



Adult Care Service
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Dear Resident

This letter is to explain the Council's proposals in relation to Supported Living services for people with Learning Disabilities.

The key points to note are:

- The current supported living model is not the right service model for everyone with learning disabilities.
- The principle aim of the new strategy is to increase the choice and the range of accommodation and care options that are available to meet a wide and changing range of needs
- Where the current supported living model works well for people there will be no change.
- Nobody will be forced to move

This letter gives you some more background about why we are proposing changes, answers some questions that are being asked; and also provides some examples to illustrate why we are proposing to make changes.

Background

Currently 263 people with moderate and higher level learning disabilities live in supported living. In our borough this involves people sharing a home, usually with 2 or 3 others, and supported by a 24/7 staff team in the home. People have their own individual tenancies, but the home itself, apart from the bedrooms, is communal shared space.

This model of care became very popular in the 1990s and 2000s – it was designed to offer intensive support on 24/7 basis for people who could not live independently. Its aim is to enable people with learning disabilities to live with others as part of their local communities, promoting social inclusion. When the old learning disability

institutions were closed (including the old NHS hospitals) it was the most common model of care for people to move into.

Rochdale Borough Council supports more people in this type of care than other Councils in Greater Manchester. In our borough we are heavily reliant on this particular model of care and have not yet developed a sufficient range of alternatives.

Questions and Answers

Question: Will people be forced to move from their homes?

No, people will not be forced to move. We have never said this and have always been clear that people have their own tenancies and rights, and moves will only happen when there is a suitable alternative for people, where the person gives consent and where a move is in their best interests. Every person is an individual and there will be no forced moves. For people where this model works well there will be no change.

Question: Will all supported living homes for people with Learning disabilities close in the borough?

No, that will definitely not be the case. Our intention is to provide alternative accommodation with care options for some people with learning disabilities across the borough. In time this may mean that some supported living schemes close because people have chosen to move into one of the alternatives. However, as noted above, we know that the current supported living arrangements work well for some people so there will continue to be supported living group homes in our borough.

Question: Does Supported Living work well for people?

Supported living in our group homes works well for some people. The current supported living model has provided accommodation and support for many people with learning disabilities, enabling them to live as active members of their local communities.

But it doesn't work for everyone. Over the years some people's needs and expectations have changed. For example, some people do not wish to live in this sort of shared home arrangement and would prefer more choice, control and independence in their living arrangements. Extra care housing is one option that could meet their needs better. Other people have additional needs due to older age or other health reasons and their shared living arrangements no longer work well for them or for the people they share with. This can sometimes lead to unplanned moves and impact negatively on people. There can also be difficulties where people living in the same property have different needs or different personalities leading to a breakdown in the group living arrangements, which means someone has to move. This also results in some group homes being under occupied.

We are trying to develop a wider range of accommodation and care with support options to meet a wide and changing range of needs which provides more choice for people with learning disabilities.

Question: How could the development of alternative options be a better option for some people?

We have developed these proposals to improve care; the new options will broaden our range of services to meet the wide ranging needs of people with learning disabilities.

Extra Care housing is a well established model of care that provides opportunities for greater independence. Some people living in supported living would benefit from this kind of support as it would be a less restricted arrangement and offer support in a more bespoke way.

Residential care is already an option for some people and, unfortunately for people with learning disabilities, this often means they have to move outside of the borough. Sometimes this happens in a crisis situation because there has been a breakdown in their supported living arrangement. We would like to develop new models of residential care, within our borough, designed specifically to meet the needs of some people with learning disabilities. This would mean, where residential care is needed, it would be local and designed to meet their needs.

Question: Will the proposals breach people's human rights?

We do not believe that our proposals are contrary to people's human rights. No- one will be forced to move unless they wish to do so and it is in their best interests.

We would only discuss a possible move if we felt that an individual would benefit from an alternative option. Before any move could take place we would have conversations with the person and their relatives. We are also required by law to undertake professional assessments in line with the Care Act 2014 and The Mental Capacity Act 2005 before any move could take place. This clearly requires any decisions made about a person to be in their best interests and an advocate to be involved if the person does not have mental capacity to understand the issues. We feel people's rights will be enhanced because, in the future, there will be a wider range of care options and more choice for individuals and their families.

Question: Is this all about saving money?

No this is primarily about people's needs but adult care does also need to make financial savings in line with the significant cuts to council budgets. Some of the alternative options will be less expensive than the current supported living model but we are doing this first and foremost to better meet the needs of some people.

Please find below for your information some 'real life' examples. This explains more about why we believe the current group homes do not always meet the needs of some people, and how the proposed alternatives could do so. These are 'real life'

situations but details have been changed so that individuals cannot be identified to protect confidentiality.

Example 1 – Mrs A

Mrs A is 75 years of age. She lives in a group living home with two other people, she became frail and unable to walk safely due to health problems. Unfortunately Mrs A then had a number of falls and was admitted to hospital. At this time the Supported Living provider decided that they could no longer meet her needs safely in the group home. Every effort had been made to support Mrs A to return including adaptations to the home and an increase in staffing; however, it was simply unsafe. Mrs A was also suffering from dementia and did not have the mental capacity to understand the situation. Mrs A was admitted to an older persons nursing care home. If alternative more specialised residential care had been available when Mrs A began to have serious difficulties there could have been a planned move, avoiding the crisis situation that developed, and better meeting Mrs A's needs.

Example 2 – Mr B

Mr B is 50 years of age and lives in a group home with two others. He has a number of long term health conditions as well as his learning disability. He became immobile and was unable to move around the home without breathing difficulties. Health professionals considered that his group living home environment was not safe for him. Unfortunately none of the supported living providers were able to offer a suitable alternative and the only option was a residential placement out of the borough. Mr B remained at a care home outside of the borough for 11 months and although he received care in relation to his physical needs, he was isolated from his friends and family. He was unable to return to a group home because of this health care needs but he would have benefitted if more suitable residential care had been available in our borough.

Example 3 – Miss C

Miss C is 55 years old and lives with three other people of a similar age in a group home. She has Downs Syndrome and developed dementia two years ago. Miss C had lived with the same people for many years and they regarded themselves as a family. When Miss C was diagnosed with dementia she started to demonstrate behaviours that were totally out of character for example, sexualised behaviour, swearing, hitting out, shouting and screaming. Her co-tenants found the changes in her behavior very difficult to understand and felt a sense of loss for the person they had known. Additional support was provided for her co-tenants but Miss C's behavior continued to be very difficult for them, they were not able to understand it and the tensions in the group home increased. The co-tenants found it increasingly distressing and this affected their own health and mental wellbeing. Eventually Miss C moved into a care home for older people. This home did not have any specialist knowledge or arrangements for people with learning disabilities. The proposed new residential scheme may have been an ideal option for Miss C at an earlier stage. , the new residential service may have been an ideal option for this lady at an earlier stage.

Example 4 – Mr D

Mr D is a young man who previously lived in a service called 'Shared Lives'. Shared Lives is where a person lives with a host family, as part of the family. Mr D found living with his host family to be too restrictive and wanted more independence so he moved to a supported living group home. Unfortunately differences in personalities and problems relating to the different levels of need of the co-tenants led to tensions in the shared home. Mr D felt that his co-tenants were capable of doing more in the home but that they expected the staff to do it. Mr D has mental capacity to make his own decisions about important matters. Mr D is able to do some limited work and his stated aim is to live independently and get a job. Mr D would be an ideal person for the new Extra Care housing proposal which would support him but also enable him to have the independence he wants. The opportunities of the social and communal facilities that extra care could offer could be a catalyst for him developing an even more independent life.

Example 5 – Miss E

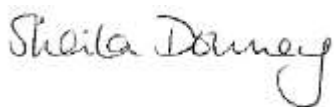
Miss E is a 25 year old woman who shares a group home with two others. She has a moderate level of disability and both of her co-tenants have complex learning disabilities and communication difficulties. Miss E is independent and likes joining in with community activities and developing social networks. Miss C is able to communicate her wishes and made it clear that she no longer wanted to live in the group home. It was difficult to find alternative suitable accommodation for her, there were vacancies in other group homes but not one that was suitable for Miss E. Miss E moved into residential care on a temporary basis. Miss E could not live completely independently but she would be an ideal person for the new Extra Care housing scheme. This would offer her independence with flexible support arrangements, with the opportunity to become even more independent, improving her quality of life.

We would like to inform you that we have extended the period of consultation by four weeks from 5pm on 31st October 2016 to 5pm on the 28th November 2016.

If you would like to provide any further feedback into the consultation process in light of the above information please email consultation@rochdale.gov.uk or write to;

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Yours sincerely,



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