WIRRAL COUNCIL CABINET XXXX

SUBJECT:		Review of Residential Care provision in Learning Disability Services
REPORT OF:		GRAHAM HODKINSON - DIRECTOR OF ADULT SOCIAL SERVICES
RESPONSIBLE HOLDER	PORTFOLIO	COUNCILLOR CHRISTINE JONES

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is:
 - i. To advise Cabinet regarding proposals to work with people who use services, their families and carers to encourage greater independence by offering more flexible and responsive alternatives to permanent residential care.

2. BACKGROUND AND CONTEXT

2.1 Many local authorities have changed services from residential care to supported housing for people with learning disabilities. Much of this change has focussed on achieving wider access to welfare benefits and having a tenancy. The aim of supported living to achieve choice, control and community inclusion has been much less of a focus.

Half of the population of adults with learning disabilities in England live with their families, most of the remainder (33%) live in residential care. Only 15% of adults with learning disabilities have a secure long-term tenancy or their own home. This is in comparison with 70% of the general adult population who own their own home and nearly 30% who rent.

Having a home guarantees a place in the community and is part of how people are accepted as equal citizens. People with learning disabilities are one of the most socially excluded groups in our society and this is primarily a result of an historical segregation of services that unintentionally deny people their own home, choice and control and a decent income; factors which ultimately deny citizenship and social inclusion.

There are many ways that people with learning disabilities can have their own homes, live with people they choose and get the support they need. This paper explores alternative opportunities to residential care; specifically supported living models that not only house and support people, but give people a real place in their community.

Supported living is a concept that was developed as an alternative to institutional care for people with learning disabilities and brought into the UK

by the NDTi1 in the 1990's. The main principles of supported living are that people with learning disabilities own or rent their home and have control over the support they get, who they live with (if anyone) and how they live their lives. Supported living assumes that all people with learning disabilities, regardless of the level or type of disability, are able to make choices about how to live their lives even if the person does not make choices in conventional ways.

Supported living has no legal definition but has a commonly accepted set of principles that are defined in the Reach Standards in Supported Living

The residential care model is legally defined in the Care Standards Act 2000 as an establishment that provides accommodation and personal care which is defined as: 'Assistance with bodily functions such as feeding, bathing, toileting when required' Within the residential care model there is an assumption that an older or disabled person needs care and therefore it provides a full package of housing, care and everyday needs for living on the person's behalf.

We are committed to extending the options of all people with Learning Disabilities to encourage greater independence by offering more flexible and responsive alternatives to permanent residential care.

The Supported Living option is not only more beneficial to individuals and their families and Carers as previously stated but is a more cost effective and sustainable option for the council.

The Council places a high number of people in permanent residential care compared to other Local Authorities. There are currently 195 people with Learning Disabilities placed in Residential Care. Based on the current average cost of residential care and the average cost of supported living it is estimated that reducing the number of residential placements by 20 (a 10% reduction) the Council will realise a saving in the region of £300,000.

4.0 RELEVANT RISKS

4.1 There is a need for close working between the Department of Adult Social Services and the Housing Department in order to identify appropriate and suitable housing options we will the Learning Disability Housing Panel in conjunction with Supporting People team to identify appropriate and suitable housing options for individuals.

5.0 OTHER OPTIONS CONSIDERED

5.1 Continuation or acceleration of the number of people with LD placed in residential care would be detrimental to the individuals, their families and Carers and would not provide a cost effective sustainable solution for the council.

6.0 CONSULTATION

6.1 None required

7.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUP

7.1 None identified.

8.0 LEGAL IMPLICATIONS

8.1 None identified

9.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS

9.1 Staffing resources will need to be identified to undertake a review of existing arrangements.

10.0 EQUALITIES IMPLICATIONS

10.1 Has the potential impact of your proposal(s) been reviewed with regard to equality?

11.0 CARBON REDUCTION IMPLICATIONS

11.1 Proposals to reduce the number of buildings in operation will have a positive impact in terms of carbon reduction.

12.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

12.1 Planning permission is not required.

13.0 RECOMMENDATIONS

13.1 Cabinet is recommended to commit to working with people who use services, their families and carers to encourage greater independence by offering more flexible and responsive alternatives to permanent residential care.

14.0 REASONS FOR RECOMMENDATIONS

14.1 The proposals within this report are seeking to balance the needs of the service user groups identified, to increase choice and control, to redesign services that are out dated and not fit for purpose and contribute to the challenging financial context confronting this Department.

14.2 As indicated this option is seeking to positively balance a range of competing matters recognising the demographic and financial pressures confronting this Department.

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