

|                                    |                               |   |  |
|------------------------------------|-------------------------------|---|--|
| <b>Item No.</b>                    | <b>Classification</b><br>Open | <b>Date:</b><br>21 August 2013  | <b>Meeting Name:</b><br>Cabinet Member for Health,<br>Adult Social Care & Equalities |
| <b>Report title:</b>               |                               | Centre of Excellence for older adults with dementia and complex needs |  |
| <b>Ward(s) or groups affected:</b> |                               | All wards   |  |
| <b>From:</b>                       |                               | Strategic Director of Children's and Adults' Services                 |  |

## RECOMMENDATIONS

1. The Cabinet Member for Health, Adult Social Care and Equalities notes the very positive response and engagement from the family carers, stakeholders and staff to the plans for the proposed Centre of Excellence for older people living with dementia and complex needs to be on the ground floor of Cator Street Resource Centre.
2. The Cabinet Member for Health, Adult Social Care and Equalities also notes that the outcome of this further feasibility work concluded that the site and location of Cator Street found that it was a suitable location for the Centre of Excellence, and therefore approves the Cator Street site as the preferred location for the development of the Centre of Excellence.

## BACKGROUND INFORMATION

3. The council currently provides and manages two day centres for older people. The delivery of the service is part of the council's wider strategy to support older people's aspiration to continue to live at home wherever possible and avoid admission to residential care, in line with what people tell us they want, as well as supporting carers to enable them to continue in their caring role. These sites are at Fred Francis in East Dulwich and Southwark Park Road in Bermondsey. The council has also continues to support a range of day services operating throughout the borough for older people with eligible but usually less complex needs, run by a number of different voluntary organisations.
4. Fred Francis is currently open 7 days per week and 28 service users attend each day on average from Monday to Friday, with on average 17 attendees each weekend day. Southwark Park Road is open Monday to Friday and on average 19 people attend daily.
5. 70% of the users are aged over 80, with 23% being over 90, who are extremely frail, and almost all of whom are living with some form of dementia. There are also a small cohort group of users who have long term mental health issues as well as some degree of dementia.
6. Currently the hours of attendance are fixed and determined by rosta patterns and transport arrangements. Both services operate from mid morning to mid

afternoon, with service users being collected via mini buses from their own homes. Lunches are heated and provided at both centres by an external contractor as part of the council's meals on wheels contract, and a full range of activities take place throughout the week.

7. Informed by the needs of people living with dementia from valued partners such as the Alzheimer's Society, the council undertook a comprehensive consultation exercise in the summer of 2012 on a Future Vision for a Centre of Excellence. The vision proposed to relocate the two existing in-house day centres and provide an enhanced set of services following the development and opening of a new, state of the art centre. This would provide excellent specialist day opportunities for older people living with dementia and more support for their carers. The two current day centres were built in the 1980s and were not designed to cater for the specific needs of people with dementia. The Future Vision was developed in response to:
  - The increasing number of older people living with dementia
  - The council's commitment to high quality personalised care
  - Older people's aspirations to continue to live in the community
  - The need to improve support to carers.
8. Concurrent to this consultation, the council carried out initial feasibility studies to explore where best to locate the Centre of Excellence. The feasibility studies considered the two existing day centres and a third location at Cator Street. The feasibility studies concluded that Cator Street provided sufficient space and a building flexible enough to host a wider range of services and the best potential to cater for the anticipated number of service users and carers. It also noted that the central location of Cator Street would mean good transport accessibility for all residents irrespective of where they lived in the borough.
9. The costs of developing the existing two day centre sites were estimated to be approximately double the cost of developing the ground floor of Cator Street. Southwark Park Road was considered to be far too small and Fred Francis was not large enough to provide a centre on one level or provide any significant outdoor space. The revenue costs of staffing a two storey centre would be significantly higher than the cost of staffing a centre on one level. The initial feasibility studies concluded that Cator Street provided best value for money. The feasibility studies also noted that unlike Cator Street, neither of the current sites is centrally located.
10. Cator Street is a 3 storey building and the plans to incorporate the Centre of Excellence will allow the continuing use of the building by education colleagues and include provision of training rooms on the upper floors. These facilities could be used for carer groups facilitated by SLAM and the voluntary sector, thus expanding the offer. Carers were very positive about the potential to develop better carer support services within the building.
11. Following the successful outcome of this consultation exercise, the cabinet agreed The Future Vision for a Centre of Excellence in December 2012. It required as part of second stage feasibility, further engagement with the families and external stakeholders on the development of more detailed plans, before a final decision was made on whether Cator Street was the most suitable building and location. Cabinet delegated this final decision on the suitability of this site to the Cabinet Member for Health, Adult Social Care and

Equalities, whilst also requesting a report to Cabinet for information.

12. Since the meeting of the Cabinet in December, the council has established a Design Consultation Group. This group has been actively engaged in the development of these plans and will continue to work with the council on the further design of the building, as well as the future service model and the mobilisation arrangements to open the new centre. The Design Consultation Group membership includes :
  - Family members from both Southwark Park Road and Fred Francis day centres
  - Voluntary sector partner organisations
    - Alzheimer's Society
    - Age UK,
    - Southwark Pensioner's Centre
  - Older people representatives from the following groups:
    - The Pensioner's Forum / Southwark Pensioner's Action Group,
    - Southwark Lay Inspectors Service
    - The (former) Local Involvement Network<sup>1</sup>
  - NHS partners from
    - The Clinical Commissioning Group (CCG)
    - South London and Maudsley NHS Trust (SLaM) Older Adults Services
  - Service Manager, manager and staff representatives from both Fred Francis and Southwark Park Road.
  - Other council staff
    - Occupational Therapists
    - Manager of the Southwark Resource Centre
    - Regeneration
  - Ongoing engagement with the Older People Partnership Board
13. The council noted that in recognition of the time pressure and health constraints of many of the family carers, membership of this group was by necessity, fluid, with engagement taking part both within the context of formal meetings as well as through one to one discussions either in person or by the telephone.

## **KEY ISSUES FOR CONSIDERATION**

### **The Centre of Excellence**

14. The council wishes to reiterate it's prior commitment that anyone using the current services when the Centre of Excellence opens will be guaranteed a place at the new centre and that door to door transport will continue to be provided. The December Cabinet made a commitment that it would minimise any disruption for service users and their families during the transition to the new centre and that families, stakeholders and staff would be fully engaged through all stages of the development of the new centre. The move to Cator Street can also be accommodated without a break in service.
15. The Centre of Excellence will host a range of specialist therapeutic activities, such as:

---

<sup>1</sup> Now known as Health watch

- Occupational Therapist and therapeutic rehabilitation exercise and classes
- Flexible multi purpose activity space including a sensory room<sup>2</sup>.
- A range of activities such as therapeutic art classes
- Co-locate and host services provided by partner organisation (ie health clinics, such as chiropody etc.
- Continue to provide accessible transport for those who require it, funded through their allocated personal budgets
- User wellbeing activities such as hair dressing, music, art, etc
- Meals and dietary advice and support
- Carer respite, support and information.

A comparison with existing provision is given below.

| Services   | Proposed for the Centre of Excellence | At Fred Francis | At Southwark Park Rd |
|--|---------------------------------------|-----------------|----------------------|
| Therapeutic sessions in specialist rooms   | ✓                                     | x               | x                    |
| Home like décor as opposed to a More institutional   | ✓                                     | x               | x                    |
| Sensory rooms  | ✓                                     | x               | x                    |
| Potential for fresh food cooked daily on site and provision for breakfast and later meals  | ✓                                     | x               | x                    |
| An opportunity to work in close partnership and offer a more holistic service in partnership with a specialist housing scheme next door. | ✓                                     | x               | x                    |
| Locally controlled heating and cooling   | ✓                                     | x               | x                    |
| The potential for hot desk office space for visiting NHS or voluntary sector partners  | ✓                                     | x               | x                    |
| Capacity for up to seven activities to be provided in separate rooms at one time   | ✓                                     | x               | x                    |
| Designated planned space for chiropody and health clinics on site.   | ✓                                     | x               | x                    |
| Access to carers training and support facilities on the site   | ✓                                     | x               | x                    |
| Evening and earlier opening  | ✓                                     | x               | x                    |
| 7 day a week access  | ✓                                     | ✓               | x                    |
| Free transport provided for people with personal budgets   | ✓                                     | ✓               | ✓                    |

<sup>2</sup> Memory rooms are fitted out in a way so as to provide visual and aural stimulation to help manage issues such as forgetfulness. Sensory rooms host various aids to stimulate the 5 senses, which has proven to be effective in helping people with dementia to become less restless, agitated and improve sleep patterns.

|   |   |   |   |
|---|---|---|---|
| Specifically designed hairdressing facilities on site | ✓ | ✓ | ✓ |
| Activities such as art and music classes              | ✓ | ✓ | ✓ |

16. The indicative timeline for the development and opening of the centre is set out below

### High Level Milestones

| Date                       | Action  |
|----------------------------|---|
| August 2013                | Decision on the suitability of Cator Street by the Cabinet Member for Health, Adult Social Care and Equalities                                      |
| September 2013             | Cabinet report - for information  |
| September to December 2013 | Continued engagement on developing the model of care and further development of the approved plans with stakeholders and staff                      |
| September - December 2013  | Continued engagement on developing the model of care and provision of a reference group for the architects with families, stakeholders and staff    |
| September - December 2014  | Procurement of builders for the Centre of Excellence and the Extra-care housing scheme to be built adjacent to the centre on the Cator Street site. |
| February 2014              | Cator Street site decanted  |
| March 2014                 | Start of works at the Cator Street site   |
| April 2014                 | Agreement of the new service model and offer  |
| May 2014-May 2015          | Mobilisation and transition to new service model and offer  |
| May 2015                   | Completion of works and centre and the new extra-care scheme for older people next door opens   |

17. A summary of the reasons why the council is proposing Cator Street are listed below.

### Positive response to the developed plans obtained through engagement.

18. Following the cabinet decision, the council procured a firm of architects to carry out a second stage feasibility study to develop the proposal in more detail. Since their appointment in March 2013, they have been working with a Design Consultation Group (Fuller details of the outcomes of this engagement is outlined in the consultation section of this report below)
19. The Design Consultation Group has had an overwhelmingly positive response to the proposed plans for Cator Street and their advice and comments based on their expertise and experience has informed the plans. They have for example influenced the proposed internal layout, the planning of the garden, the number and location of WCs, the kitchen and dining arrangements, the scope for the range of activities etc. Further details of the consultation exercise and further details of how the Design Consultation Group has shaped the plans are summarised in the consultation section of this report.

### Responding to Future Demand

20. The council is proposing to develop the centre to respond to the challenges of a significant projected increase in the numbers of older people living with

dementia in Southwark, with the levels of prevalence increasing amongst the very oldest sections of the population. The rise is amongst both people living with early onset dementia, right up to those who have a chronic and in some cases terminal conditions. There is a small number of working age adults who are living with dementia. This group will not be excluded from the new centre, and their specific requirements will be further explored as the new service model is further developed.

21. Cator Street can accommodate up to 60 service users at one time, which is more than the current combined number of people using the two existing buildings on a single day. Cator Street has scope to increase the number of people who can attend each day, in a building that also has more potential to provide a wider range of support and information to them and their carers than at either of the current sites. Cator Street is also better suited to accommodate a new and expanded service model. For example, earlier and/or later opening hours for people with personal budgets or their carers to buy more flexible hours of attendance or respite, distinct groups (such as people who have a higher level of mental capacity) or carers using part of the building for a specific activity such as a support group, an Alzheimer's Society "Living with dementia" course etc . This means that the wider community of people living with or affected by dementia could use the resources on offer at the building and attendance may not be as constrained as it is currently by a relatively small cohort of people living with dementia determined by staff the rota and transport patterns. This means that there would subsequently be scope for far more than 60 people to use the centre over the course of each day.
22. The vision for the new centre has been a catalyst for constructive dialogue within the health and social care sectors in Southwark about how best to respond to the challenge of dementia and the growing numbers of older people living with the condition. Key partners across health and social care within the Southwark and Lambeth Integrated Care (SLIC) are fully engaged on discussions on the model of care and are considering how best to provide more integrated services at the proposed Centre of Excellence in order to reach as many people as possible.
23. As part of its commitment to meet older people's aspirations to avoid residential care unless absolutely necessary, the council is also proposing to develop an extra care housing scheme on an adjacent site at Cator Street. This scheme will be providing an intensively supportive housing service for very frail older people, many of whom will have dementia. It is envisaged that both of the planned developments would make a very real contribution towards supporting people living with dementia to remain in their own homes in the community. Therefore this will provide a very real community based alternative for many older people to residential care. This subsequently will make a significant contribution to the council's Fairer Future commitment to protect the most vulnerable.

### **The Importance of the designed environment for people living with dementia**

24. There is extensive academic research from institutions such as The Kings Fund and Stirling University<sup>3</sup> that the designed environment can have a significantly

---

<sup>3</sup> <http://www.kingsfund.org.uk/projects/enhancing-healing-environment/ehe-design-dementia> and other institutions such as Stirling University <http://dementia.stir.ac.uk/>

positive impact upon the care and support of people living with dementia. These academic institutes as well as the Department of Health have been providing guidance in relation to best practice principles to the design and layout of environments for people living with the condition. Both the Centre of Excellence and the extra-care scheme will be designed specifically for the needs of people living with dementia and will assist the borough in being more dementia friendly.

25. This guidance has been applied to the plans for Cator Street, and concluded that the building provides an excellent setting within which to incorporate very best practice dementia design principles. The literature research also found that there are few examples where dementia design has been fully incorporated within a day centre setting. There is therefore an opportunity for the council to develop a cutting edge specialist dementia aware designed facility that is likely to attract interest from other local authorities, health and other parties working within the field of dementia.
26. The council has already sought the views of the Kings Fund on the proposal, and if the decision is made to locate at Cator Street, Stirling University will be commissioned to provide additional input on the development of the final detailed plans. This specialist external input will consolidate that already obtained locally from the Alzheimer's Society/ SLAM, family, staff and other valued partners.

#### **The location of Cator Street**

27. The engagement also included an ongoing dialogue and assessment as to the suitability of the location at Cator Street. Meetings of the Design Consultation Group were held at Cator Street, allowing the members to favourably familiarise themselves, not just with the building, but also the general locality.
28. Unlike either of the current buildings, Cator Street is situated in the centre of the borough, which means that it is better placed to accommodate service users from the whole of Southwark. The council will continue to ensure door to door transport for service users those who need it, but the more central location will mean that there is potential to provide transport in a way that is more flexible and personalised. The council also notes that there are regular bus stops near by to allow carers and staff to easily attend the centre
29. Locating the Centre of Excellence at Cator Street also provides additional opportunities for it to work in partnership with the planned extra care development next door. For example one of the main aspirations identified through the prior consultation and from the subsequent engagement with the Design Consultation Group and service users was for the Centre of Excellence to cook freshly prepared food on site. It is thought that the kitchen at the proposed centre would provide an excellent opportunity for a local small business or social enterprise, to run a financially viable business providing hot healthy meals to both the extra care scheme and the Centre of Excellence.
30. Factors in relation to public transport to Cator Street were also considered with the Design Consultation Group and are explored in more detail under the community impact section below. However in the round, the engagement concluded that the overall benefits offered by the location of the service at Cator Street and council's ongoing commitment to ensure that there would be

transport available, and the regularity of local bus services available for carers and staff outstripped any issues raised in relation to current public transport arrangements to Cator Street.

### **Details of the works**

31. The council also notes that the works to remodel the ground floor will be extensive and lead to the loss of the existing training/meeting spaces and professional development accommodation which is used by teachers for teacher-training. It is therefore proposed to alter the current layout of the first floor in order to provide spaces for the identified training and meeting accommodation that had previously run on the ground floor. The second (top floor) will remain a flexible office space as it is now.
32. Entrances to the Centre of Excellence and the upper floors of the building will be totally separate with appropriate security controls in place. It is proposed to enlarge the existing first-floor reception to include a bigger desk for the management of large numbers coming to the large events on the first floor, and a waiting area. Otherwise all other workplaces are assumed to be in the open plan workplaces on the second floor.
33. Whilst the major refurbishment work takes place, the opportunity will also be taken to improve the fabric of the building in order to extend its current life. This will include roof renewal works, glazing replacement and works to the building services including possible lift replacement.

### **Policy implications**

34. This decision will help deliver key pledges in the Southwark Council Plan “A Fairer Future for All, including; “The council will create a fairer future for all in Southwark by: protecting the most vulnerable; looking after every penny as if it was our own; working with local people, communities and businesses to innovate, improve and transform public services; and standing up for everyone’s rights”.<sup>4</sup>
35. The Council Plan also contains 11 key targets for adult care in support of this pledge, and this decision will assist the delivery of the transformation of day services to allow a more personalised and outcome focused approach
36. The Centre of Excellence is also shaped by the Future Vision for Social Care agreed by the cabinet in April 2011 and the subsequent Adult Social Care Business Plan 2013-14. Both place a high emphasis upon the modernisation of day opportunities and the important part this plays in meeting the aspiration of older people to live as independent and fulfilling lives as possible within the community, and supporting older people’s aspirations to wherever possible avoid unnecessary admission to care homes or other institutional settings.
37. The Centre of Excellence will assist in the promotion of good physical and mental health and well being for its users and their carers, which will support Priority 3 of the Health and Well Being Board: Improving the experience and outcomes for our most vulnerable residents and enabling them to live more independent lives

---

<sup>4</sup> Southwark Council Plan 2011-14)



38. The National Dementia Strategy as updated in 2011, and the local delivery plan drawn up in partnership with the local NHS, places a great deal of emphasis on adopting a holistic approach to the care of older adults with dementia. This will be the core feature of the proposed Centre of Excellence. The council has also recently become a signatory of the Dementia Challenge Compact<sup>5</sup>, which sets out an organisation's commitment to supporting the local delivery of the National Dementia Strategy.
39. The council also formally agreed by Individual Decision Making powers in May 2012, to participate in the Southwark and Lambeth Integrated Care Programme (SLIC) which has an objective to transform care services for older people across Southwark and Lambeth. This programme has a large number of work streams and objectives aimed at reducing unnecessary hospital and residential care admissions across the two boroughs. One of these is to improve the quality of integrated care and support in the community for older people living with dementia. The SLIC work stream on dementia, comprising key senior partners across health, SLAM, social care and the voluntary sector has recently started work and the vision for the proposed Centre of Excellence has been endorsed by this group. A number of these groups are also part of the Design Consultation Group and the SLIC dementia work stream leads will be further involved in the development of the service model and there are new opportunities for effective joint working with our key partners in relation to improving the dementia care pathway and the role of day services in this.

### **Community impact statement**

40. The decision taken by the December Cabinet to endorse the vision for the Centre of Excellence, were subject to a full Community Impact Assessment (CIA). This considered any disproportional impact likely to arise from this decision in relation to the following areas covered by the council equality agenda: Race, Gender, Age, Disability, Faith and Religion, Sexuality, Gender re assignment, Marriage and Civil Partnership and finally Child Care and Pregnancy.
41. This assessment concluded that it would be older people, who are likely to be disabled as a result of dementia or other forms of mental or physical ill health as being the primary group affected by the council's decision. It recognised that women, who may also have child care and work responsibilities, are disproportionately the carers of people living with dementia. It also identified that the impact of the decision on these sections of the community would be positive.
42. The original CIA has subsequently been reviewed in the light of the proposed approval of the location at Cator Street, the outcome of the engagement and an assessment of any changes to the profile of people using the current centres since December 2012.
43. This re assessment noted that the current profile of the users in relation to the areas covered by the council's equality scheme is not significantly different. The age profile remains primarily the "very old" (80+) and all users are either physically or mentally disabled.

---

<sup>5</sup> <http://www.ecca.org.uk/article/prime-ministers-challenge-on-dementia-list-of-signatories/>

44. In relation to gender, 64% of users are women, which reflects the age profile of the “very old” population of the borough, and the fact that women’s life expectancy is generally higher, and is also longer in Southwark than national averages<sup>6</sup>.
45. As was the situation in December 2012, Older people from BME communities remain over represented at the centre, accounting for 31% of service users, compared to making up only 19% of the older population in Southwark (2011 census). Both the number and proportion of BME older people using the current centres has increased since the original CIA was made. This increase is set in the context of a growing older BME population who may experience health and economic inequalities as well as higher rates of diabetes and stroke amongst the African Caribbean population, and emerging evidence that appears to be making a link between these factors and risk of the development of dementia.
46. Women tend to remain over represented amongst the carers and family members, often coming from an extended family network (partners, daughters, granddaughters, daughter in laws, paid and unpaid carers and neighbours etc) However it should be noted that a number of male carers have also attended one or more of the Design Consultation Group meetings, and they represent a distinct cohort of carers who often appear particularly isolated. There is scope for the future centre to consider how best to support this group of carers.
47. The council also notes that there is more scope at Cator Street than in either of the current buildings for individuals to have support more appropriate to their specific requirements, or time to be alone and quiet. The Cator Street building will contain seven multi purpose activity/ seating areas, garden space and significantly more capacity for smaller groups of service users to have their own space to socialise or partake in targeted activities. This means for example, that those who may have a higher degree of mental capacity could undertake different activities more suited to their needs. There would also be space for targeted activities for specific characteristic groups, for example reminiscence sessions for older people of distinct ethnicity, sexuality or race. This means that there is considerable scope to increase the number of people who are living with dementia and their carers who can attend Cator Street per day than at the existing centres.
48. The council is committed to ensuring there is door-to-door transport for service users. Analysis of users of Southwark Park Road and Fred Francis showed that people’s journeys would increase by less than half a mile on average, compared to their journeys to their current day centres. There are reasonable public transport options available for staff, carers and others who may attend in the future for support, information sessions etc: there are bus stops on both Southampton Way and Peckham Hill Street which are both approximately 150 - 200 meters away, and all street access is on the level. These bus routes also lead to other bus routes and tube and rail stations.
49. The new centre and will allow services to be much more tailored to the individual needs of people using the centre.
50. There were not any other significant issues identified in relation to the other

---

<sup>6</sup> Joint Strategic Needs Analysis 2012.

characteristic groups under the council's equality scheme.

51. The council therefore concludes that the impact of the decision to locate the Centre of Excellence at Cator Street will have a positive impact upon older people, women, older people from BME communities and those living with a disability. The impact upon the other characteristic groups is considered to be neutral.

### **Resource implications**

52. The works for the Centre of Excellence should be carried out at the same time as the building refurbishment works to avoid any unnecessarily prolonged disruption to the provision of services at Cator Street and to benefit from contact efficiencies.

### **Financial implications**

53. In the 2012/13 Capital Refresh the planning for a Centre of Excellence was identified and £2m was set aside. This figure was allocated following the initial high level scoping of the feasibility of the building to accommodate the Centre of Excellence. The outline scope of works were determined in the Future Vision for a Centre of Excellence and have since taken into account the detailed design features identified through extensive consultation undertaken with families and staff after the Cabinet report in December 2012. The revised cost of the detailed designs for the Centre of Excellence is £2.5m.
54. The additional £0.5m requirement can be met from existing unallocated resources within the adult health and social care budgets made available as a result of efficiencies the council managed to achieve elsewhere in its adult Social Care capital programme.
55. The cost of running the new Centre of Excellence would be met from existing resources currently allocated for the Southwark Park Road and Fred Francis centres.
56. Whilst there is pressure on council resources and council savings have been identified, contribution from health partners means there is no overall reduction in funding for the service and the operational efficiencies at the new Centre of Excellence will mean the same budget will be able to provide more enhanced services and make better use of capital assets through more extensive use of the building.

### **Staffing issues**

57. There are no job losses as a result of this decision now being taken to locate at Cator Street, nor any requirement for the council to make reductions to the overall revenue budget, as a result of the NHS financially supporting the current service and new service model. Once design of the new service model is completed, changes to staffing arrangements, may be required to meet the aspirations of enhanced provision and extended opening hours.
58. Staff will continue to be engaged in the development of the new service model for the Centre of Excellence, and dependent upon the outcome of this engagement and the final service model adopted, there may be subsequent

staffing issues for the council to consider. These could be in relation to issues such as changes to roles and responsibilities, job descriptions, the need to further develop skills and competencies amongst the staff group, changes to shift patterns, mode of providing transport, and the need for good communication and support with change management etc. These decisions will be subject to the council's decision making procedures and HR policies and procedures and with the full engagement of staff.

**Legal issues**

59. Please see legal concurrent below

**Consultation**

60. The plans that are now being proposed for Cator Street have been strongly influenced by a Design Consultation Group and other forms of engagement with family members and other relevant stakeholders. A summary of how these further plans have been influenced from the original feasibility study for Cator Street is summarised below

**Areas where the engagement has influenced the plans**

| <b>Original design feature</b>                      | <b>Influence as a result of engagement</b>   |
|---|--|
| Garden space  | Garden planned with safe self contained space for both sensory and therapeutic vegetable/flower growing, pathways, a shed, an outside WC and comfortable seating areas. The original feasibility study suggested shared garden space with the extra care next door, but this was considered not suitable given the varying needs of users. A fully functioning garden and the therapeutic opportunities it provides have been a significant addition highlighted through the engagement process. |
| Safe space for those who wander both inside and out | The plans include a covered external walkway for those who wander, to do so safely and in the dry. Internally there is also a "loop" for those who may wander safely whilst inside the centre. This potentially has a beneficial impact on managing behaviors that challenge services.   |
| Increased number of multi purpose activity rooms    | There was a shift in emphasis through the development of the brief through the engagement and expert input to provide "activity" spaces rather than simple static "lounge" type spaces. Originally it was planned to have a small number of quite large activity/dining rooms. This has changed to a larger number of multi purpose activity rooms/lounges, that can both accommodate activities or groups for 10-15, or be opened up for larger space as required.                              |
| Dining room   | The dining room design has been developed to avoid an overly institutional feel and extended to a summer room at the front of the centre, whilst retaining capacity for 50-60 dinners at one time.   |
| Cloakrooms and lobby                                | This been moved to avoid too much confusion for people as they enter the building.   |

|   |  |
|---|--|
| Toilets                                   | The numbers of accessible WCs in the service user area was increased from 8 to 10. In addition to these, the engagement demonstrated the need for toilet facilities to be made available in the garden for those service users who may have continence issues or who need visual prompts to remind them to use the toilet. |
| Designated entry and parking              | The entrance to the centre will be self contained and containing sufficient secure off street parking for up to ten transport ambulances plus a number of parking spaces for visiting professionals (le NHS Community Mental Health Team etc)  |
| Smoking facilities                        | Provision will be made for smokers to do so in a safe and dry external space, separate from the public garden space. service users will continue to be supported with smoking cessation and reduction by both staff at the centre and through partnership with public health and the NHS.                                  |
| Therapeutic Kitchen                       | This has been moved away from an open communal area to one of the activity rooms.  |
| Separate Hairdressing and treatment rooms | These spaces are separated out and not co-located in the proposed plans, given the anticipated demand for hairdressing   |
| Kitchen                                   | The kitchen has been developed to ensure that they are sufficiently designed to make them a viable prospect for a social enterprise to run a viable self sustaining business from the kitchen (Potentially also providing freshly made hot meals for the proposed extra care unit next door)                               |
| Storage space                             | The storage space for equipment, street wheel chairs etc has all increased in response to input from staff.  |
| Heating type                              | Heating will be a combination of under floor and locally controlled wall heating that can be locally controlled to accommodate micro environment conditions.   |
| Self contained staff space                | Self contained space in which the staff can take a break.  |

61. Visits were arranged for members of the Design Consultation Group to other NHS and social care establishments that had been purpose built or retro fitted design features specifically for people living with dementia, in order to help these representatives to picture what good looks like. Similarly the Design Consultation Group suggested, and in some cases facilitated, the architect team to visit other buildings, to assess different aspects of design that had been incorporated into these establishments.
62. Initially the council appointed architect team held three meetings with the Design Consultation Group prior to developing the second set of feasibility plans. These first set of meetings were to ensure that the plans for the building incorporated the aspirations of the group and reflected the reality of supporting people who may have advanced levels of dementia. The views of the full membership of the Older People's Partnership Board were also sought at this stage. The architect team also visited and spoke to other establishments providing support to people living with dementia to obtain views of what design features have been most helpful.
63. There were then two further meetings where plans were presented to the

Design Consultation Group, where members could comment on the plans with the architect team making further amendments as required.

64. Due to the limited mental capacity of the users of the centres, their needs were represented primarily by family members and staff. However officers also undertook informal one to one meetings with six users who were assessed to have capacity to engage, to seek their views on what they valued currently, what any gaps may be, what they would want to see in a new centre, and how well the proposed plans would meet these needs.
65. Family members (especially for the new cohort of users of the projects) will have the opportunity to look at the Cator Street plans at both centres, with two further meetings being planned in September, following the end of the summer holiday period.
66. Details and plans of the proposed refurbishment works together with developments to the building were also submitted to the Head Teachers Council, to ensure that the future layout of the first floor at Cator Street will meet their needs.

## **SUPPLEMENTARY ADVICE FROM OTHER OFFICERS**

### **Director of Legal Services**

67. The report seeks the approval of the Cabinet Member for Health and Adult Social Care and Equalities of the site at Cator Street as the preferred location for the development of a centre for excellence for older adults with dementia and complex needs.
68. The background to this report is that a formal consultation was undertaken in respect of a future vision for services in 2012. The responses to this consultation were presented to Cabinet in December 2012. The decision of the Cabinet was as follows:
  - That the vision for a centre of excellence as set out in the report be agreed.
  - That there is further consultation with families and key stakeholders on the preferred option of Cator Street as the location for the centre.
  - That the positive outcome of the consultation exercise on vision and services and the opportunity that now arises for the council to work with families and carers as well as the NHS and Community Partners to transform the way day opportunities for older people living with dementia are provided and the support that is available to their carers be noted.
  - That officers will now establish a working group comprising representatives from families/carers, the NHS and other key stakeholder to take forward the vision for the centre of excellence, shape the proposed model of care and work jointly with corporate property in the design and procurement of the centre.
  - That an information report is submitted to cabinet in 6 months to outline progress.
69. The Decision of the Leader of the Council was as follows:
  - That authority is delegated to the cabinet member for health and adult

social care to determine the most appropriate future service model and the decision regarding the location of the centre.

- This report records that there has been engagement on the suitability of Cator Street and the development of plans for this location with families of service users, carers and other stakeholders. For consultation to be effective there are four requirements;
  - The consultation must be conducted when proposals are at a formative stage.
  - The decision maker must give sufficient reasons for its proposals to permit intelligent consideration and response.
  - adequate time must be given for consideration and response and
  - The product of consultation must be conscientiously taken into account before making the relevant decision.
70. Each of these elements must be considered separately, evidenced and documented. The report refers to the establishment in March 2013 of a Design Consultation Group involving families and a range of stakeholders. The make up of this group is described at paragraph 12 of the report. Details of the means and outcome of the engagement are summarised in the report at paragraphs 59 - 65 and considered further in the community impact statement. Paragraph 30 notes that factors in relation to the availability of public transport to Cator Street were considered with the Design Consultation Group.
71. The report identifies that the Vision for the Centre endorsed by the Cabinet was subject to a full Community Impact Assessment (CIA) and that this has been reviewed in light of the outcome of the further consultation and proposed approval of the Cator Street location. This is important because when exercising its powers the council must have due regard to its equalities duties as set out in the Equalities Act 2010 and specifically the need to:
- Eliminate discrimination, harassment, victimisation or other prohibited conduct
  - Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not
  - Foster good relations between those who share a relevant characteristic and those that do not.
72. The outcome of the Community Impact Assessment is summarised at paragraphs 40 – 50 of the report. It identifies the means by which the negative impact of limited public transport at Cator Street can be mitigated. It concludes that the decision to locate the Centre at Cator Street will have a positive impact upon older people, women, older people from BME communities and those living with a disability. The impact on other groups is considered to be neutral.'

### **Strategic Director of Finance and Corporate Services**

73. This report seeks approval from the cabinet member for health, adult social care and equalities to designate Cator Street as the preferred location for the development of the Centre of Excellence. This figure was allocated following the initial high level scoping of the feasibility of the building to accommodate the Centre of Excellence.
74. The strategic director of finance and corporate services notes the financial implications detailed in paragraphs 52 to 55 of this report. Costs will be

contained within the capital and departmental budgets and any variations reported through the capital programme monitoring reports made available as a result of efficiencies the council managed to achieve Elsewhere in its adult Social Care capital programme

75. Any staffing and other resource costs connected with this recommendation will be contained within existing departmental budgets.

## BACKGROUND DOCUMENTS

| Background Papers | Held At | Contact |
|-------------------|---------|---------|
| None              |         |         |

## APPENDICES

| No.        | Title                                    |
|------------|--|
| Appendix 1 | Future Vision for a Centre of Excellence |
| Appendix 2 | Summary of Initial Consultation          |

## AUDIT TRAIL

|   |   |                          |
|---|---|--------------------------|
| <b>Lead Officer</b>   | Sarah McClinton, Director Adult Social Care |                          |
| <b>Report Author</b>  | Andy Loxton, Lead Commissioning Manager     |                          |
| <b>Version</b>  | Final                                       |                          |
| <b>Dated</b>  | 21 August 2013                              |                          |
| <b>Key Decision?</b>  | Yes   |                          |
| <b>CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER</b> |   |                          |
| <b>Officer Title</b>  | <b>Comments Sought</b>                      | <b>Comments Included</b> |
| Director of Legal Services  | Yes   | Yes                      |
| Strategic Director of Finance and Corporate Services                    | Yes   | Yes                      |
| Chief Executive   | Yes   | Yes                      |
| <b>Cabinet Member</b>   | Yes   | Yes                      |
| <b>Date final report sent to Constitutional Team</b>                    |   | 21 August 2013           |