



**Subject: Remodelling of the Supported Living Offer for people with Learning Disabilities**

**Report to:** Cabinet

**Status:** for publication

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**Cabinet Member:** Councillor Iftikhar Ahmed

**Report of:** Director of Adult Care

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**Comments from Statutory Officers:**

Monitoring Officer: Yes  
Section 151 Officer: Yes

**Key Decision:**

## **1. Purpose of report**

- 1.1 To seek Cabinet approval to remove the proposal to make savings from the remodelling of Supported Living Group Homes from the 2017/18 and 2018/19 savings programme thereby removing the proposal from the decision making process at budget setting Council on 1st March 2017.
- 1.2 To approve the further engagement with stakeholders and service users to provide additional information regarding Supported Living in Rochdale and the advantages and disadvantages of all options under consideration.

## **2. Recommendations**

- 2.2 It is recommended that Cabinet remove the proposal to make savings from the remodelling of Supported Living Group Homes from the 2017/18 and 2018/19 savings programme thereby removing the proposal from the decision making process to finalise a balanced budget at the Council meeting on 1st March 2017.
- 2.3 It is recommended that Cabinet approve the further engagement with stakeholders and service users to provide additional information regarding supported living in Rochdale and the advantages and disadvantages of all options under consideration.

## **3. Reasons For Recommendations**

- 3.1 The original report outlined that financial savings would only be achieved as and when alternative accommodation and care options have been developed, if an alternative option meets the needs of an individual, if the person wishes to move, and following the completion of all relevant assessments including any relating to mental capacity and best interests. Consequently, it is difficult to be definitive about the amount of financial savings that could be realised and when.
- 3.2 During consultation some individuals and families expressed concern that the current group home model of care will be significantly reduced or removed altogether due to

the proposal to make financial savings. This is not, and never was, the intention. The linking of the development of new options to financial savings nevertheless created concerns that this was the plan. These concerns have been reduced through discussion and explanation but nevertheless removing the link between increased choice and cost savings would emphasise that the fundamental reason for developing new options is to increase choice and better meet the needs of individuals.

**3.3** During consultation some stakeholders expressed concern that the proposed new care and accommodation options are only, or primarily, being designed to reduce costs. This is not the case, however removing the savings requirement more clearly shows that the council's intention is to develop alternatives which first and foremost work well for all people and meet the needs of each individual.

**3.4** As outlined in the original proposal, the group home model is an expensive model of care, typically (but not always) requiring 24/7 on site staff supporting small numbers of individuals. During consultation providers have indicated a willingness to work with the council to find alternative ways of reducing costs. For example we will continue to work with providers to address ways of reducing voids, liaising also with other councils who face similar issues.

## **4. Report**

### **4.1 Background**

**4.1.1** Prior to the National Health Service and Community Care Act 1990 a significant number of people with profound and /or multiple learning disabilities lived in large institutions (hospital or nursing/treatment settings). This reform had the effect of people moving into community settings to improve their quality of life and increase their choice and control over their daily life. The supported living group home model was promoted in response to this reform. There are different models of supported living available other than the group home model but in Rochdale Borough there is a significant reliance on the supported living group home model, with many people moving into this type of care many years ago, as well as more recently.

**4.1.2** The supported living group home model typically consists of two to four people with a learning disability sharing a house with each other and having a 24/7 staff team on site to support them. This type of arrangement works well for many people, but not necessarily for everyone.

**4.1.3** Over the years, due to the number of supported living group homes available, it has become the predominant care option. Other councils typically have a wider choice and fewer people supported in this particular model of care.

**4.1.4** The characteristics and needs of people with learning disabilities who require substantial levels of care and support are changing. People with learning disabilities are living longer and as a consequence developing age related conditions such as dementia in addition to their learning disability. For some forms of learning disability there is an increased risk of developing dementia and the condition also develops at an earlier age. Remaining in a small group home with other service users who do not necessarily have similar needs is not always the best option for individuals, or for the people that are living with them.

Some people, especially younger adults, are telling us that they want more independence and privacy than a group home placement provides. In such situations a supported flat or an extra care housing tenancy may be more suitable for them. Currently the availability of these options is limited in our borough.

**4.1.5** Matching service users to live together in a group home can be challenging and sometimes results in under-occupation of the homes. In addition there are occasions where a person's needs can no longer be met in their supported living group home and an alternative is unavoidable. In these situations homes may become under-occupied, known as 'voids'. Care costs for the remaining individuals rise as a result, leading to pressure in the service budget.

**4.1.6** The Council has a duty under the Care Act to ensure that there is sufficient provision of care to support our residents – of the right type and quality and affordable using peoples' personal budgets. Consequently, as part of our market shaping responsibilities, we have been developing alternative models of supported living to ensure that we have a wider range of options for people to choose from, and to meet their specific needs.

## **4.2 Proposal**

**4.2.1** We currently have 263 service users with a learning disability who live in 109 supported living group homes across the Borough. The average weekly cost of a group home placement is currently £872 per person per week. The original proposal was to develop at scale a wider range of accommodation and care options for people currently living in supported living group homes and for young adults moving from children's to adult services.

**4.2.2** The wider range of options proposed are as follows:

- Extra Care Housing
- Self-Contained accommodation supported by community services, either attached to the accommodation or on an outreach basis
- Shared Lives placements
- Residential Care, similar to the Springhill new development.
  
- In borough residential care to reduce the need for people to live away from their families

**4.2.3** As the costs of these services are generally lower than the cost of the supported living group home model savings would be realised if people choose to move into the alternative options. It was noted, that it is difficult to be definitive about the amount and timing of savings that could be realised because this is ultimately linked to individuals choice and to the availability of new and appropriate options being available. The intention in the proposal as originally put forward was that a reduced number of people living in group homes would bring about savings to the Council of £200k in 2017/18 and £727k in 2018/19. These figures were based on an initial estimate derived from the knowledge of care manager's assumptions about increased range and volume of alternative options. It was clearly acknowledged that the assumptions made would be likely to change when the individual person-centred work was completed with individuals and their families / advocates, and discussions had taken place with the providers.

**4.2.4** The development of care options may still have an effect in lowering the Council's spending on care, though this is not a specific intention of the proposals going forward. If a lower spend does come about following such changes, this is likely to have been through some of the alternatives being at lower cost, and through providers reducing costs of the existing services.

## **4.3 Consultation**

### **4.3.1** Consultation on the proposal has been undertaken in the following ways:

- a). Information provided on the Council's website.
- b). Three face to face consultation sessions to which all service users and next of kin / family members were invited. The recorded attendance at these sessions was 218 people, but not all attendees signed the attendance sheet, so actual attendance was higher than this figure.
- c). Response letters sent to everyone who submitted a written response to the proposal as part of the consultation process.
- d). Two consultation sessions with service users which were facilitated through an independent advocacy service, with an easy read document to support the event. These were attended by 28 service users.
- e). Letters to providers inviting them to contribute views and also inviting them to provide alternative options to the proposal. Face to face meetings with service providers also took place both individually and through the Learning Disability Provider Forum.
- f). Letters to registered social landlords.
- g). Letters to the Learning Disability Partnership Board.

In recognition of the complex communication needs of people living in group homes, providers were also asked through their staff teams to discuss the proposals with individuals.

The original consultation time period was extended following requests from individuals and also a judicial review pre-action letter in relation to 2 individuals.

Concerns were expressed that the consultation period did not adequately

- give details of all the alternatives proposed, and
- ensure anyone potentially affected was included.

As a result Adult Care provided more explanation and examples in a follow up letter to all next of kin / family members and all people who had submitted a written response to the consultation following the end of the initial consultation period. An Easy Read version of the proposal was produced which formed the basis of the two service user consultation sessions referred to above. It also formed the basis of discussions with service users by their staff team.

## **4.4 Feedback from the consultation**

### **4.4.1** All of the written feedback, Council responses and notes of meetings are available in the full consultation folder which is available in the members lounge. A summary is also available at the front of the folder. A petition was also received regarding the proposal which was dealt with via the council's policy on petitions, and the matter considered by the Overview and Scrutiny Committee on 8<sup>th</sup> December 2016.

**4.4.2** The table below shows that there were a total of 186 responses to the proposal either via the Council’s website or in writing, that 169 of these expressed a view on the proposal and that of these 118 people (70%) strongly disagreed with the proposal, and 41( 24%) disagreed with the proposal whilst 4% agreed with the proposal.

Response from website and letters	Number
Agree to proposal	6
Disagree to proposal	41
Strongly disagree to proposal	118
Agreed on Header but comments indicate otherwise	1
Undecided	3
General feedback which did not fit into the above categories	17
Total	186

The major concerns that have been fed back from all consultation responses received are highlighted below:

- a) Supported Living Group Homes would no longer exist.
- b) People would be forced to move against their will and without it being in their best interest
- c) Group living homes do meet most people’s needs well and the proposals were only about reducing costs
- d) The new models of care would be a return to institutionalization and that the new models would not offer personalised care, they would be too large and impersonal with inadequate staffing levels
- e) People living in flats could be isolated
- f) Large numbers of staff currently working in group homes would lose their jobs and concerns raised if TUPE rights would apply if there are any changes to the model of care provided.

On the positive side:

- a) Consultees were reassured when it was re-emphasized that group living homes would still exist and be a significant part of the service offer in the borough
- b) Similarly consultees were reassured when it was re-emphasised that no one would be forced to move, any move would only be following a full assessment with consent and in the persons best interests with families and advocates fully involved
- c) The coordinator of the petition acknowledged that, for some people currently living in group homes, one of the new options may be more suitable but suggested this would only be the case for a very small minority of people
- d) Some consultees agreed that more choice is desirable; service users said

that the option to have your own flat is good for some people

- e) Some consultees agreed that the proposals for people with learning disabilities and dementia could be positive and are more appropriate than care in current residential older people's care homes
- f) Some consultees agreed that, as residential care is needed for some people, it should be provided in borough where possible

Providers expressed similar concerns as described above, however with a stronger focus on staffing implications. Some providers however also accepted the need for a range of options and the need to work with the council to find ways to reduce costs.

- 4.5.** As a result of consultation it is recommended that the savings proposal is withdrawn for the reasons outlined in section 3.

Adult Care Commissioners still intend to engage with service users, families, stakeholders and providers to further develop a wider range of care and accommodation options for all people with learning disabilities to better meet their needs in the future. This is part of the normal commissioning/ market shaping work required by the Care Act. The commissioning team have, in recent years, been working with providers and service users to develop a wider range of options, for example, one provider is in the final stages of development of an extra care housing facility. This will be available to all people with learning disability if it meets their needs, regardless of where the person currently lives. The Council has worked positively with the provider regarding this and it is hoped that this new option will be available in summer 2017.

## **5. Alternatives considered**

- 5.1** Members could decide to continue to require savings to be made. This however risks the positive development of a range of options as some people may continue to believe the driver is cost reduction.

## **6. Financial Implications**

- 6.1** The original savings proposal was £200k in 2017/18. This will now be achieved alternatively as a result of increased resources being available to adult care following the Local Government Settlement. The savings indicated for 2018/19 will be met corporately by one-off funding.

## **7. Legal Implications**

- 7.1** At the time of writing the consultation process is subject to a judicial review claim on behalf of one individual. Within these judicial review proceedings we have given a commitment to do the following:

(a) to remove the proposal from the decision making process at budget setting Council on 1st March 2017.

(b) to engage further with stakeholders and service users to provide additional

information regarding Supported Living in Rochdale and how this would be used on a group and individual basis the advantages and disadvantages of all options under consideration.

- 7.2** The claimants originally threatened a challenge of wider scope which it was considered appropriate to defend. The current challenge, however, is much smaller in scope and relates only to minor points on the consultation process. The recommendations in 2.2 - 2.3 above if approved by Cabinet are strongly advised in order to prevent a time consuming and expensive judicial review case proceeding. The Council would not be able to recover cost when successful, as the claim is brought on legal aid. Given the Council's financial position it does not seem appropriate to incur substantial costs on contesting a legal case on such a minor issue when the costs cannot be recovered after winning the case. It is a much more appropriate use of Council funds to carry out the extra consultation steps requested than to contest a full review claim over such minor issues, given that the Council would still be very substantially out of pocket at the end, whichever way the legal case went.

## **8. Personnel Implications**

- 8.1** The proposals outlined within this report will not have any personnel implication for the Council's workforce.

## **9. Corporate Priorities**

- 9.1** The development of a wider range of accommodation and care options is in line with the corporate priorities outlined in the corporate plan.

## **10. Risk Assessment Implications**

- 10.1** If members agree to continue to require savings risks would be mitigated through developing a comprehensive programme plan with additional focus on communication. The significant risk is that positive service developments would be impacted by continued challenges to the proposal.

## **11. Equalities Impacts**

- 11.1** The decision to remove the proposal to make savings from remodelling of Supported Living Group Homes from the 2017/18 and 2018/19 savings programme and the decision to engage in further service user / stakeholder engagement and to defer any decision until that is done do not require a formal equality impact assessment.