many patients dropped out of follow-up.

Despite claims that this study demonstrates the cost-effectiveness of reablement, the authors themselves are notably circumspect. Though they noted short term gains, they conceded that **the ‘reduction in care costs was entirely offset by the initial cost of the reablement intervention’**. Matters were further complicated if longer-term health costs were also taken into consideration:

‘Taking total health, social care and reablement costs together, there was no statistical difference in costs of all services used by the reablement group and the comparison group over the 12 month study period’. (Glendinning 2010:vii)

The key question for Haringey concerns the extension of the reablement model from patients suffering from limited physical disabilities to a wider population of adults with autism, learning disabilities and other complex needs. Reablement programmes in two of the five local authorities in this study explicitly excluded people with learning disabilities; the rest admitted to restricting services informally to those considered capable of ‘achieving small improvements’ (which may well have excluded people with severe learning disabilities). None even mentioned autism (which generally accounts for 40-50% of the population of adults with learning disabilities). In their concluding comments, the authors noted ‘political pressures’ from some councils to move from a service targeted on selected patients (following hospital discharge, acute illness, fall or fracture) to provide a universal, inclusive service for anybody referred for adult social care services. But staff expressed reservations about the benefits of the programme for people with dementia, mental health or more complex problems:

‘People with chronic, complex or progressive health problems affecting their ability to carry out self-care and domestic tasks were considered far less likely to show major benefits from reablement interventions.’ (Glendinning 2010: 134)

On the last page of their report the authors recommend that ‘a return to more targeted services may be appropriate’ – exactly the opposite of the policy now being pursued in Haringey. (Glendinning 2010: 134) In a comment posted on the SASH website in February 2015, Professor Caroline Glendinning, lead author of the York study, contradicted Haringey’s claim that her research justified its policy proposals: ‘I don't think there's any evidence from our research that justifies Haringey cutting services for adults with autism.’

Haringey’s desk-top review

Following earlier refusals to provide details of its desk-top review (on grounds of confidentiality), in January 2015, in response to formal requests under the terms of the Freedom of Information Act, we received the following documents from Haringey Council:

1. Data on people with learning disabilities (LD): total 34, complete 33.
2. Data on people with mental health problems (MH): total 20, complete 17.
3. Data on people with physical disabilities (PD): total 38, complete 32.
4. Data on older people (OP): total 68, complete 56.
5. Glossary of terms and acronyms.

The data sheets provide information on lists of cases on a grid, under the following headings:

- Category: LD, MH, PD, OP

- Date of first assessment
- **Fair Access to Care Services (FACS) category (either 'substantial' or 'critical')**
- Date of most recent review
- Reablement/Enablement potential: Yes or No
- Post-exercise FACS category

In a minority of cases, data concerning impact on carers are included (though there is no indication how this was judged). As indicated above, in a significant number of cases, the data sets are incomplete – hence we have noted the numbers of completed cases.

These documents provide only the basic data resulting from the desk-top review. They include no summary or statistical analysis, no discussion of the significance of the results and no record of the conclusions drawn for the purposes of Council policy.

In response to further inquiries, the Council revealed that this review had been carried out over a **three-day period in October 2014, by a 'multi-disciplinary team' including social workers, a senior occupational therapist and a budgetary manager, who are said to have relevant expertise (though the nature of this was not specified).** In terms of the selection of cases, officers indicated that the only exclusions were those of people already receiving OT therapy aids and those currently undergoing reablement programmes. This implies a wider range of clients than those generally considered eligible for reablement programmes (which exclude those requiring end-of-life care, some with severe learning disabilities/complex needs, severe dementia).

Despite our requests, we received no further clarification on the contested issue of the **distinction between 'reablement' and 'enablement' (council officers repeatedly insisted that only the latter was relevant to most service users with learning disabilities), though we were reassured that 'the professionals involved understood the difference'. Nevertheless, given that the potential for 'reablement' and 'enablement' is assessed jointly in the desk-top exercise, the distinction has no practical consequences (see below).**

Here follows our attempt to summarise the information provided on these data sheets:

		Total	Complete	RA/EA potl:	Yes	No	% Yes
1.	LD	34	33		18	15	53
2.	MH	20	17		13	4	65
3.	PD	38	32		14	18	29
4.	OP	68	56		18	38	26
Totals		160	138		63	75	

Yes as % total cases: (63/160) 39%

Yes as % complete cases: (63/138) 45%

It is difficult to make much sense of this poor quality data, as many of the key questions – particularly concerning the selection of cases and the criteria for 'reablement/enablement potential' - remain unanswered.

It seems that the claim that this review showed that there was significant 'reablement potential' for 45% of cases (made by the interim director of adult social care in response to questions at

a council meeting in January 2015) emerges from the proportion of 'yes' judgements (63) to the number of cases with complete records (138) - it falls below 40% if the total number of cases (160) is used as the denominator. In these samples, there appears to be a wide variation in 'reablement potential' – from 26% of older people to 65% of those with mental health problems (though the total number of cases in the MH category was only 20). The finding that **there was 'reablement potential'** in 53% of cases of people with learning disabilities stands in stark contrast to the estimate offered to us by the interim director of adult social care during the consultation process - that this approach would be appropriate to only 1-2% of people with LD.

Though we do not know the criteria for deciding 'reablement/enablement potential', it appears that, of the 18 people with LD considered to have such potential, in not a single case was this considered of a degree sufficient to change the FACS category from 'substantial' to a lower level of need. Only one case having 'critical' needs was considered to have 'reablement potential', but this was not expected to result in a move to the category of 'substantial' needs. While many LD service users were expected to benefit from 'reablement', in none did this result in functional improvement to reach the category of 'moderate' need – thus falling below the threshold of eligibility for Council services. It is difficult to see how what appear to be the relatively small improvements in capability resulting from reablement programmes suggested by this study could achieve the sort of expenditure savings in the adult social care spending envisaged in the proposed budget.

It is worth noting that of the LD cases, 18 out of the total of 34 (47%) had apparently not had a case review in the previous 12 months. This reveals a failure to comply with the *National Framework for Continuing Care* (Department of Health 2012, p41) and the new *Care and Support Statutory Guidance* issued under the Care Act 2014 (Department of Health 2014, p228), which requires 'as a minimum' an annual review.

Though the information provided falls far short of making the desk-top review transparent to service users, families and carers, it suggests that Council policy rests on a woefully inadequate evidence base. It certainly falls short of the standard recommended by the Audit Commission, which has warned of the dangers of policy based on inadequate evidence: '*Good quality data is an important part of robust governance and arrangements to secure value for money. Poor quality data can lead to flawed decision making and wasted resources, and can leave vulnerable people at risk.*' (Audit Commission 2015)

From 'reablement' to 'enablement'

In response to criticisms of its claims for the scope of 'reablement' in the course of debates over its budget plans in early 2015, Haringey councillors and officials increasingly sought to distinguish between 'reablement' (short term intensive programmes appropriate for a relatively small number of predominantly elderly individuals with limited or transient disabilities) and 'enablement' (supportive programmes, of indeterminate duration and intensity, considered appropriate for younger people with more severe and chronic needs). We have already noted that Haringey's desk-top review did not consider potential for 'reablement' and 'enablement' separately. It is also worth noting that this distinction emerged only after the publication of *Building a Stronger Haringey Together: Three Year Plan and Budget Consultation for Residents and Businesses*, which includes five references to 'reablement' (pages 12 and 13) but none to 'enablement'. (Haringey 2014)

But the retreat from ‘reablement’ to ‘enablement’ raises further questions. Given the loose definition of ‘enablement’, it is unclear how it differs from current good practice, which seeks to elaborate ‘personal development plans’ designed to achieve specified outcomes. Furthermore, the more that ‘reablement’ dissolves into ‘enablement’, it is difficult to see how it can achieve the drastic level of cuts in care spending that the current budget proposals envisage – without seriously compromising the care of individuals.

(10 August 2015)

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[Take account of BT Mtg]

Haringey Council Adult Social Care: Consultation 3 July 2015 to 1 October

SECOND SUBMISSION FROM SAVE AUTISM SERVICES HARINGEY

UNANSWERED QUESTIONS

SAVE AUTISM SERVICES HARINGEY is a group of parents and carers of adults with autism in Haringey (including some with learning disabilities, mental health problems, epilepsy and other complex needs). Some of us have professional experience of health and social care; some are involved in voluntary organisations active in this field; all of us have personal experience of the difficulties of securing appropriate care and support for people with autism in Haringey. We have close links with Haringey Autism, the local branch of the National Autistic Society, with Haringey People First, which represents people with learning disabilities in the borough, the Haringey Carers Forum and the Social Care Alliance of Haringey.

SUMMARY

- Still no detailed proposals on what will replace closed day-centres despite earlier assurances
- No assessment of the long term human and financial impact of closures on adults with severe disabilities
- Exclusion of users in residential care and supported living from the only learning disability day centre left
- Residential care and supported living users offered only community activities supported by own staff not council staff
- Closure of the only dedicated centre for autistic adults
- Greater reliance on parents to care for adult users living at home
- **Questionable legality of Council's proposal to review needs of affected users**

UNANSWERED QUESTIONS

The December 2014 consultation on adult social care cuts - part of Haringey's Mid Term Financial Plan 2015-2018 (MTFP) - was marked by much aspirational talk but little fact. Haringey users, parents and Scrutiny council members sought factual information from the Council about proposals to replace residential and day centres with a 'new model of social care' - part of £24.5 million cuts in adult services. At meetings with users, parents and Scrutiny Panel councillors, Social Services Director Beverley Tarka, Chief Executive Nick Walkley and Councillor Peter Morton responded that, "The proposals are high level and if the budget is agreed by Cabinet there will follow more detailed consultation and development of plans to support the information requested".

The new consultation began on 3 July with three new Proposal documents¹. However many of the questions asked earlier this year have still not been answered. We are still none the wiser about what the new model social care will look like. The Council cannot consult on proposals they have not spelt out. SASH's response is therefore to ask questions that should have been answered by now if users and carers are to be consulted about their future.

The three documents do however include three new proposals: Osborne Road Nursing Home continuing as at present but with either the addition of a reablement centre *or* as an intermediate care provision only; Haven Day Centre as a community reablement hub; Ermine Road Day Centre for learning disability to provide access to unspecified community activities in addition to daycare.

OUTSTANDING ISSUES

1. No detailed proposals for what will replace current day-centre services once shut. We urgently need concrete information about what community activities are being developed and how the council sees these being accessed by people with a wide range of needs but united in their very high level of dependency. The consultation document says *'The closures would facilitate...a wider range of services for a greater volume of people ... available within the community...for all adults with a learning disability that have an assessed need for day services.'* (Proposal 3, p7), implying effectively that the changes will actually mean an enhancement of service provision. We are extremely sceptical of this claim but would welcome urgent clarification to allay concerns that a greater volume of users means in reality a serious dilution of service.

2. No assessment of the mid to long term human and financial impact of removing safe and dedicated daycare for adults with severe disabilities. It is beyond doubt that the changes have been inspired by budgetary constraints, but supporting people with severe disabilities to access community activities in any meaningful way - for 7 days a week, 52 weeks a year - will incur major additional staffing and transport costs that will have to be factored into their personal budgets. There will also be a need to identify suitable activities that will be affordable and accessible all year round by individuals who may need two or three dedicated

¹ [Adults Social Care Consultation on Proposal 1 \(PDF, 284KB\)](#)
[Adults Social Care Consultation on Proposal 2 \(PDF, 280KB\)](#)
[Adults Social Care Consultation on Proposal 3 \(PDF, 284KB\)](#)

support staff to function safely in unrestricted environments and for whom, changes in care plans, unfamiliar surroundings, etc. may spark acute behaviour crises.

3. Requirement for a massive overhaul of social care for extremely vulnerable people (many with no or limited capacity and some with seriously challenging behaviour), but Haringey appears to have done little or no detailed work to assess the likely impact on those people and their carers and the subsequent requirements for health and social care arising from the changes. This is deeply concerning.

4. Exclusion of day centre users in residential care or supported living from Ermine Road and their relocation to alternative services in the community: 'We will work with residential and supported living providers so that adults, in particular, those with 24 hours residential support, will be *supported to directly access alternative services* in the community.' (Prop3, p6 and p7).

If the Council were to incorporate all 28 Roundways users into Ermine Road it would have to increase Ermine Road capacity by 48% (32,136.50 total hours provided at Roundways as percentage of 67,135.75 hours at Ermine Road in 2014-15). This is clearly not envisaged. Instead the proposal is to exclude from Ermine Road users at Roundways and Ermine Road who currently receiving residential and supported living and to offer them access to alternative community opportunities. Ermine Road will only be available to users living in their family home. In 2014-15 the majority at Roundways, whether living at home or in residential or supported living, received 5 days a week for 50 weeks a year, suggesting the proposals to exclude users not living at home would produce a deterioration in service provision. It is clear there will be insufficient places at Ermine Road for a substantially growing population of severely autistic adults in Haringey who need daycare.

5. No dedicated centre for autistic adults as a consequence of closing Roundways (at present the only day centre dedicated to autistic adults).

6. Greater use of home-based care. One of the most threatening feature of the proposals is that, with drastically reduced places in day centres, parents and carers will be expected to make greater use of the family home to care for adult children, with the possibility of additional home care support as part of their new care packages; in effect a shift from daycare to home-based care placing a greater burden on already overstressed parents and carers. The Consultation documents fail to show how this can be avoided.

7. Review/reassessment of care needs of all users in affected provisions including Ermine Road.

Whilst claiming to enhance provision for greater numbers of users, the Proposals plan nonetheless to reassess the needs of all users affected by the closures and changes in use of daycare centres. The unavoidable conclusion is that this comprehensive review of need – in advance of the annual review required by law - will uncover reductions in users' needs to match the proposed reductions in provision.

This raises the issue of the legality of reviewing assessments in order to identify reductions in need that deliver the required savings? The proposed review/reassessment of care needs follows the Council's decision to drop the original proposed savings issued in December

2014 for *Care Purchasing Packages* - which 'aimed at reducing dependence on existing care packages by putting in place alternatives to traditional approaches' - on the grounds of its questionable legality. The Care Act Guidance, para 13.4, states a 'review [of a user's needs] must not be used as a mechanism to arbitrarily reduce the level of a person's personal budget'. An attempt to use a review for purposes other than to legally assess needs, such as to reduce a care budget, could be arbitrary and illegal.

The closures of residential and day centres – and the full implementation of £24.5m service cuts – is only possible if Adult Services can identify a significant number of users whose needs have reduced or changed and who can be offered cheaper 'community opportunities' instead of day centres. *Users and carers need to be certain that if this applies to them, their needs and their care packages are not being arbitrarily and illegally reduced.*

Repeated in each of the three Proposals is the following carefully worded text: 'This proposal to close [name of centre] would require the reassessment or review of the care and support needs of current service users with a view to identifying satisfactory alternative provision to meet the assessed needs. Service users will be encouraged to use Personal Budgets to access any support required to meet assessed need. Following the reassessment or review, if, for any reason, there are service users who *no longer have an eligible need*, we would work closely with the service user to identify appropriate support. In addition, there will be a transition plan that will be sensitive to the needs of those that may be affected by this change, to ensure that any impact is mitigated and the process of change is safely handed'. (emphasis added) (Prop1, p6-7) (Prop 2, p6) (Prop 3, p6) (Prop 3,p7) (Prop 3, p8)

Note the cautious use of language here – probably following legal advice – compared with the words used in *Care Purchasing Packages* above about deliberately aiming to reduce dependency on existing care provisions. *Users and carers should carefully compare the wording used about assessed needs and care provisions in their new and their previous care and support plans.*

It is unlikely that reassessed users with severe LD ('critical and substantial needs' in the pre-Care Act terminology) will be found to have had a reduction in need?

8. Personal Budgets

'Service users will be encouraged to use Personal Budgets to access any support required to meet assessed need.' Current government policy is that users can choose to opt for Personal Budgets but are under no compulsion to do so.

9. Selective use of the 2014 Care Act can be seen in the opening statement of the three Proposals to pursue policies that support cuts, namely to promote early intervention, develop markets and promote diverse forms of accommodation (see eg *Care & Support Statutory Guidance*, paras 2.1, 4.40, 5.35). But not quoted in the Proposals is para 4.42: '*Local authorities must have regard to ensuring a sufficiency of provision – in terms of both capacity and capability – to meet anticipated needs for all people in their area needing care and support – regardless of how they are funded*'.

10. The consultation uses words that urgently require proper definition for the proposals to hold any water at all. Prominent examples are 'sustainable' and 'community'.

Councillor Peter Morton's introduction to each of the three Proposals talks of financial sustainability, but 'sustainable' has a much wider meaning than affordable. The loose use of language is compounded by pejorative references to models that the council wishes to supersede e.g. 'institutional' to describe day centres and residential care homes currently available.

11. Institution vs community

The following quotes from each of the three Proposal documents repeat an argument that places building-based provision in a negative light *vis a vis* new building-less community opportunities. For example:

'with care and support shifting away from **institutional care** towards community and home based support.' (Prop 1, 4) (Prop 2, 3) (Prop 3, 3)

'Moving to this more sustainable model of adult social care would help us to reduce demand for services provided at **traditional care institutions** such as day centres and residential homes.' (Prop 1, 4) (Prop 2, 4) (Prop 3, 4)

'In Haringey we have developed a range of provision for vulnerable people that has a greater emphasis on helping people to continue to live independently at home - maximising their independence and reducing social isolation - and is less reliant on **traditional institutions**.' (Prop 2, 5)

'The focus to help adults with learning disabilities to move out **of institutionalised care and into appropriate community settings**.' (Prop 2, 6)

'Residents will be enabled to actively take part in their communities, supported to gain greater independence and move away from **institutional care**.' (Prop 2, 6)

The Consultation proposals refer to existing Council provisions, such as day centres and residential homes, as **traditional care institutions** (Prop 1, 4) (Prop 2, 4) (Prop 3, 4), so placing council care provisions in a negative light.

'Institutional care' is hardly an appropriate term to use given that much of the Council's stock of residential and daycentres has its origins in the 1960s and 70s as the Borough responded to the Post-War scandal of placing users in former Poor Law Work Houses in the 1950s and 60s, under Part 3 of the 1948 National Assistance Act, or in former long stay mental hospitals or 'asylums' dating from the mid-19th Century.

12. Building-less care provision is misnomer because 1) there are examples of existing council buildings continuing under the new proposals although used for different purposes, eg Osborne and the Haven; 2) access to community opportunities relies on access to existing buildings, parks and assets, some of which are council assets; 3) greater reliance on home-based provision relies on using homes as alternative buildings to daycentres. It's acceptable to use public buildings and users' own homes as suitable places to care for adult users, but under the new approach to care not acceptable to use existing residential and daycare buildings for the same purpose. The building-less rationale is used selectively to apply to daycare even though the Council continues to rely on buildings to provide substitute forms of care.

We note the pejorative reference to the ‘move away from **segregated** buildings based day opportunities within the borough for people with a learning disability and to continue to develop access to mainstream activities.’ (Prop 3, p6)

13. The use of rights-based principles embedded in current government personalisation policy to promote an **aspirational rhetoric** that has little basis in reality but is used simply to support moves from building-based to building-less provision. For example:

‘We are committed to the priorities set out in *Valuing People Now*, to improve outcomes for people with learning disabilities in employment, housing and health, through person centred approaches and the promotion of personal budgets. All people with learning disabilities have the right to lead their lives like any others, with the same opportunities and responsibilities. The shift from buildings based care to community led support will enable all adults to make informed choices to enable the best outcome for them.’ (Prop 3, p5)

14. Social value commissioning. ‘It is more important than ever that we get the most value from our public spending. Commissioning for social value involves looking at the collective benefit to a community when a service is provided.’ (Prop 2, p5) (Prop 3, p5)

We have seen little evidence that Haringey Council employs an approach to social value commissioning that identifies user outcomes that are *empirical* and *measurable*, that enables *meaningful comparisons to be made* between different users with differing needs, and that enables the Council to demonstrate that *its services achieve a greater total benefit for either a given community of users or for all of Haringey’s residents.*

Without a more methodologically rigorous approach to commissioning in place, the Council will be left to make social claims it cannot substantiate and to continue to engage in aspirational talk that obscures what is really happening to its most vulnerable users.

The First Consultation submission from SASH questions *The evidence for Haringey’s ‘New Model’ of Social Care.*

OUTSTANDING QUESTIONS TO BE ANSWERED

1. No proposals for what services will replace current day-centre and residential services, apart from access to wider opportunities in the community.

When will the Council publish its detailed plans for a new model of care that will meet the needs of all users with a statutory assessment of need?

2. No assessment of the mid to long term human and financial impact of removing safe and dedicated communal spaces from adults with severe disabilities

Has the Council conducted this impact assessment?

3. A massive overhaul of social care for vulnerable people with learning disabilities based on the closure of all day services, apart from Ermine Road, and increased opportunities in the wider community

What is the Council's finalised time line for closing each of the residential and daycare centres scheduled for closure and introducing new services under the new model of care?

What are the Council's plans for increased opportunities in the wider community? What would such 'opportunities' comprise of?

Will making services under the new model of care available for many more people involve a material erosion of service provision in relation to the totality of the current needs of all users, reducing the level of services compared with the level received before the new model was introduced?

How will the closure of the entire stock of council residential and daycare centres since 2011, apart from Ermine Road, promote a greater 'variety of providers' and a greater 'variety of high quality services' (Proposal 3, p.5) to choose from?

Does the Council envisage that by April 2018 provisioning a 'greater variety of providers' will mean the provision of no council owned residential and daycare centres (apart from Ermine Road)?

What is the evidence to support the claim that, 'The closures would facilitate....a wider range of services for a greater volume of people ... available within the community...for all adults with a learning disability that have an assessed need for day services.' (Proposal 3, p7)

4. Residential and supported living users will be excluded from Ermine Road and offered 'community opportunities' instead

On the basis of the Council's present estimates, how many users from each of the day centres will i) transfer to Ermine Road, ii) receive community opportunities only, iii) receive home-based care only? If a mix or combination of provisions is anticipated, please identify the combination and provide estimates of the numbers of users allocated to each combination of provisions?

For users who are expected to no longer receive day centre services, will their base be their home, whether their home is supported living, residential or parental/carer home?

5. No dedicated centre for autistic adults

Given the direction of travel towards improved services for autistic people suggested by the Government's Autism Strategy, does the Council envisage a future date when it will be in a position to provide autism-specific day services once the Roundways day centre has been shut?

6. Greater use of home-based care

Should parents whose adult children live in the family home expect on balance to spend more time caring for them at home? If the answer is 'yes', will they receive additional home-based care support and community access? Has this consequence of the proposed changes been equality impact-tested?

7. Review/reassessment of care needs

Is the Council expecting that by April 2016 (or after the process of review/ reassessment has been completed) they will have identified overall a reduction in needs compared with the last annual assessment of need (ie reduction in what was described under FACs criteria as substantial or critical needs), or ii) a different profile of needs across the range of groups in need compared with the last annual assessment of need, or iii) a different set of findings – in which case please specify?

What would happen if after reassessment very few users were found to have reduced levels of need?

8. Personal Budgets

What happens if a user requests a particular service but opts, as is their right, not to use Personal Budgets?

9. Institution vs community care

In what sense are Haringey Council's residential and day centres 'traditional care institutions'?

In using the term 'institutional care' to refer to its own care provision, isn't the Council in danger of suggesting unintentionally that the features that marked the scandal of Winterbourne View are evident in the Council's own residential and day centres?

10. Social value commissioning

Does the council see the term 'social value' as one that refers to empirical and measureable improvements in the collective wellbeing of all Haringey adult users?

How does the Council define social value in terms that are measurable and empirical?

11. Closure of Haven day centre

What evidence does the Council have that using Neighbourhoods Connect will give former users of the Haven day centre a greater quality of life?

12. Transfer of the adult reablement and other services to external providers.

What evidence does the Council have that private providers are available to take on reablement service?

13. Enhancement of the role of Shared Lives and Neighbourhoods Connect.

What is the evidence that Shared Lives is 'open to adults with various disabilities' (Prop 2, p5)?

What are the numbers under each heading of need (dementia, learning disability, physical disability, mental health) who now (April 2015) benefit from and what are the estimates of users who are expected to benefit from i) Shared Lives and ii) Neighbourhoods Connect, by April 2016, April 2017 and April 2018?

14. Increased supported living tenancies for adults assessed as able to live independently with support in daily living tasks such as personal care, taking medications and money management.

Can the Council provide its estimates of the numbers of supported living tenancies (and where envisaged other communal living arrangements) available by April 2016, April 2017 and April 2018?

(SASH September 2015)

THIRD SUBMISSION FROM SAVE AUTISM SERVICES HARINGEY

BRINGING REALITY TO HARINGEY'S SOCIAL CARE MODEL

SAVE AUTISM SERVICES HARINGEY (SASH) is a group of parents and carers of adults with autism in Haringey (including some with learning disabilities, mental health problems, epilepsy and other complex needs). Some of us have professional experience of health and social care; some are involved in voluntary organisations active in this field; all of us have personal experience of the difficulties of securing appropriate care and support for people with autism in Haringey. We have close links with Haringey Autism, the local branch of the National Autistic Society, with Haringey People First, which represents people with learning disabilities in the borough, the Haringey Carers Forum and the Social Care Alliance of Haringey.

<http://saveautismservicesharingey.co.uk/>

- **Autism is a lifelong condition needing long-term, ongoing social care resources;**
- **The majority of Haringey's autistic service users have substantial and critical needs which require sustained levels of provision throughout life;**
- **The consultation proposals are misguided in suggesting that autistic users will benefit from an approach that stresses 'outcomes' dependent on early intervention and prevention, in the hope that this will save money;**
- **On the contrary, this approach will not result in savings for people with lifelong neurodevelopmental conditions such as autism;**
- **Autistic people need a consistent base where they are secure, can enjoy friendship and learn life skills and from which they can engage in activities in the community;**
- **The denial of such a base is very likely to prove distressing for many autistic users, and is likely to lead to an increase in behaviours which challenge;**
- **Their parents and carers also need their adult children to attend a base away from the family home so that they have the time and space to recuperate ready for further caring duties;**
- **Council staff assessing autistic users' eligibility for social care should be properly trained in accordance with the requirements of the Autism and Care Acts;**
- **The Council must establish an appeals system that allows for an independent assessment of council decisions and enables users, parents and carers to challenge these decisions. The Care Act does not include provisions for appealing council decisions about social care.**

Bringing reality to Haringey's New Social Care Model

In this third submission to Haringey Council's adult social care consultation, SASH describes the conditions for good quality care for adults with autism and complex needs. The first SASH submission addresses the inadequate and flawed evidential basis of the Council's new care model. The second submission exposes the lack of factual information about what the new model would provide and its capacity to meet the complex needs of autistic adults. Despite promises from senior officers and councillors, vital information lacking in the winter consultation has still not been provided. Without such information, the consultation remains flawed.

The Council plans to close down daycentres which provide a safe and consistent base, where users can engage in ongoing activities and friendships and from where they can engage in activities in the community. Instead it proposes 'building-less' places in the community without the secure and consistent base provided by their daycentres. In short *a base for social care is more than a place where social care happens*. A more realistic set of care provisions would need to meet several basic conditions.

1. First steps first: the needs of autistic users with complex needs

It is important that there is an explicit recognition of the level of ability and the complexity of needs of the autistic population that is likely to meet thresholds for council services.

The term **autistic spectrum disorder covers** a range of lifelong conditions that have in common the triad of impairments of social interaction, social communication and social imagination. People with autism range on the spectrum from mild through moderate to complex. Most people with autism who currently receive council adult services are on the complex end of the spectrum because statutory eligibility criteria for receiving services means that their needs have been classed as substantial or critical. People with less obvious and complex needs have historically found it difficult to be found eligible for care and support. The diversity of needs among autistic people poses a major problem for local councils which are expected to comply with the requirement of the 2009 Autism Act to improve the quality of public services for all autistic people.

People who have mild to moderate autism and who are diagnosed later in childhood or adulthood are likely to remain neglected by council services. They may have learned to mask their disabilities in communication and imagination, but their social interaction impairment is still evident even though it may be shown in subtle ways. Their need for care and support may not be recognised because resources are targeted at the more complex end of the spectrum.

The needs of autistic people with complex needs arise from their diminished mental capacity, often combined with serious behavioural challenges. Some may have serious problems with sensory input and integration that make it difficult for them to understand the world and to cope in different environments. Changes in place, routine and personnel will most likely cause distress and provoke challenging behaviours even in those who are stable in a familiar setting.

This does not mean that people with learning disabilities and autism cannot enjoy and benefit from many activities. It simply makes it more important to work out what any particular individual needs, because failing to do so heightens the risk of a deterioration in wellbeing and in challenging and self-injurious behaviours. This may cause great distress and may result in

higher costs to health and social services if individuals are admitted to specialist 'assessment and treatment' units.

Because service users have a variety of needs, they need a variety of provisions. While some may wish to participate in conventional sporting activities, such as football or swimming, others may prefer individual activities, perhaps those providing sensory stimulation.

Because autism is a lifelong condition, it is essential to challenge misunderstandings about the condition found in the Council's three consultation documents².

First, the emphasis on prevention and early intervention is misplaced as it relies on a simplistic extension of concepts and programmes developed for individuals with limited and transient physical disabilities to people with autism, a lifelong developmental disorder.

Secondly, the Council assumes that once specified 'outcomes' are achieved, then services (and spending) can be withdrawn. But for people with lifelong neurodevelopmental disorders, services need to be maintained to sustain outcomes and avoid regression. In short 'a met need remains a need'. For people with autism and learning disabilities, the prevention of escalating mental health/behavioural challenges requires the maintenance of appropriate levels of provision in the long-term.

2. The conditions for a realistic model of social care: *a base is more than a place*

For autistic users, their daycentres have become a safe haven which, if taken from them, will cause distress. Regular visits to places of community activity will not provide adequate compensation for the loss of these bases. People with autism need familiar, safe environments in which to be supported to communicate, socialise and learn new skills. Unpredictable and changeable environments cause extreme anxiety in people with autism and can further impair processing, social and communication functions.

A base is more than a place. Here is what it should provide.

1. A safe, consistent physical space which users attend to engage in social activities, learn life skills and participate in community activities.
2. A consistent team of care and other workers who are experienced, skilled and qualified in working with autistic adults.
3. A safe and secure environment (both inside and outside) within which its users can flourish.
4. Sufficient funding to provide staff with, as a minimum, the London Living Wage, access to the local government pension scheme, TUPE protection where applicable, attractive terms and conditions of work and opportunities for promotion. Such conditions are essential to overcome the critical problems of staff recruitment and retention.

² [Adults Social Care Consultation on Proposal 1 \(PDF, 284KB\)](#)
[Adults Social Care Consultation on Proposal 2 \(PDF, 280KB\)](#)
[Adults Social Care Consultation on Proposal 3 \(PDF, 284KB\)](#)

5. Adequate funding to ensure good quality provisions for care, support and learning. The level of funding should comply with para 4.42 of the *Care and Support Statutory Guidance* (Issued under the Care Act 2014, Department of Health), that '*Local authorities must have regard to ensuring a sufficiency of provision – in terms of both capacity and capability – to meet anticipated needs for all people in their area needing care and support – regardless of how they are funded*'.
6. A homely and friendly environment away from users' family homes and supported living/ residential homes.
7. A place for autistic users away from their family homes so that family carers have **sufficient time to recuperate for when their adult children return home**. Haringey's model of care must impose no additional caring tasks on family members and informal carers which reduce the time they have for themselves.
8. A place from which users and carers can access other services that affect their wellbeing, especially advocacy and advice on social care, healthcare, housing and welfare rights, including the new rights of service users and carers under the 2014 Care Act.
9. Social care that is informed by the best social intelligence on local needs and provisions available and which encourages ongoing dialogue between commissioners, providers and users, parents and carers.
10. Consistent regulation by Haringey Council which is not dependent on chance visits by the CQC. The Sevacare scandal revealed that Haringey failed to regulate this large homecare provider with which it had a long-term block contract until 2014-15, endangering the care of clients with learning disability and dementia.

Before service delivery: assessment and appeals

Before people receive adult services they need quality assessments – and access to an independent appeals system if they believe incorrect decisions have been taken.

Assessment

Haringey Council has pledged that it will continue to meet the needs of all those assessed as having eligible needs, and that it will provide personal budgets to people assessed as having continuing needs. This raises concerns about assessments and reassessments and the way these are carried out in practice. In the past people with autism have often been deemed ineligible for services because their specific needs and difficulties (which may be disguised by their relatively high cognitive level) have not been fully taken into account. Social care assessors need to have a comprehensive understanding of autism spectrum disorders in order to meet the requirements of the Autism and Care Acts.

The Care Act 2014 states that a person carrying out an assessment must have the skills, knowledge and competence to carry out the assessment and they must be trained. The Care Act also states that assessors must have a good knowledge of the person's condition – so if they are assessing a person with autism, the requirements of the Autism Act 2009 apply. The Care Act also states that if an assessor does not have the knowledge and skills about a person's disability, they have to ask someone who does to assist them in carrying out the assessment.

The Autism Act states that all staff in health and care services must have training in autism that enables them to identify signs of autism and make appropriate reasonable adjustments. Those staff who have direct contact with adults with autism such as care assessors should have had training which enables them to:

- Use appropriate communication
- Recognise and support a person with autism who is experiencing stress/anxiety
- Recognise and support sensory needs
- Understand issues if someone also has a mental health condition

The Autism Act states that health and care professionals who have a direct impact on, and make decisions about, an adult with autism's life must have autism training, and also other skills which will enable them to understand:

- How autism may present and be diagnosed across the lifespan and levels of ability
- The common difficulties faced by adults with autism and their families
- The impact of autism on personal, social, educational and occupational functioning

It is essential that parents/carers and other people who know the person with autism well, are involved in all stages of the assessment. People with autism may have difficulty with processing information and language: it may take them longer to process questions, and they may misinterpret the meaning or intention of a question. Many people with autism will answer literally and others will feel such high anxiety about talking to a stranger (such as an assessor) that they will give answers which they think the person wants to hear – often underplaying and misrepresenting their needs in the process. This is why it is imperative that someone else who knows the person well is present during the assessment and that their views and answers are taken into account. In relation to the involvement of carers and parents in an individual's assessment and care and support planning, the Care Act *Statutory Guidance* states that:

“In the case of an adult with care and support needs, the local authority must also involve any carer the person has (which may be more than one carer), and in all cases, the authority must also involve any other person requested. The local authority should have processes in place, and suitably trained staff, to ensure the involvement of these parties, so that their perspective and experience supports a better understanding of the needs, outcomes and wellbeing.” (para 6:30)

Social care assessors must be clear with people with autism, and their families and carers, when an assessment is taking place, what will be involved, and should share the assessment

form and questions with the person with autism and their carer before the assessment takes place. If the assessor is not sufficiently trained in autism and reasonable adjustments are not made, the true extent of people's needs will not be apparent, and the person with autism will not have been given an equal opportunity to demonstrate the full extent of their care needs.

The Council has stated it wants to provide care in the form of personal budgets with which users can purchase the care provisions that meet their assessed needs. Personal budgets must be sufficient to provide funds to cover the real costs of care packages, including the costs of providing experienced support and access to specialist facilities if needed (see Care Act *Statutory Guidance*, para 11.10). Although the local authority has the power to apply means-tested charges to users, these will not apply in the case of adult autistic users who do not have incomes above the means-test threshold.

Appeals

Users, parents and carers who disagree with the decision the council makes on the user's needs and the package of provisions they should receive must be able to appeal against the decision.

Given the present government's decision to delay Part 2 of the Care Act, which included making new regulations governing the way appeals under the Care Act would be handled, the council should develop an independent appeals system for adult social care users that is sensitive to the disadvantages learning disabled people face.

This system should be different from the Council's internal complaints system. The internal complaints system is not independent and has no safeguards that are sensitive to the specific problems faced by autistic people.

(SASH September 2015)

Dear to whom that this may concern;

19th February 15

My name is [REDACTED] and I am part of the NCS Challenge Group. I had the great opportunity to chat and get to know the wonderful people from Haven day Care Centre and hear about their beautiful stories.

It has come to my attention that the Centre is on the verge of closing, I'm outraged to hear that these friendly elderly people will lose their 'haven'. Good looking Eddie and 'Ralph' who have been friends for 58 years will no longer have their hangout place to chat to the ladies.

Haven day Care Centre provides other things such as work experience and voluntary work for the youth which is a great asset for the community. They provide social interaction and any services to please the elderly.

Imagine it was your nana who was being taken the great privilege of having a second home to mingle. Please consider further before you make any decisions as it will have consequences not only on the elderly but on the staff and other members of the community who have met any of them.

Your Sincerely,

[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

1st March 2015

Dear Sir or Madam,

Re: The Haven Day Centre

I am writing to you to express my concerns regarding the possible funding cuts the Haven Day Centre which would inevitably result in its closure. This I believe would negatively affect the wellbeing of every person who attend the place on a regular basis - sometimes daily - to make friends and be socially active. It would also mean that the centre's employees who has been devoted to their job for so many years will be faced with unemployment and financial insecurity.

I am a resident of Haringey and a Drama and Arts practitioner. As part of my work, I facilitate social and intergenerational projects. This has led me to work at the Haven Day Centre on 4 different occasions. Throughout the summer 2014 and February 2015, I took 4 groups of 12 young people to the centre. There they chatted to the elderly and learnt about their life stories. They created a drama performance based on these stories and performed them back to them.

I have witnessed the benefits of these projects on each occasion. The young people said they learnt from the elderly's life experience and been able to reflect on their own life and career path as well as feel more compassion and understanding towards their elders. Some elderly people have expressed being less prejudiced towards young people and commented that the latter were not all 'gangsters'. These realisations make both generations feel more socially accepted, included and secure. This I feel is highly valuable because it leads to community members feeling less angry and anxious, therefore leading to life in communities being more harmonious.

Many of the young people also expressed the desire to work and volunteer at the Haven Day Centre. I am very grateful that the centre has ensured this was possible and welcomes determined young people keen to get some work experience. I believe that the youth deeply values this experience as they take positive steps towards their future. The staff has always been helpful and going the extra mile to make sure that the experience of both the young people and their clients was optimum. This has enabled the project to run smoothly and through their professionalism they continually portray a positive model of practice for these young people who learn by example. These opportunities are important because they help the youth gain professional skills and knowledge of working in a team for the service of the clients. This will be useful in most jobs that they decide to apply for in the future.

I hope that you will take the time to consider this letter and understand that the Haven Day Centre is highly valuable to Tottenham community. I hope that you will do everything possible to ensure it can remain open.

Yours Sincerely,

[REDACTED]


[REDACTED]
[REDACTED]
[REDACTED]

19 May 2015

TO WHOM IT MAY CONCERN

PLEASE TAKE TIME TO READ THIS LETTER

Dear Sir

THE HAVEN DAY CENTRE FOR THE DISABLED, WALTHERGARDENS N17

I am writing to protest against closure of above centre.

I have worked there as a volunteer and have found it to be of excellent service to those who are not only elderly, but also disabled.

The people attending are given first class care and attention including a hot three course lunch which they may not always provide for themselves at home. Plus tea on arrival at 10.30 am and hot drink in the afternoon.

There are games, e.g dominoes, (one elderly gentleman taught me how to play them) books to read, quizzes in the afternoon, music to listen to, also the centre provides a wonderful social/community get together for people who are housebound and living alone. Whilst there, these people have made new friends and acquaintances. This is something that is ideal for mental well-being. Otherwise, they may have ended up suffering from depression due to loneliness which in turn would lead to more problems for the social services. ***It has most probably saved the day for many of them. Closing the Centre would be like cutting them off from the world.*** For some it is most probably their only chance of having a few hours away from home !!!!!!!

I dread to think of the impact its closure would have.

Continued.....

I witnessed an incident when a client was unwell and was given immediate attention and care.

The assistants/carers are always jolly, helpful and very caring, seeing to everyone's personal tastes in food and needs, ready to sit with them at all times. (Take note – the catering staff are also excellent)

These clients do no doubt look forward to their attendance at the centre 2 – 3 times a week.

To the people proposing to close the Haven Centre, I wish to say this:-

- One day an elderly disabled person you know or relative maybe in need of this centre.
-
- OR
-
- Even the people proposing to close the centre may need to attend themselves.

I am therefore asking you to please reconsider the consequences of any closures.

Therefore, please do not close this wonderful little place which actually does live up to its name of "The Haven".

Yours faithfully







Thursday 19th Feb
20

To whomever it may concern,

I am writing in regards to the possible close of the Haven Daycare centre in Walthey Rd. As a young person who visited the Daycare centre it was amazing to see how engaged everyone was and how warmly we were greeted. The elderly were being supported and looked very much at home in an environment which was specifically catered to their needs. It is easy to imagine them having a reduced quality of life if they did not have access to this important local amenity, or a chance to socialise with other people. If they were forced to remain at home each day they would surely become isolated as for many of them this is the sole chance that they have to remain integrated in the local community. Furthermore, it was an insightful experience for us to speak to them and hear about their lives; an opportunity we probably would never have had if the Day centre was closed. I am very glad I had the chance to visit the Day centre as part of the National Citizens' Service (NCS). I hope that you will consider what I have said and what a fantastic opportunity that it was for me to visit them at the Haven Daycare.

Yours sincerely,

[Redacted signature]


Friday 20th February

To whoever this may concern,

As part of my National citizenship scheme, me and my group visited Haven day care centre - A place where many people are dedicated to spending their mornings and afternoons - and we were saddened to hear about the possible closure of this centre in order to provide care closer to home. However, many fail to realise that Haven day care centre is important to the people who go there because it allows the retired community to socialise with new different people and provides a place they can call their second home. Additionally, the centre provides food for the people who might otherwise not have any and provides many jobs for people plus work experience for the young community. This is not only informative but also provides a chance for society to break the barrier put up by a stereotype of how the young and older generation do not get along.

It is places like Haven day care centre that are important to society and to the community for a range of different reasons. We as part of the citizens in the UK wish that you re-evaluate the possible closure.

Thank you for the time and consideration



does not limit the opportunities for ~~the staff~~ ^{the staff} to be involved in
such activities which would hinder the availability of such
positive resources.

To conclude, I hope you have been sound of a degree that
will emerge as a result of a change to the day care
center and the new job of just more of the benefits
~~benefits~~ benefits the degree center has had on the lives of
hundreds of people. I hope your decision stays in the right
direction.

Yours sincerely,



[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

27th May 2015

To Whom it may Concern

I am writing to express my dismay at the threatened plan to close The Haven Day Centre, Waltham Gardens, N17.

[REDACTED]
My mother-in-law has been attending this Centre for nearly 15 years and has derived much pleasure and stimulation from the friendships she has made there, and the many and varied activities that have taken place over that time.

For elderly and isolated people living in the community, this type of Centre is absolutely crucial for their health and well-being.

We do not live anywhere near my mother in-law and so cannot visit on a regular basis, so know [redacted] that she is able to attend the [redacted] we know she is getting the social [redacted] and care that we are not able to [redacted] these days when families are [redacted] living apart from each other due to work commitments and opportunities, it seems a very backward step to close a centre like this.

I do hope you may reconsider your priorities in social care provision and keep The Haven open.

Yours faithfully
[redacted]

30 June 2015

Tanya
The Haven Day Centre
Tottenham
London N17

[REDACTED]

Dear Tanya

As you know I have only just joined your group at The Haven Day Centre, but already I have benefited very much from a day out and have made friends. My spirits have been lifted and it has given me a new purpose in life.

I was very upset to hear that Haringey is going to close the Centre down, due to cutbacks. Is there nothing that can be done to save the Centre. Would it be possible to start a petition to Haringey Council and our local MP.

It is a disgrace that they feel they can cut back on old age pensioners, who have worked hard and contributed to the country all their lives.

Before joining the Centre, I was lonely, depressed and had no friends to visit or take me out. Since coming to your Centre I have been so happy and have met some lovely people. The Staff are so lovely and helpful.

My sister Carol accompanied me on Monday. She was very impressed at the kindness and care shown by the staff to all the elderly ladies and gentlemen. It was nice to see them so happy, doing their exercises, playing games and chatting to each other.

I look forward to hearing from you.

Yours sincerely,

[REDACTED]

15th September
201

Dear [REDACTED]

Plaes can you save the centre
we dont want we centre to close
could you save the centre
keeping open the day centre
from Yvonne Jordine
HARINGEY

FROM [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

30th September 2015

Dear Sir/Madam

I Re Proposal to close The Haven Day Centre

I do understand the financial situation that the Council is in.

However, I do not understand the following when making your decisions.

1. How can you propose to cut older peoples services and then WASTE £86,000 on a new logo that is totally unnecessary. You may change the logo, but you will not change the people.
2. Our generation are your past, your present and will continue to be your future. People are living longer and this brings its own set of problems and the ageing population will continue to increase.

The new logo represents a council that is warm and caring, how can this be, when you clearly do not want the responsibility of older people.

I was assessed some years ago as needing a day centre. My needs have increased and yet my day centre may be taken away. There is no where else that could be even a close substitute for The Haven.

Tottenham is due to be regenerated, however, at public meetings there has not been any thought about how older people who will no longer have a service can access the 'new regenerated Tottenham.'

I need assistance to get out of my home, into a vehicle and assistance
wherever I go. How am I going to get this, along with the many [REDACTED]
who are going to be much worse off. As a result of Haringey's lack of thought
and consideration for older people. [REDACTED]

My family will no longer have 'their own lives' as they will have to attend to my
needs.

Finally, people of my generation, worked very hard to ensure that they could
provide for their own future and I feel strongly, that too much money in the
borough is being given to people who are unwilling to work to keep
themselves.

I believe that the cuts you are facing can be found elsewhere, especially after
reading recent newspaper reports, about the amount of money spent
unnecessarily.

As food for thought, please remember that we are all residents of the borough,
I personally, have lived in Tottenham for 80 years and we all have the right to
vote, and will be seriously thinking about who we vote for in the next election.

I urge you to 'SAVE THE HAVEN'

Thank you for your consideration.

Yours faithfully

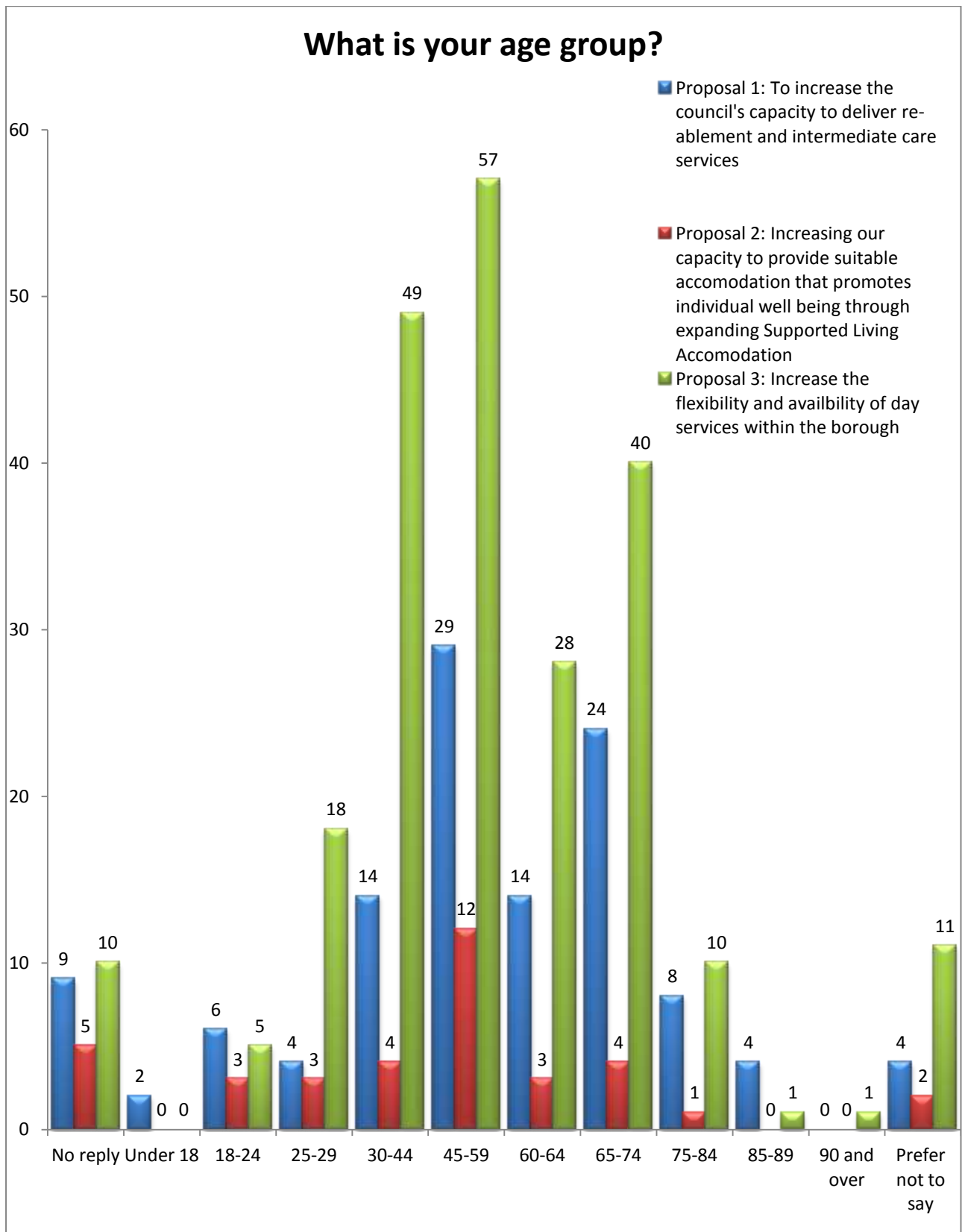
[REDACTED]

[REDACTED]

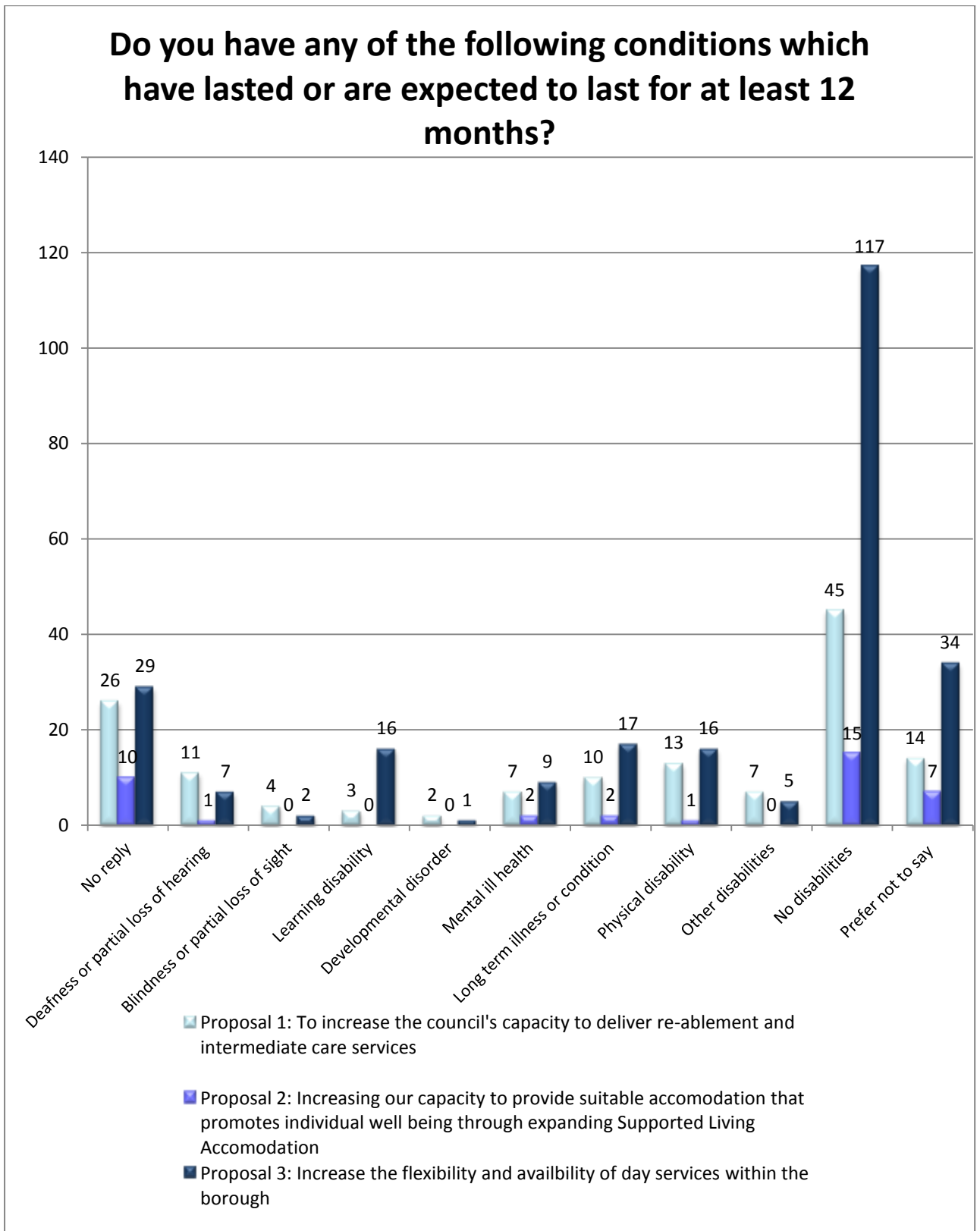
Equalities

We have undertaken comprehensive Equalities Impact Assessments for each service area that may be directly and/or secondarily affected by the proposals. We have also sought to gather equalities information from the respondents to the consultation via the consultation packs and via the workshops/focus groups. This information has been used to make the recommendations to Cabinet.

Age group

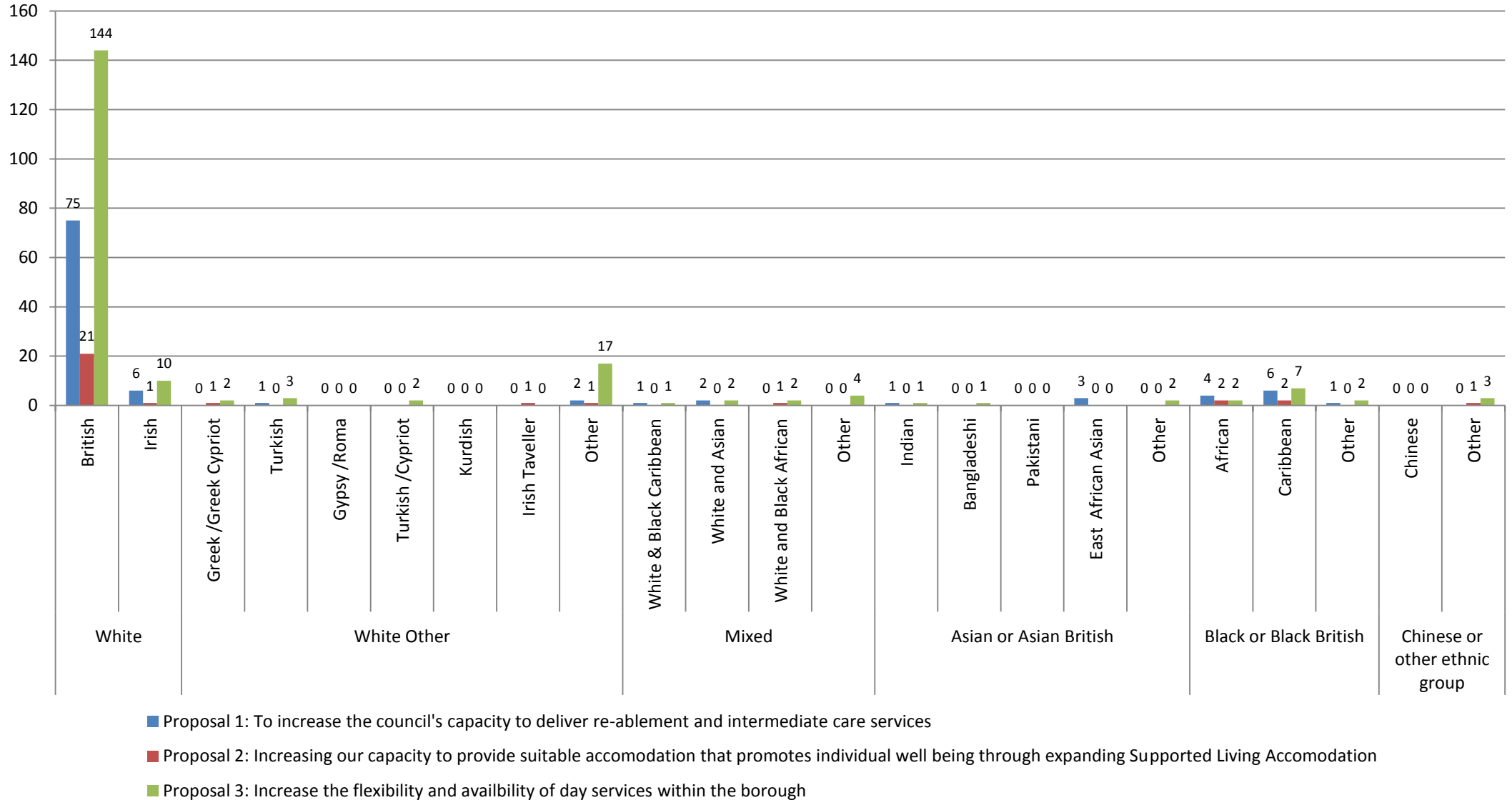


Disability

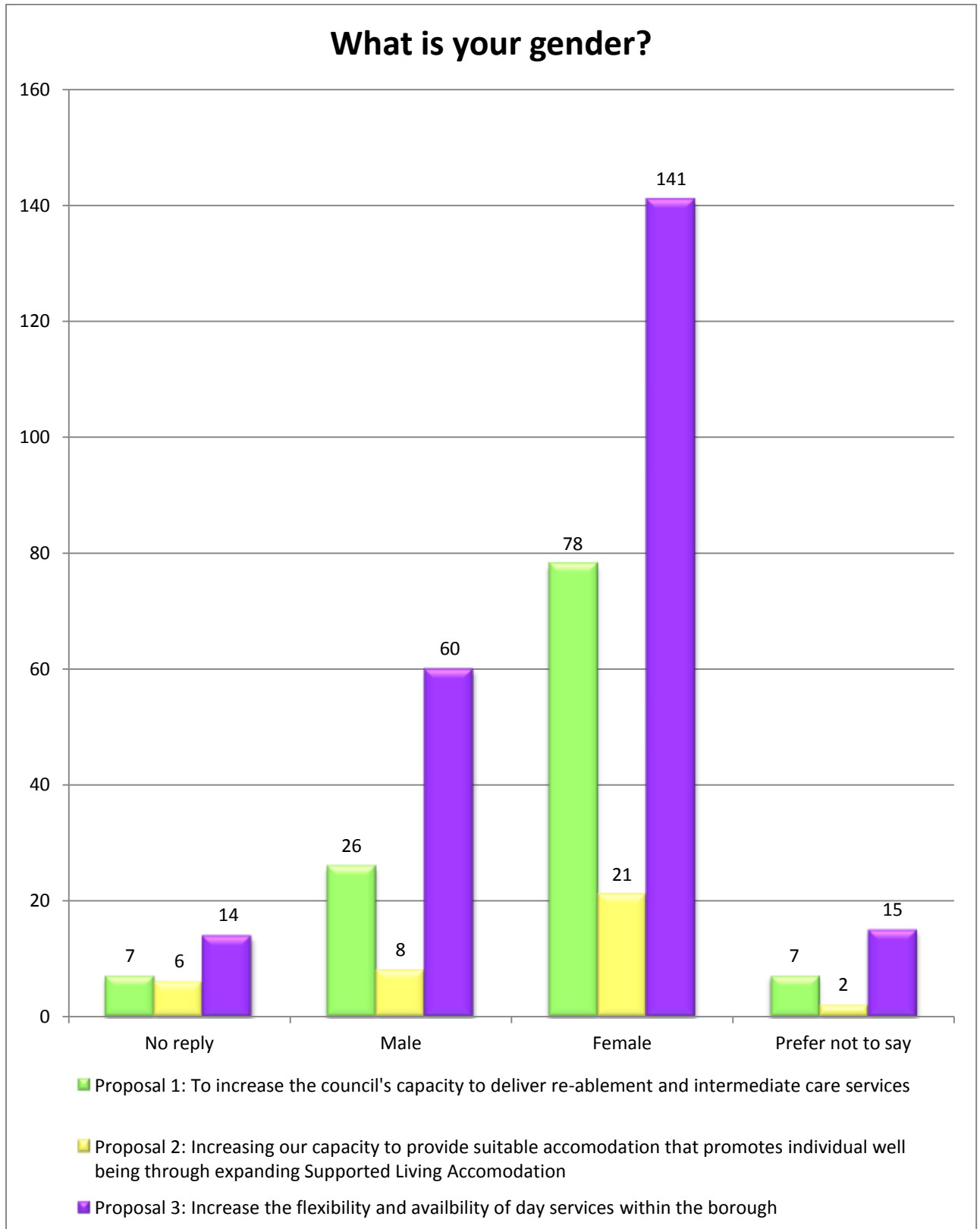


Ethnicity

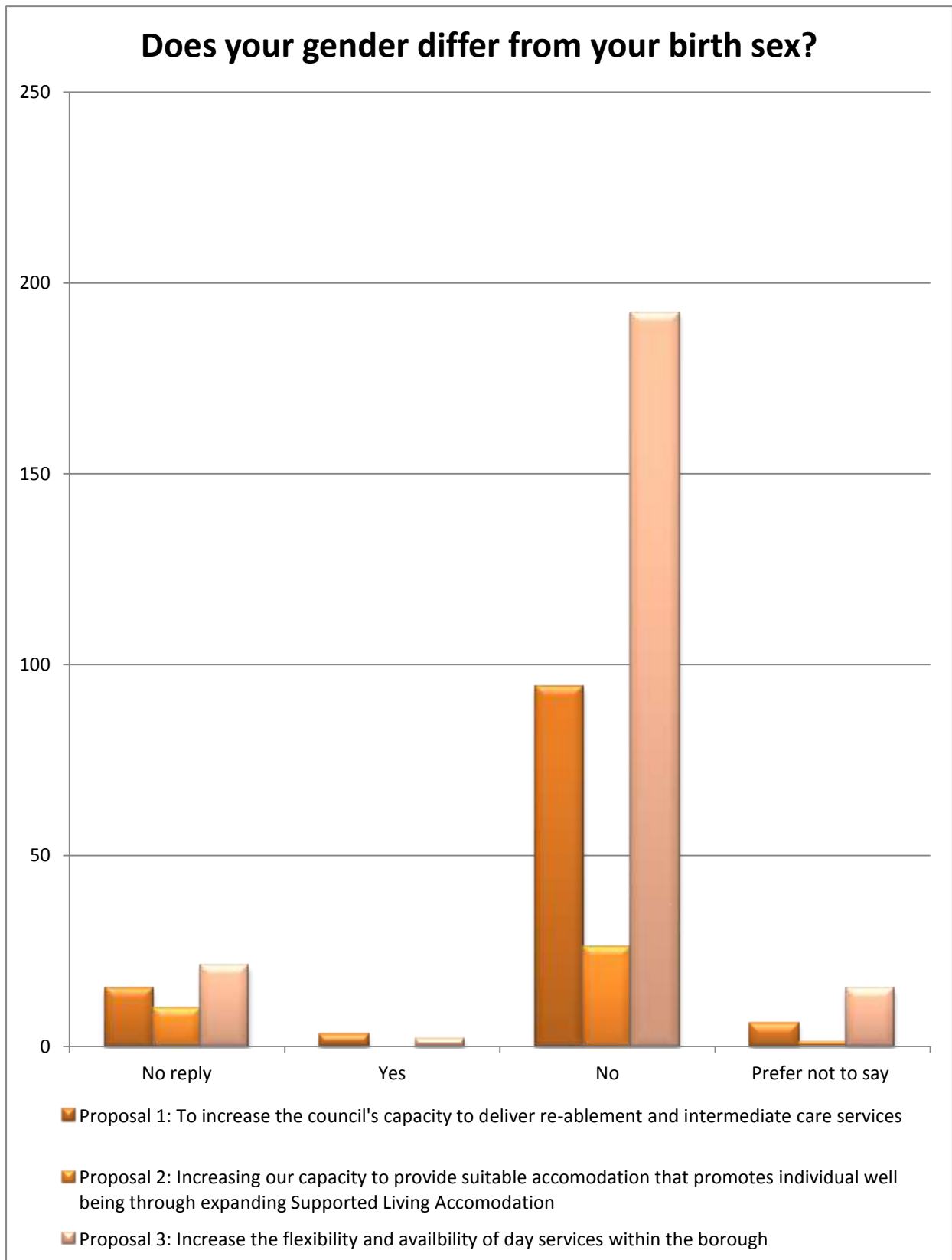
Please tick the box that best describes your ethnic group



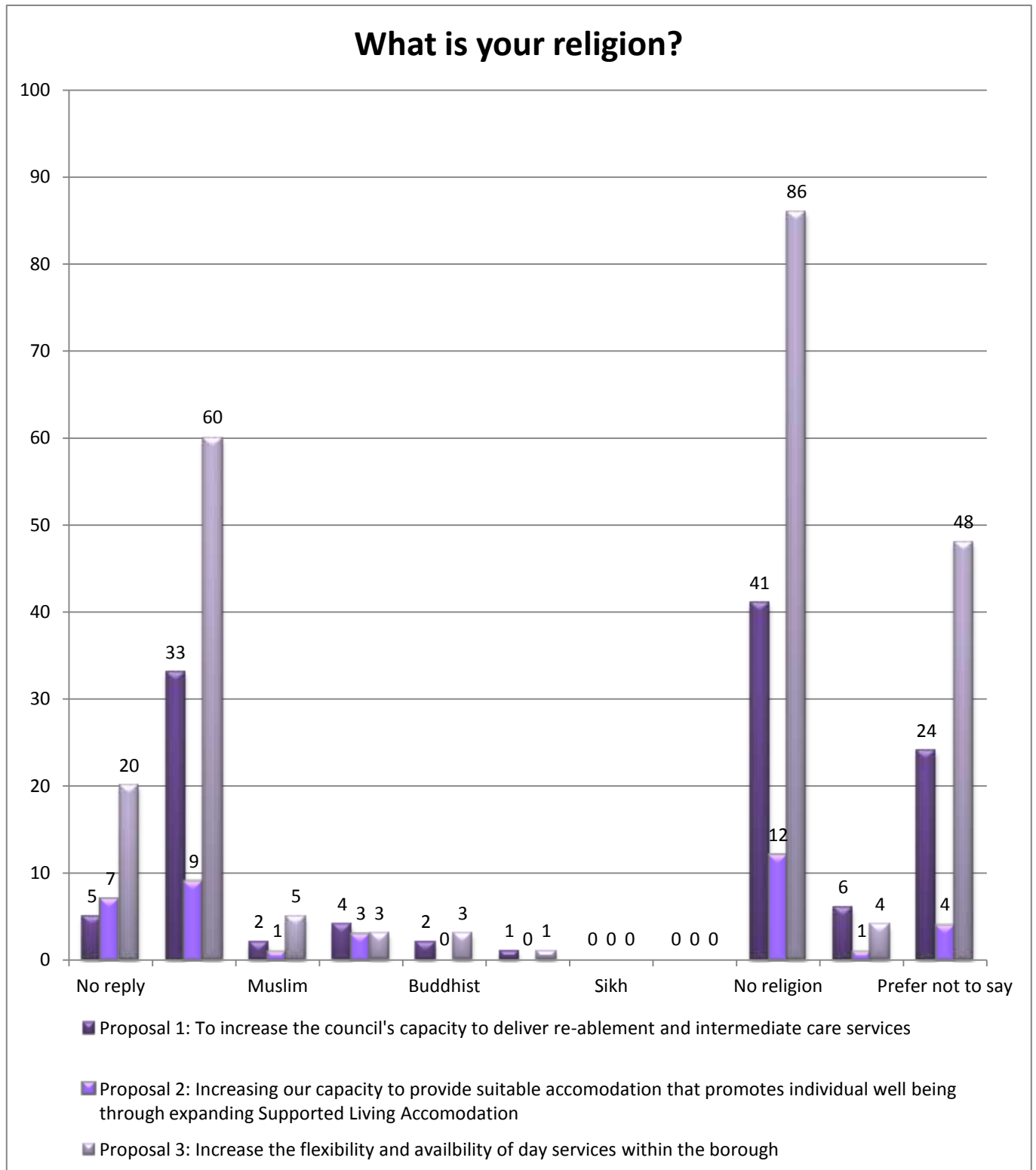
Gender



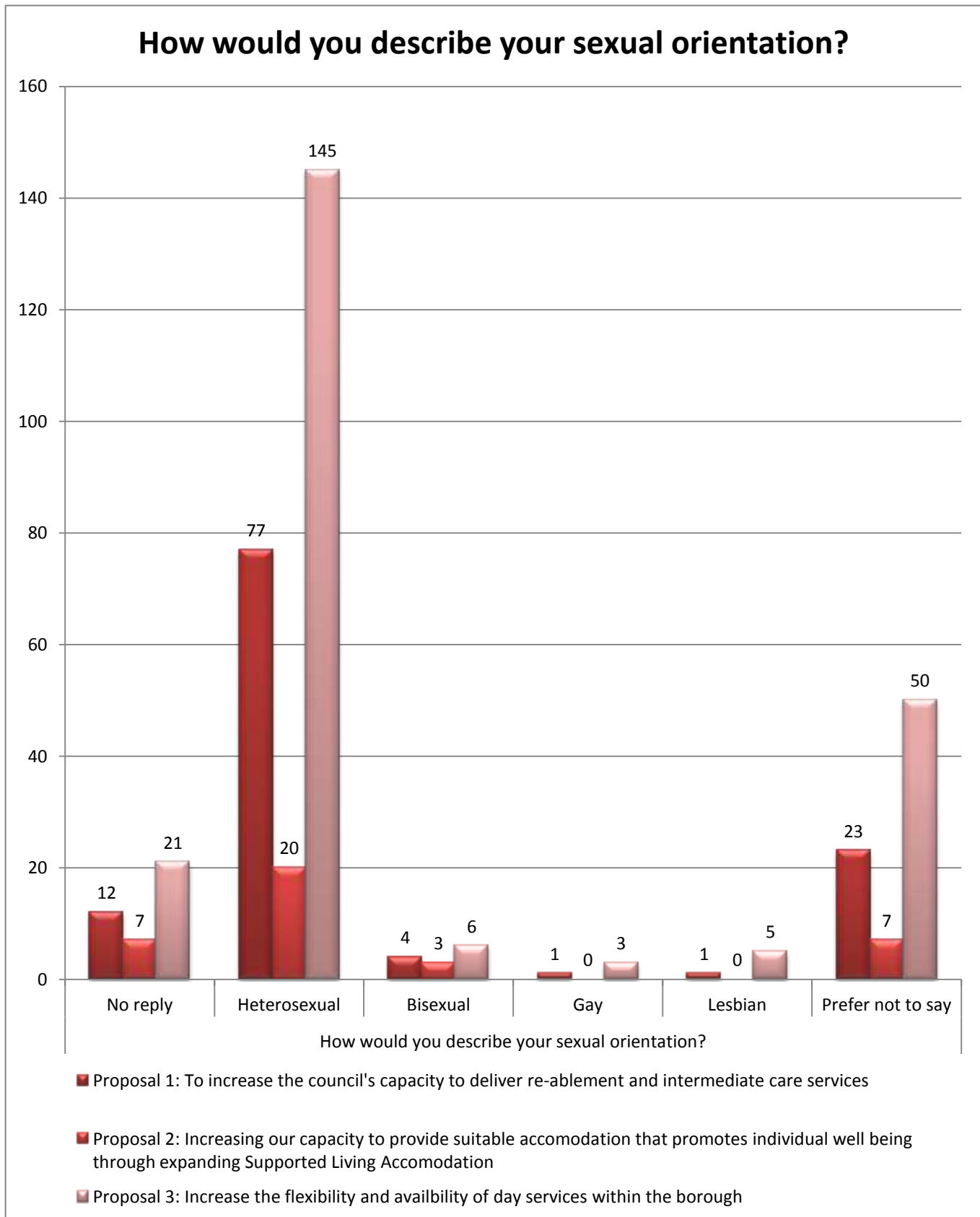
Gender Reassignment



Religion

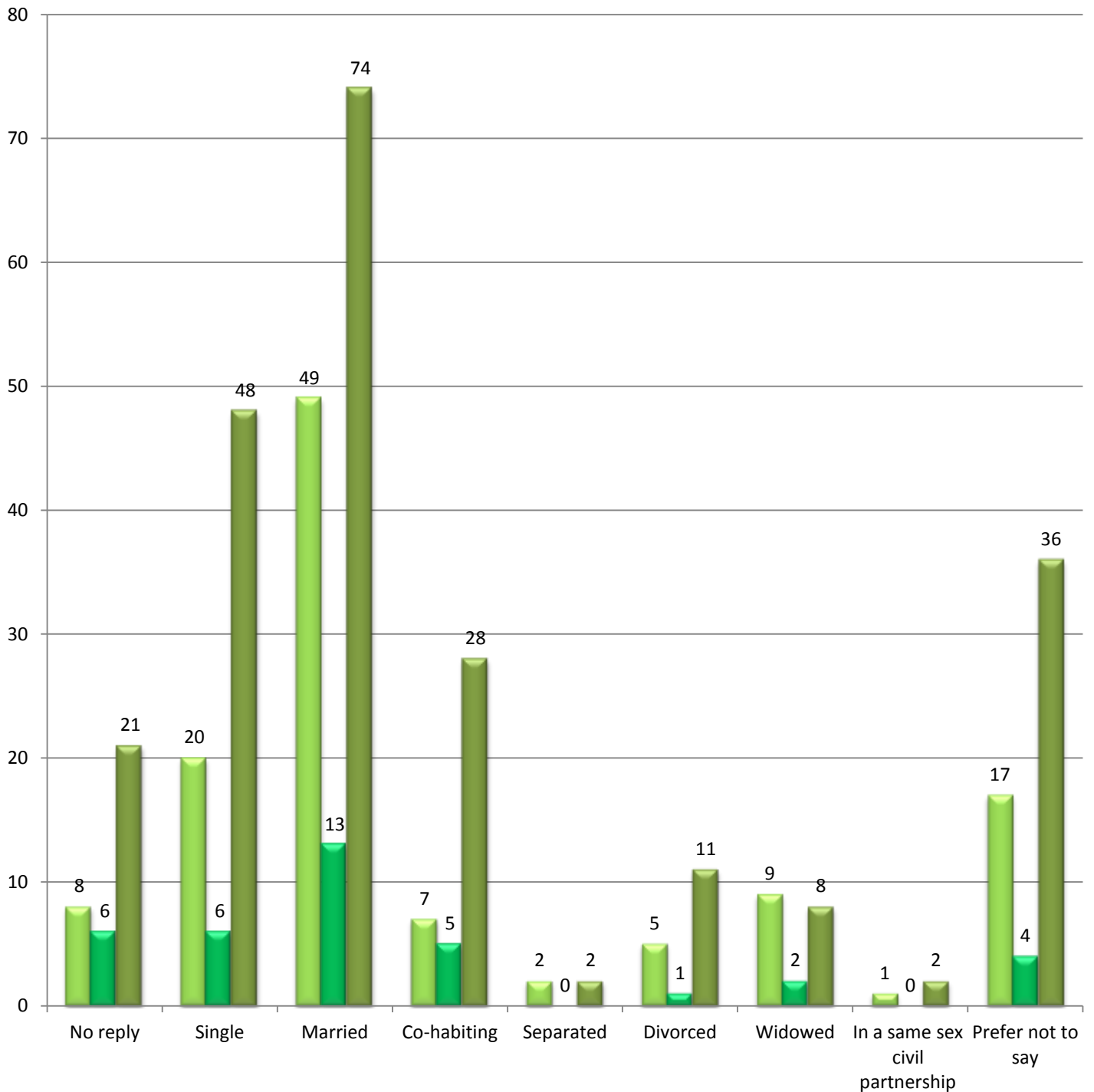


Sexual orientation



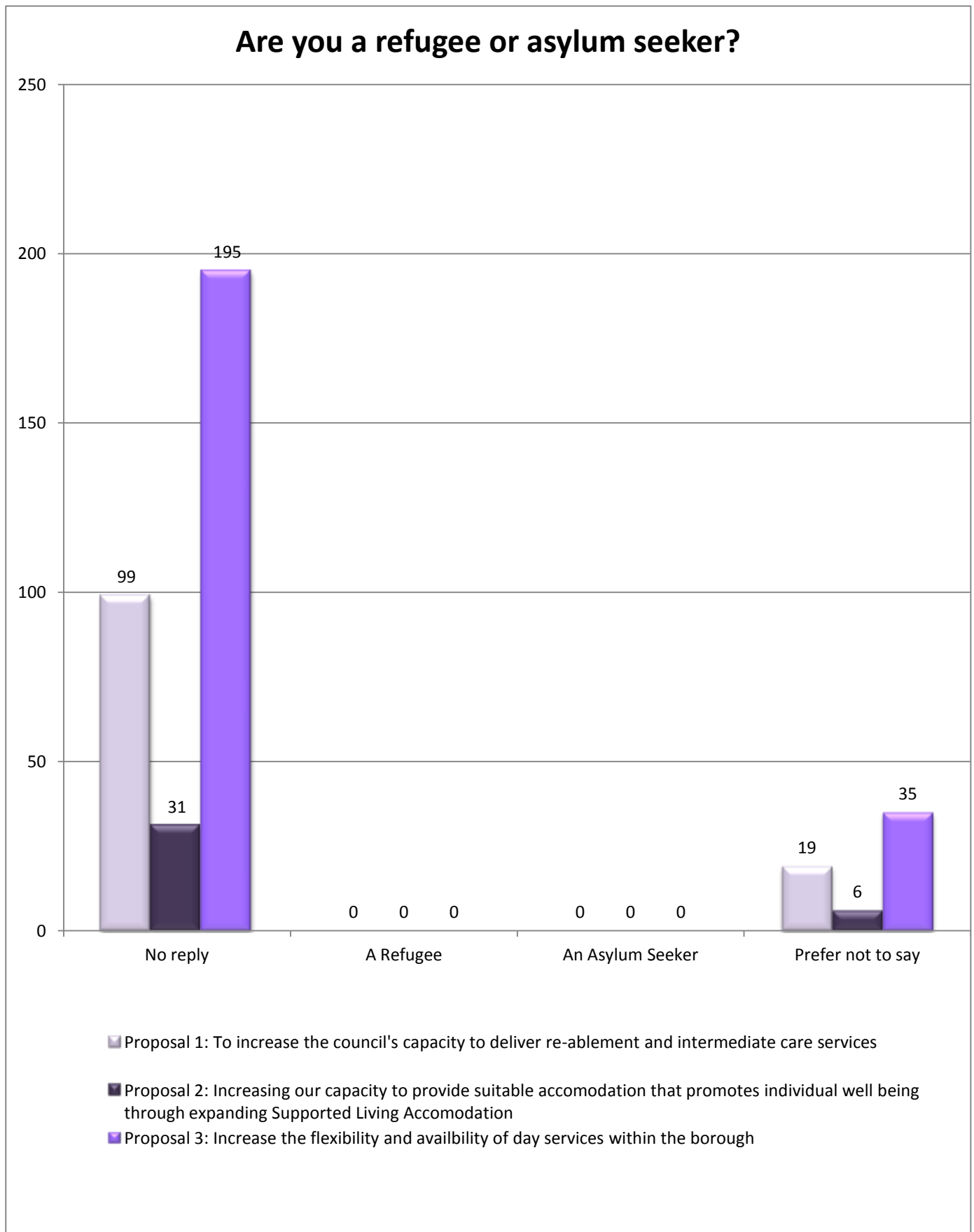
Marital Status

How would you describe your marital status?



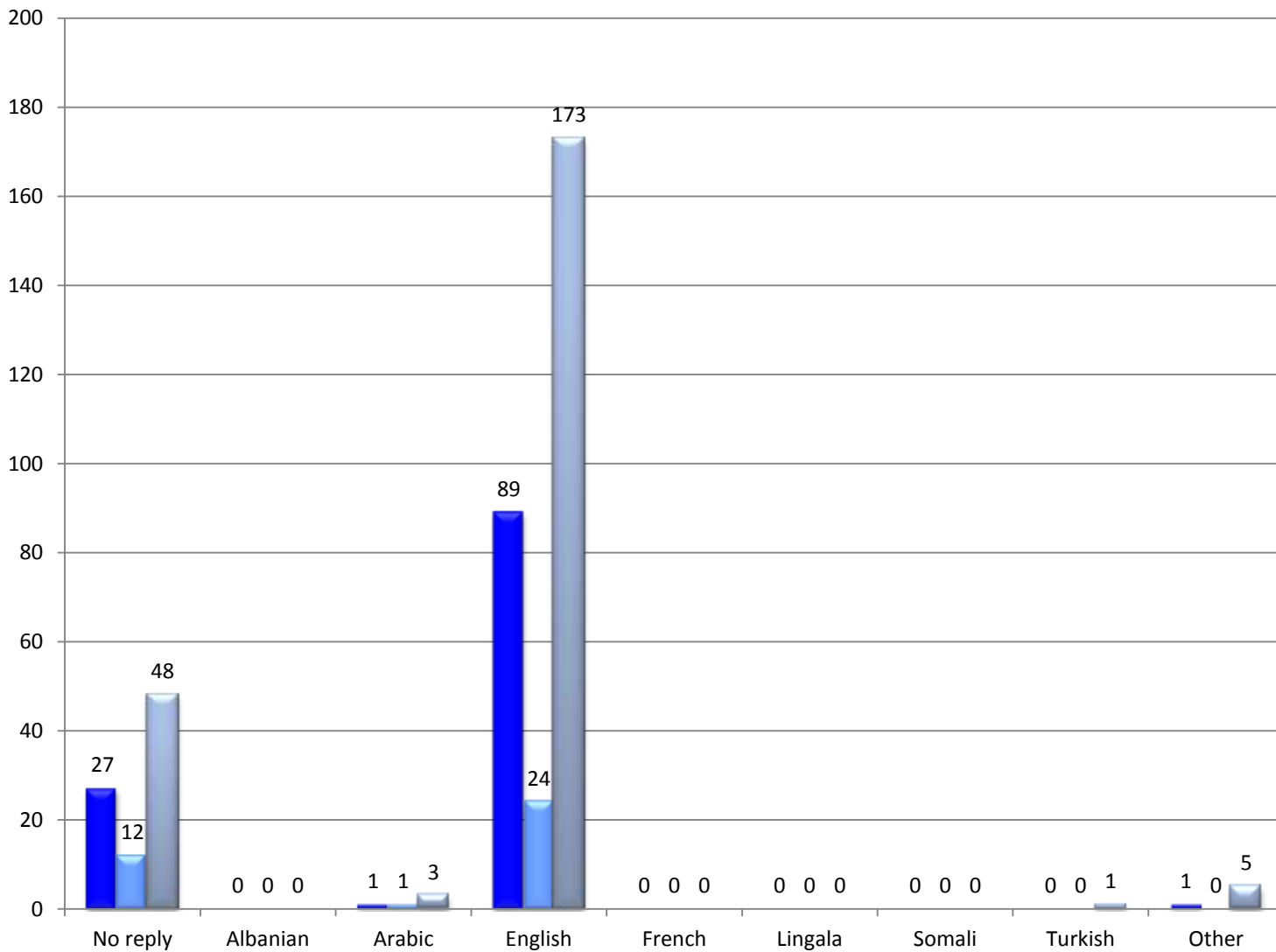
- Proposal 1: To increase the council's capacity to deliver re-ablement and intermediate care services
- Proposal 2: Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation
- Proposal 3: Increase the flexibility and availability of day services within the borough

Refugee or Asylum



Language

Please tick the box that best describes your language?



- Proposal 1: To increase the council's capacity to deliver re-ablement and intermediate care services
- Proposal 2: Increasing our capacity to provide suitable accommodation that promotes individual well being through expanding Supported Living Accommodation
- Proposal 3: Increase the flexibility and availability of day services within the borough