# TOTAL TRANSPORT – CHANGING DAY CENTRE SESSION TIMES

To:	General Purposes Committee			
Meeting Date:	29 November 2016			
From:	Graham Hughes, Executive Director (Economy, Transport and Environment)			
Electoral division(s):	<ul> <li>Those divisions substantially affected by the proposal are: <ul> <li>Ely North &amp; East</li> <li>Ely South &amp; West</li> <li>Haddenham</li> <li>Littleport</li> <li>Soham &amp; Fordham villages</li> <li>Sutton</li> </ul> </li> <li>In addition a small number of individual residents of the following divisions may be affected, as all transport to day centres in Ely would be affected and some users reside outside of the Total Transport pilot area.</li> <li>Chatteris</li> <li>Forty Foot</li> <li>March West</li> <li>Woodditton</li> </ul>			
Forward Plan ref:	Not applicable Key decision: No			
Purpose:	This report sets out the results of the engagement and analysis work undertaken following the Committee meeting on 26 July 2016. The question posed was whether there would be a net benefit to changing day centre times in the Total Transport pilot area in order to allow integration with special educational needs transport.			
Recommendation:	This Committee is recommended to:			
	<ul> <li>maintain existing day centre times, accepting that the potential costs involved in changing times would outweigh the benefits.</li> </ul>			

 note the alternative approach of considering the Flexible Minibus Service as an enabler for residents, helping them maintain their independence and to access community-based solutions.

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# 1 BACKGROUND

- 1.1 Total Transport is a national initiative that looks to use resources more efficiently, by integrating different types of transport. The County Council has been exploring this opportunity in a pilot area within East Cambridgeshire.
- 1.2 General Purposes Committee (GPC) considered a range of Total Transport proposals on 26 July 2016. The Committee agreed to two phases of implementation: the first, from September 2016, involved a full review of mainstream school bus services and some integration with local bus routes; the second, from January 2017, will involve the setting up of a new Flexible Minibus Service to replace existing day centre transport, weekly bus routes, and dial-a-ride.
- 1.3 It was identified that school transport for pupils with special educational needs and disabilities (SEND) could also be provided by the Flexible Minibus Service and that this would offer financial savings, but that it would also require changes to the session times at Bedford House and Larkfield day centres in Ely, and at The Café (co-located with Larkfield at Ely Community Centre). The original Total Transport consultation had indicated that a number of users would find such a change difficult.
- 1.4 GPC therefore required a further report on the likely impact, costs and savings associated with such a change. This was to be presented to both Adults and Children & Young People Committees for information and discussion, before being returned to GPC on 29 November 2016.

# 2 MAIN ISSUES

# Engagement Process

- 2.1 A public consultation was undertaken in the spring of 2016, inviting views on all of the changes that were being considered as part of Total Transport. The number of responses from individuals who identified themselves as adult social care users (or their carers) was small, however the content indicated that significant challenges would be created by a change to day centre times.
- 2.2 Following the instruction by GPC on 26 July 2016, the Service Director: Adult Social Care delegated the Operations Manager: East Cambridgeshire to spend one day a week undertaking a more detailed consultation with service users at the day centres affected by the proposal. This time commitment was funded by the Total Transport grant.
- 2.3 Approaches were made to: staff at Bedford House, Larkfield and The Café; social care teams, both for learning disabilities and older people; service users at all of the locations; and organisations within the private, voluntary and independent sectors which provide support for these users.
- 2.4 A particular effort was made to ensure that all users were able to share their views. If there was no initial response to the survey forms that were distributed, individual phone calls were made. This approach was also used where the written replies indicated that more detailed discussion was needed; this has allowed the inclusion of a number of case studies.

### Outcome of Engagement Process

- 2.5 A number of general issues were raised, both by individual users and by those providing support to clients. These are considered in points 2.10 to 2.15 below.
- 2.6 Individual replies were received from 18 service users (or their carers) at Larkfield, 21 at Bedford House, and four at The Café. This represents a total of 43 out of a possible 68 users, giving a response rate of 63%.
- 2.7 Users were asked to reply to the following questions;
  - Would this change affect the user's ability to attend the day centre?
  - Would this change cause problems for family or carers?
  - Would this change cause any extra expense?
  - Would this change have any other impact?

The full responses (word for word, i.e. including any inconsistencies or uncertainties) are included in **Appendix A**. Points 2.8 and 2.9 below, along with the general sections from 2.10 to 2.15, summarise the views expressed.

- 2.8 There were 11 respondents from Larkfield who confirmed that the proposed change would not affect their ability to attend. The equivalent figure at Bedford House was 20, with three at The Café. This means that 79% of users who responded (and 50% of all users) would still be able to attend the centres even if times were changed. It should be noted that the views varied across the centres from 95% acceptance at Bedford House to 61% at Larkfield.
- 2.9 There were three respondents who provided detail about the specific issues that would be caused by the proposed changes to day centre times. The Operations Manager: East Cambridgeshire has written two of these up as individual case studies; these are included as Appendix B (the wording has been agreed with the users). In the first of these cases, the individual concerned already only spends 3 hours at Larkfield, due to the need to return home at midday for gastrostomy peg tube feeding, medication and rest; the changes would reduce her social interaction time (and her family's respite time) to two hours. In the second case, the user's primary carer would no longer be able to continue in her paid work, due to the shift times involved.

### **General Themes**

- 2.10 The emotional impact of changing established **routines** was highlighted in three of the responses. One carer considered that it would be "distressing". There was also feedback from staff which indicated that changes to routine may destabilise users for a period of time and result in behavioural challenges, although this would be expected to settle down again once a new routine is established.
- 2.11 **Arriving home in the dark** was cited in three responses as a potential problem. Based on sunset times and a drop-off at 6pm rather than 5pm, a user might arrive home in the dark for an additional five to six weeks a year, if times were to be changed.
- 2.12 One response referred to **rush hour traffic** and the consequent impact on journey times. This was also mentioned in feedback from staff. There is

some possible mitigation if routes can be shortened by more efficient scheduling or the use of more vehicles (which could still be cost effective, if each had previously operated a school journey), but a longer journey would indeed be likely with a 5pm finishing time.

- 2.13 There were six responses explaining the impact on **family members or others in the household**. These included one person whose mother would be unable to continue working, and one who would lose their respite from caring (on the basis that their partner would not be able to attend if times change). Two of the respondents were positive about the change.
- 2.14 However, six responses referred to the timing of **medication**, with three suggesting that adjustments would be possible, and two users for whom it was specifically mentioned as not being a problem. The remaining response did highlight significant issues, which are covered within the case studies in **Appendix B**.
- 2.15 There were five comments relating to the **length of day**. One of these is contained within the case studies in Appendix B (the user would see their hours reduced due to medication / feeding issues), and a second considered that the later finish time would make it impossible for the user to continue attending. The remaining three responses were all positive about the change.

### Additional Costs Incurred

- 2.16 The current day care provision at Bedford House is from 10am to 3pm; this allows time for social interaction and personal care either side of lunch. The return journey would need to move to 5pm, however it is unlikely that a start time of 12.00 noon would be operationally possible or acceptable to users (it would remove any morning respite, for example). It is therefore likely that additional **staffing costs** would be incurred, due to longer shifts (e.g. 10am to 5pm). Based on current ratios and hourly rates, including approximate add-ons, the annual cost for each extended hour would be £15k; increasing to the full 10am to 5pm would therefore incur an extra £30k per year in staff costs.
- 2.17 Given that a departure time of 5pm would result in some users not returning home until 6pm or later, it would be necessary to provide **food** prior to the end of the day centre session. This would not need to be a full meal, and the unit cost would be relatively low, however this requirement should be noted.
- 2.18 As identified in 2.9 above, a small number of respondents identified significant issues in changing times. These users are all supported in family settings at present, and whilst there was no clear statement that this would cease to be possible, it should be noted that supporting family units is a Council priority. This reflects both the benefit it offers to the individual, and the fact that **residential care** incurs a high cost for the Council. A headline figure would put such care for any these three individuals at over £100k per annum, which is more than the maximum potential saving from changing times.

### Potential Saving

2.19 The main saving which could be secured by changing day centre times to allow integration with SEND transport is the reduced need for separate

vehicles at school times. A new procurement process for services from 2017 is being undertaken, and this will provide exact figures to work from. As a guideline, however, each SEND route to be replaced would be expected to cost between £20k and £30k per year. The proposed Flexible Minibus Service could cover up to three routes, offering a saving of £60k to £90k.

2.20 Taking into account the costs and savings referred to in 2.16 and 2.19 above, there is a potential net saving of between £30k and £60k. If additional measures were identified to mitigate the impact on certain users, or if residential care were required for one or more individuals currently supported at home, this figure would reduce, and could indeed turn into a net cost.

#### The Wider Perspective

- 2.21 The work undertaken so far has only considered the services within a pilot area (the northern part of East Cambridgeshire). Members have asked for an indication as to whether the same principles of integrating day centre and SEND transport could be applied across the county.
- 2.22 The default expectation is that a similar approach could be followed in any location where day centres and SEND schools exist in close proximity. A particular caveat has to be made with regard to congestion levels, especially within Cambridge itself, but also along the A14 corridor and potentially within Huntingdon. The higher traffic volumes in these areas compared with the northern part of East Cambridgeshire could undermine reliability and/or exacerbate issues such as long journeys and arrivals home in the dark.
- 2.23 The first phase of the Total Transport pilot was introduced in September 2016; this focused on mainstream school transport. The initial evaluation has shown that the savings target of 10% was exceeded, however it should be noted that we are only around a fifth of the way through the year. There is potential for savings to be eaten into during the coming months, for example due to more pupils travelling as the weather gets worse.
- 2.24 Whilst noting the caveat in point 2.23 above, the indication is that there is scope for further savings if the approach used in phase 1 of the Total Transport pilot were to be rolled out. Given that the impact on service users was relatively low, and that resource for implementing significant change across different areas is limited, this may present a better opportunity for achieving savings whilst minimising the impact on service users.

### Maintaining Current Timings

- 2.25 If changes to day centre timings were not progressed as a part of Total Transport at this point, the Flexible Minibus Service would still be introduced from January 2017. Its focus would be on securing the best use of a known resource – in addition to providing existing trips to day centres, the new scheduling software purchased with the Total Transport grant would allow other journeys to be included where possible, in some cases replacing taxi provision. Over a period of six to twelve months a much more comprehensive picture of transport demand within adult social care, and possible efficiencies, would be built up.
- 2.26 Transport is repeatedly raised as a barrier to accessing services. Given the focus on preventative and community based interventions, establishing a service that allows users to request specific journeys would potentially

increase the opportunities for residents to maintain their independence and reduce the time spent by social workers and carers in trying to secure transport.

2.27 The current model of day centre sessions is relatively inflexible; for example, half day sessions are often not possible due to transport restrictions. There may also be opportunities for activities at different times (early morning or evening, for example). Even if current timings were officially maintained, future changes to timings would be possible where this added to the offer made to users. This would be a service-led change, however, rather than one imposed in order to achieve transport efficiencies, and it would have scope to include earlier as well as later times.

### Proposed Approach

- 2.28 Given the views contributed by staff, social workers, service users and carers, it is proposed that the Flexible Minibus Service is introduced with four vehicles primarily delivering day centre transport at the current timings, and also covering existing dial-a-ride and weekly bus routes. It is envisaged that one school route would be provided by the core fleet of minibuses, but that the remaining journeys to Highfield would be delivered through separate contracts.
- 2.29 This means that there would be no requirement to change day centre times.
- 2.30 The Flexible Minibus Service would be implemented with a view to providing as many journeys as possible within the defined resource, and to actively supporting residents (particularly those vulnerable groups) in accessing whatever services they require. This represents a change in approach from strict "gate-keeping" to one of enabling users through flexible provision.
- 2.31 The Total Transport Member Steering Group discussed this proposed approach at its meeting of 5 October 2016, and agreed that it represented a sensible way forward. The Total Transport Programme Board (comprising the relevant Service Directors) considered the draft report on 21 October 2016, and similarly agreed with the proposed approach. Both Adults and Children & Young People Committees considered the above content at their November meetings, and endorsed the recommendation not to change times.

# 3 ALIGNMENT WITH CORPORATE PRIORITIES

# 3.1 Developing the local economy for the benefit of all

There are no significant implications for this priority.

# 3.2 Helping people live healthy and independent lives

The report above sets out the implications for this priority in 2.25 and 2.26.

### 3.3 Supporting and protecting vulnerable people

The following bullet points set out details of implications identified by officers:

• In deciding not to change day centre times, service users (many of whom are vulnerable people) would not be subject to a change that they may find distressing and which may reduce their ability to access

services.

 In providing a safe, easy to access transport service through the Flexible Minibus Service, the County Council would provide a suitable method of transport for vulnerable people in the pilot area.

### 4 SIGNIFICANT IMPLICATIONS

### 4.1 **Resource Implications**

- A decision not to change day centre times will remove a potential saving, that could otherwise have been targeted by integrating adult social care and special educational needs transport in the pilot area.
  - If this is the decision, the Flexible Minibus Service would instead be seen as a tool for supporting long-term cost avoidance in the wider social care budget, rather than as an opportunity for immediate savings.
  - Conversely, a decision to change day centre times would generate a transport saving, but could incur greater cost to other Council budgets, particularly if it leads to the breakdown of established family care arrangements.

### 4.2 Statutory, Risk and Legal Implications

• There are no significant implications within this category, if a decision is taken not to change day centre times.

### 4.3 Equality and Diversity Implications

- 4.3.1 The following bullet points set out details of significant implications identified by officers:
  - The provision of a Flexible Minibus Service that is able to accommodate existing users within their current arrangements (i.e. journeys to day centres without changes to times) would maintain access to services and would indeed have a positive impact on equality and diversity through improving choice.

### 4.4 Engagement and Communication Implications

4.4.1 The report above sets out details of significant implications in points 2.1 to 2.4 (process) and 2.5 to 2.15 (views expressed).

### 4.5 Localism and Local Member Involvement

4.5.1 The introduction of a flexible minibus service would allow for more local options to meet the needs of people in a given locality. Local Members could assist in the promotion of the changes by explaining how the new service would operate and the potential benefits for local people.

### 4.6 Public Health

4.6.1 The report above sets out details of significant implications in points 2.25 and 2.26, and in the feedback documented in the appendices.

Implications	Officer Clearance
Have the resource implications been	Yes
cleared by Finance?	Tom Kelly
Has the impact on Statutory, Legal and	The draft report was sent to Lynne
Risk implications been cleared by LGSS	Owen on 11 October
Law?	
Are there any Equality and Diversity	Yes – See 4.3.1
implications?	Claire Bruin – Adults Section only
Have any engagement and	Yes
communication implications been cleared	Simon Cobby
by Communications?	
Are there any Localism and Local	Yes
Member involvement issues?	Claire Bruin – Adults Section only
Have any Public Health implications been	Yes
cleared by Public Health	lain Green

Source Documents	Location
General Purposes Committee – 26 January 2016 Adults Policy and Service Committee –3 November 2016 Children and Young People Policy and Service Committee – 8 November 2016	https://cmis.cambridge hire.gov.uk/ccc_live/Co mmittees.aspx

Ref	Would this change affect the user's ability to attend the day centre?	Would this change cause problems for family or carers?	<i>Would this change cause any extra expense?</i>	Would this change have any other impact?
1	"The way you judge a society is how it treates its disabled and vulnerable people" This would be putting them to the back of the queue. I would say that every other service user at larkfield would be badly effected by the change of times. They are all set in routines of getting up, being at larkfield for nine. Keeping people hanging around causes great anxiety. Ie effects the carers who come in. One lady has to be on her bed at home by one this will shorten her lovely social time she has at larkefield. Morning sessions would be really short taking time from the outside sessions such as pony carting, gowing to town. People would be going home in the dark in Winter. Please do not do this to our service users.			
2	no	no	no	no
3	16 miles from Larkfield means long journey currently finishing at 5pm. Later finish would mean sitting in rush hour traffic and not being home until after 6pm	new times would impact on mum working for Age UK, breakfast etc	Mum could not continue working,= drop in household income	as a household of early risers a later start would be unbearable, why change something that has worked fine for more than 20 years.
4	yes as xxx goes onto her bed and feeding pump at lunchtime so this woul give her harly anytime at the daycentre. This is her only time away from home with her friends so only having two hours away is so unfair as she really loves going.	xxx is up very early so waiting around until 1030 will be impossible. She has to have her medication at lunchtime	I as xxx's mother get the mornings (when xxx is well enough to attend) to do all the things that people have all day to do, but having only two hours will restrict most things, such as shopping, hospital trips and doctors for me as she is not well enough to stay any I9onger.	This change of time will be awful for xxx and me. Se is severly disabled, cannot stay in her chair for long and has to go on her bed to be attached to her pump at lunchtime. Her quality of life, which she loves going to Larkfields, will be reduced enormously. Please listen to everyone espcially us as I thing this is very unfair. My daughter does not get much in life and to take awy this from her is so sad.
5	no	no	no	no
6	Not to attend	yes xxx's carers come at 7.30 in morning	Yes carers would be affected	very late in returning home and very dark in winter
7	No it wouldn't	no	I would not of thought so	no it wouldn't
8	no	no	no	no
9	no	no	no	no
10		It would affect xxxx time with carers coming as they would be very elarly in the morning and she will have to wait around 2 hours before going to Larkfield	It would affect my time ie going shopping to cambridge woul make me very late as I would not get there untill 11 oclock or later	Mum will have later appointments
11				

12	unable to assess as this would depend on the impact the time changes have on xxxx routine	This may cause issues for xxx as it will be a change in his routine. Routine is very important to him and changes can be distressing. xxxx has had the same routine for may years now. The change will be difficult for him	no	other than the disruption to routine, no
13	no	no	no	no xxx is independent of me, but I will know he will not be home until 5.30
14	no this would be more beneficial	no this would not affect any medications	No xxx has support 24 hours o it would cause problems	It would be a positive change
15	no	no	no	no
16	no it may make it easier. I will get an extra hour in bed in the mornings	no staff can change support hours. CSL will oversee this.	l don't believe so	No not really, I will enjoy being in bed longer
17	Current shift plans would be a problem	Staff shifts currently fit Larkfield times	shifts would need changing	Would confuse my other hose mates
18	no	no	no	no
19	no change	no	no	no
20	no	no	no	no
21	this would be better	no problems	no	no
22	no	no	no	no
23	No	no	no	no
24	no	no	no	no
25	will not affect ability to attend	no major problems created Mum has medication at 5pm but delay would not be a problem	no extra expense	none
26	no	no	no	It would just give me a little extra time to get things done. It would help me a great deal.
27	no	no	not at present	xxx needs to be home by 5.15 because of having tea, tablets and evening care.
28	yes the increase in hours would have an effect on his wellbeing. He gets very tired and the extra 2 hrs would be too much and add to his confusion	No problems as medication is not taken in the new woarking hours	I would have to arrange for a taxi to collect him earlier or ask a relative to collect him, meaning they would have to re-arrange their employment	yes, I would no receive any "respite" from my caring duties.
29	No	no	no	no
30	no	no	no	no
31	I do not think so	My mum currently as a carers call at 4pm - that would need to be rearranged/cancelled	don't think so	
32	no if transport is arranged	no	no	no

33	no	no	no	no
34	No	no	no	no
35	No	no	no	no
36	No extra hours would be a help	no not a problem	no not a problem	positive impact increased hours of respite for my elderly father who is her carer. xxx doesnt currently use the transport, but would like to ask if she could be brought home from now onwards. Dad is finding this very difficult.
37	no the extra time is perfect for my mum	No, medication is given after 7pm and the carers are on site so very flexible	No, no effect at all	No, this would be better for mum
38	no	no	no	no
39	no	carers come in at 3.30 - 4.30 also husband nees feed putting on, if he was to travel after a feed he must take sickness tablet 2 hours before feed	carers would be affected	no
40	yes it would affect xxx's ability to volunteer at the café as at present I take her on my way t5o work and I would not be able to start 1 hour later	no the only effect would be transport	Yes I would have to get a taxi there. xxx already get a taxi on the way home which costs £18.00	It might mean that xxx would not be able to vlunteer. This would be a shame as it has really improved her confidence
41	no currently travels with xxx by bus 12 it is easy now I know the way	travelling home may be difficult in the winter as it gets dark early. The next available bus would be at 4.45	currently all travel is paid as part of my support	I don't think so but not sure
42	no uses public buses - would prefer the 10- 4 opening	wouldn't make any difference	no increase in expenditure	no change
43	no 10-4 is fine	no problem	No	No impact

# APPENDIX B

### Case Study 1:

AD has attended the Larkfield service every weekday morning (Monday – Friday) from 9am – 12 noon for many years . She is 35 years old and lives at home with her mother and father. They value this service and also have some trusted home respite in the form of hours they collect together to go away for a weekend or two a year. When AD was 3 years old she became very ill with Heamoltic Uraemic Syndrome which left her with severely brain damaged. AD does not communicate verbally, she is a quadriplegic who uses a moulded wheelchair to move around. In 1999 AD had a gastrostomy peg tube fitted and can no longer eat or drink due to having problems eating and drinking. AD's complex health needs are significant and she has a DNR in place for the future.

AD's mother brings AD to Larkfield in the morning at 9 and picks her up at 12. She takes her home and puts her on her bed so that she can be fed and medicated through the tube and pump at about 12.30. This whole process takes about 3 to 3 and a half hours. During this time AD rests and Mum stays by her bed. This routine has been altered on occasion, but AD has become agitated so routine is important. We explored the possibility of Larkfield staff carrying out this afternoon peg feeding routine but AD's mother believes that routine is so important to AD's ongoing wellbeing that she wouldn't consider trying to change it again as attempts have been made in the past and these have not been successful. AD's mother also feels that this feeding and medication process needs the peace and quiet of home. If the service were to open early for AD she would be unsettling for AD and she would not be able to achieve the social element of her attendance at Larkfield, which is so important to her.

The proposed change to times will reduce the hours AD will spend with her friends from 3 to 2. This will also reduce these Larkfield respite hours available to this family by a third. AD's mother has expressed her concerns about the impact this change will have for her daughter and her family in this loss of hours.

# Case Study 2:

KC has attended the Larkfield day service every day (Monday to Friday) from 9am until 4 pm for 15 years. KC is 33 years old and lives at home, near Newmarket, with her mother and father. KC is an early riser and will often be awake from 4am. She is picked up from her home on the bus at 7.30am to be at Larkfield at 9am. At the end of the day KC leaves Larkfield at 4 pm and returns home around 5 to 5.30 pm. KC like to travel on the bus a lot and this time spent in travel is not a problem. A mystery virus at 7months old left KC with severe learning disabilities and low muscle tone, she doesn't communicate verbally but understands quite a lot. KC needs full support with all elements of her personnel care and has little to no concept of danger.

KC's mother works for Age UK in the mornings. She attends to the early needs of older people on her round in things like personal care, breakfast and getting dressed etc. This is a paid position and a job the KC's mother enjoys immensely. If TT goes ahead this will mean that KC will not be picked up until about 9.15 and KC's mother starts work at 8.15 am. This will mean that KC's mother will not be able to carry out her current work activity.

KC's mother has expressed her concerns about this change and losing a job that she loves. She asked me to reiterate how important this day service is to the daily lives of families like hers in the community. Families who she believes, like hers would not cope if things were to change too much.