NDTi
National Development Team for inclusion

Supported Living – Making the Move
Developing Supported Living options for people with learning disabilities

NDTi Housing and Social Inclusion Project
Discussion Paper One

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housing

Contents

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About the Housing and Social Inclusion Project

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. The result has been a focus on the housing 'mechanics' and as a consequence housing rights are often denied in practice, institutional practices continue in supported living and community inclusion and networks are not achieved by people.

This three year Department of Health subsidised project, led by the National Development Team for Inclusion (NDTi), will address the need to include community inclusion at the heart of housing planning and design by increasing knowledge, understanding and developing materials to:

- Design and implement a move from residential care to separate housing and support arrangements based on an aim of community inclusion

- Develop and implement effective tenancy agreements and include staff training on housing rights

- Train support providers to deliver support that promotes community inclusion

- Use an evaluation tool, 'The Inclusion Web' that enables providers and commissioners to quantify the impact of new practices around community inclusion.

- Understand the economic implications of the move from residential care to supported living models

The outcomes and learning from this project will be disseminated through a series of discussion and good practice papers, a national conference, national programmes for housing and social inclusion and regional learning disability and housing networks.

Project Partners:

- Bradford Metropolitan District Council

- Essex County Council

- Gloucestershire County Council

- Halton & St Helens PCT & Councils

- London Borough of Islington

- North Tyneside Council

- Sandwell Metropolitan Borough Council

- Slough Borough Council

1. Introduction

This paper has been written by the NDTi to help promote discussion, debate and understanding about the obstacles that currently help prevent adults with a learning disability from living in their own home in the ways that they want. Its objectives are to provide information that will help local people and organisations change and improve how they develop and deliver housing and support, and also to help inform national debate and discussion about how the policy and regulatory framework could change to help achieve this objective.

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.

This paper does not say that residential care in itself is bad or wrong. Most of us will know someone who has had a good experience of living in residential care. That is usually because they are supported by good organisations and fantastic staff, and their experience is good *despite* the restrictive structure of residential care, not *because* of it. Good quality residential care should remain a valid choice, but it should not be the only or predominant choice just because there is little or nothing else available.

There are 6255 homes registered for people with learning disabilities in England and 562 (9%) of those homes were registered in the last 12 months. This growth is despite the fact that we know that people with learning disabilities, families and professionals want other housing choices and we know that there are other choices available. This suggests that

the barriers to getting housing are not simply about housing supply but about how we think and work. This paper also explores some of the barriers that people with learning disabilities, their families and professionals regularly face when trying to get housing.

2. How is Supported Living different from residential care?

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 NDTi[1] 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[2]:

- I choose who I live with
- I choose where I live
- I have my own home
- I choose how I am supported
- I choose who supports me
- I get good support
- I choose my friends and relationships
- I choose how to be healthy and safe
- I choose how to take part in my community
- I have the same rights and responsibilities as other citizens
- I get help to make changes in my life

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

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[1] Kinsella P., Supported Living: A New Paradigm, NDTi 1993

[2] Paradigm, REACH: Standards in Supported Living, 2003

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.

The Care Quality Commission has issued guidance[3] to its inspectors to determine whether a home should be registered as a care home. These criteria fit closely with the definition of supported living in the Reach Standards and state that if the following criteria are met, it is unlikely to be registerable as a care home:

- the separate providers of accommodation and care do not need to co-ordinate their work and are not accountable to each other,

- people who use the service have real choice, e.g. they can change their care provider without jeopardising their accommodation rights,

- people using the service have exclusive occupation and can deny entry to others, even carers,

- the tenancy can be assigned to someone else,

- occupants can remain even if they no longer need a care service,

- there are separate contracts for the care and the accommodation

Supported living is not a prescriptive model of service design and can look very different for different people. For one person it may be a few hours support a week to live alone in a rented flat, for another it may be round the clock support to live in a home they own, and for others it may be a shared house with friends and support to meet individual needs. The key to whether it is supported living or not is how much choice and control the person has over their home and life rather than what the service looks like.

Different models for supported living include:

- living in a rented or owned property and getting an individual support package

- sharing with others in a rented property and each person getting an individual support package

- extra care or sheltered housing

- lodging in someone else's home and getting an individual support package

- living in an extension to a family home and getting an individual support package

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[3] Care Quality Commission Document ref. 014/08 www.cqc.org.uk/

- living in a network of houses or flats and supporting others as well as getting support.

2.1 Summary of main advantages for supported living over residential care

Supported Living	Residential Care
Own home or tenancy. Security of tenure.	Licence agreement with no security of tenure.
As a tenant or homeowner the person has a right to choose who provides their support and can change support arrangements without moving home or move home without changing support arrangements.	Support is provided as part of a package with housing and either element cannot be changed without impacting on the other.
As a tenant or homeowner the person has a right to choose who they live with if anyone.	Good practice in residential care dictates that housemates should be well matched as much as possible but in practice many people live with people they do not choose to live with.
Tenants and homeowners have rights to full welfare benefits including housing benefit, income support and disability living allowance.	People in residential care have rights to limited amounts of welfare benefits and most people access a residential care allowance of approximately £20 per week to purchase personal belongings, clothes and holidays.
Can access Direct Payments, Personal Budget, Supporting People Grant, Independent Living Fund for support.	Cannot access most additional funding for support.

2.2 The financial implication of moving towards supported living

There are clear advantages that supported living has over residential care for giving people more choice, control, rights and independence and this should be the primary motivation for enabling more people with learning disabilities to have their own homes. In the current economic climate commissioners also need to think about how they can make long term care and support more affordable. Assumptions that residential care brings economies of scale may be seen as a justifiable argument for maintaining high numbers of residential care places, or commissioning more residential care, particularly in the current economic climate. However, there is no evidence we are aware of that shows residential care is less costly to commissioners than well planned support living – indeed there is some evidence to the contrary. The Housing and Social Inclusion Project will be analysing the changes delivered by our partner sites to help develop evidence to inform this question.

Residential care provides a 'one size fits all' approach to providing care and support despite the fact that, in any one residential care home, every person living there is likely to have different individual support needs. Regardless of these varying support needs, the cost of care will usually be dependent on the cost of a place in a home rather than the actual cost of care and support needed. The outcome of this is that the commissioner may be paying too much or not enough for supporting an individual and this is clearly neither cost effective nor good value for money.

The funding of residential care includes the cost of housing and meeting basic everyday needs such as food and utilities, as well as care and support. This will usually be met by a mix of social services and/or health funding as well as a contribution from the benefits system.

With supported living options, social services and health funding will only pay for care and support needed and the welfare benefit system pays for housing and everyday living costs. Additional support may be paid for by Supporting People grant or the Independent Living Fund. This can result in a social care or health budget paying significantly less to support some people and for others, no more than the cost of residential care. It is difficult to make real comparisons between the cost to the public purse of residential care and supported living because housing and daily living expenses come from other budgets.

There is very little evidence that tells us whether supported living models are more expensive than residential care or vice versa. However, as our society is committed to the principles of rights and inclusion, the focus on whether residential care is more or less expensive, whilst being important to understand and consider, should be a secondary concern to how we maximise rights, choice, control and independence for people with learning disabilities.

Through the personalisation agenda, more and more people are getting personal budgets to make choices about their support. We cannot predict what those choices will be and no doubt some will opt for residential care. What we are seeing to date however is that where people are moving on, they are opting for supported living options where they have real choice and control over where they live, how they are supported and who they live with. It is hard to imagine, given this level of choice, that many people will opt for residential care, if only because it will severely and unnecessarily restrict their personal income. The real question that we need to be asking is whether residential care itself is financially sustainable in our new era of real choice and control.

2.3 The impact of Supporting People on supported living for people with learning disabilities

The Supporting People (SP) grant was introduced in 2003 with the aim of enabling vulnerable groups of people to live more independently and avoid residential care. There was also an aim to make sense of various funding streams that were used to support people in their own homes and bring them together under one funding stream for support. This included the support element of Housing Benefit (HB) which was widely used in unregistered services for people with learning disabilities. Leading up to the delivery of the SP Programme, there was a transitional phase to claim and separate out the support element of HB, called Transitional Housing Benefit (THB).

This transitional phase led to a significant development of new supported living schemes for people with learning disabilities through the change of registration of existing residential care homes.

A common scenario at this time was a residential provider changing from being registered as a care home provider to being registered as a domiciliary care provider (where personal care was being provided) and in some cases where no personal care was provided, removing registration completely. To satisfy requirements for this change of registration and provision of tenancies, the provider separated out the delivery of housing and support by either creating a housing arm of their organisation or by leasing the property to a housing provider. Tenancies were then issued to individuals and they were able to claim HB for housing and THB for support.

The Government has invested over £8.7bn in Supporting People since the programme began in 2003 and announced a further £4.9bn funding up to 31 March 2011. The majority of SP grant being spent on services for people with learning disabilities is funding housing based services. An analysis of five-year Supporting People strategies suggests that administering authorities intend to focus in future on the development of services which offer individual tenancies and low-level floating support to people with learning disabilities.

This will help increase the range of housing options available to people with learning disabilities.

2.4 The Problem with Some 'Supported Living' Services

Research by the Joseph Rowntree Foundation '*The impact of the Supporting People programme on adults with learning disabilities*'[4] found that there has been a positive impact for people with learning disabilities living in supported living schemes in that people could access a full range of welfare benefits and had more choice and control over day to day activities. However, the research also found that many of the new supported living services are not very different from the residential care homes they replaced in terms of how much choice, rights, control and independence people really have. Many services are not provided within the principles of supported living. People are still not making decisions about the fundamental aspects of their lives like who they live with, who supports them and where they live. In some cases, control is still with commissioners and providers.

There are many shared supported housing schemes where support is a condition of the tenancy, the level of support is fixed at a certain amount of hours and clearly does not meet the principles of supported living, but is called supported living. Historically, this approach to supported housing was designed and used as a temporary housing model rather than to offer a permanent home. It has a valued place within a wider range of housing and support models but cannot be the default option when developing new housing and support services, otherwise it will simply become the next generation of services that does not give a large group of people what they need and will need changing in the coming years.

Calling such services 'supported living' has thus caused a misunderstanding as to what supported living really is and what it can achieve for people. As a result, supported living has been understandably discredited in some circles because it appears to be an inflexible service that cannot meet the needs of many people with learning disabilities – in particular those with more complex support needs -   and many people, families and professionals believe that supported living is simply a SP funded service and do not know that it encompasses a range of options to meet people's differing needs and wishes.

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[4] Joseph Rowntree Foundation, *The impact of the Supporting People programme on adults with learning disabilities,* 2007 www.jrf.org.uk/

3. Housing and Support Models

To date, much investment in supported living and housing for people with a learning disability has been made in a narrow range of models. To improve the supply and availability of housing, a more mixed range of housing is needed to include standard models as well as mainstream housing with a wider range of funding sources such as mortgages and family investment being used.

In any one local authority, people with learning disabilities should ideally have access to the following options:

- **Shared supported housing**

- **Shared Lives** (formerly known as Adult Family Placement where a person lives in a family home)

- **Extra Care schemes** (for older people and specialist learning disability) with mixed tenures

- **Community Living Networks** such as the Keyring model

- **Low cost home ownership** products including Home Ownership for people with Long term Disabilities (HOLD), Homebuy, Newbuild Homebuy and re-sales of existing schemes, Family funded shared ownership

- **Home ownership** on the open market and support and advice to access.

- **Public sector rented** properties

- **Private sector rented** properties, in particular via Housing Association Leasing Schemes

- **Family investment** and trust funds to set up a range of housing models with advice and support to develop.

- **Residential care**

In many local authorities, it is likely to be relatively easy to access shared supported housing schemes (i.e. group homes with tenancies) and residential care but the remainder of options are either non-existent or difficult to access. The following section outlines a range of housing and support options that should be available in any one local authority if we are to give people real choice.

4. Supported Housing Models

The supported housing models that are described in this section require active commissioning and a joined up approach between housing, Social Services and Supporting People functions to achieve a balance that meets the needs of the local community. They all relate to housing that has been specifically identified as being for use by people with a learning disability.

4.1 Shared supported housing is the most common supported living model in England. It is provided by a whole range of housing and support providers and a common feature is that people living in supported housing will have a tenancy. They range from services that look very institutional and give people little choice and control to those that look like an ordinary shared house where those living there are in control.

Some shared supported housing that was developed 10-15 years ago has already become outdated because the shared model creates restrictions just by the fact that people like to choose who they live with. Very few young people coming from the family home will choose to live in a supported housing vacancy where they are sharing with older people for example. With the introduction of personal budgets, people will not necessarily spend their budget by choosing to move into a vacancy in a supported housing scheme if it doesn't meet their needs. Such services may thus be at risk as personal budgets develop.

Where it is being actively commissioned, thought needs to go into the planning and design of shared supported housing. There will always be plenty of people who choose this type of housing because they want to share and they don't have anyone in particular to share with but it needs to be flexible and sustainable. A clear separation of housing and support is important so that the housing or support element can be changed if either is not working. This also makes it easier for a person with a personal budget to purchase what they need.

Designing shared housing so that people can have their own space such as en-suite rooms with more than one communal area will stop people from getting on top of one another and make shared living more comfortable and sustainable.

4.2 Extra Care schemes have usually been targeted at older people but are now also being commissioned for people with learning disabilities. This model varies but a common feature is that people have their own flat within a wider development of flats for other people who need support - sometimes with additional communal space. This model gives

the benefit of sharing with others but with the flexibility to be able to meet the needs of people who would not necessarily choose to live together. This model also lends itself to having mixed tenures so that people can have the option to rent, part buy or buy outright. It is important within this model to ensure that the numbers of people living in the same resource remain fairly small, in order to avoid the risks of institutionalisation and stigma in the eyes of the general public that arise from grouping people with disabilities in the same location

4.3 Shared Lives (formerly known as Adult Family Placement) have been in and out of fashion in recent years. The model varies but a common feature is that a person with support needs lives in another person's home and gets support and accommodation from them. Sometimes it is with a family but also may be with a single home owner. It is not possible to create security of tenure for people in such settings.

4.4 Community Living Networks such as the Keyring model work by supporting and networking people in their own homes within a particular area. The Keyring model recruits a volunteer who lives as part of the network and provides small amounts of support to each network member. They also focus on getting network members to support each other and people to use natural community supports. This model can be adapted to work for people with higher support needs that live in a particular area.

5. Mainstream Housing

Mainstream housing is an ordinary house on an ordinary street, whether rented or owned that people with a learning disability access in the same ways as other citizens. Such equality of access to mainstream housing is fundamental in enabling people with learning disabilities to live more equal, ordinary and socially inclusive lives. It gives people a presence in the community and demonstrates that people with learning disabilities can have real control over their lives - making real decisions about who they live with (if anyone) and who supports them. The power balance between the person being supported and those supporting them is much clearer when someone has their own ordinary home.

The following is a breakdown of the main types of mainstream housing and the barriers that people with learning disabilities have in accessing it.

5.1 Home ownership

The following outlines the main ways that people with learning disabilities can purchase their own home:

- **Home Ownership for people with Long term Disabilities (HOLD)** is a product recently developed by the Homes and Communities Agency (HCA) to enable disabled people to buy their own homes on the open market. It is only available in local authorities where bids have been made.

- **Open Market Homebuy** is an HCA product open to people within a prescribed income bracket who can afford a mortgage of 75% of the value of a property. The remaining 25% is funded via an interest free loan.

- **Newbuild Homebuy** is an HCA product that is open to people within a prescribed income bracket. New-build flats or houses are developed by the RSL where anything from a 25% to 75% share can be purchased

- **Shared ownership re-sales** of existing schemes, where current owners want to sell.

- **Extra Care or Assisted Living Schemes** that sell flats through outright or shared ownership

- **Family funded shared ownership** works in the same way as the HOLD scheme but instead of a grant from the HCA, the family gives the RSL a long term loan of approximately one third of the property value. This model can also work where grant from the HCA is replaced by a grant from a local authority the NHS or an independent or charitable organisation with capital.

- **Outright ownership** where an ordinary house is purchased on the open market

- **Joint ownership** where people with learning disabilities or families purchase a property jointly or through a shareholding scheme.

Home ownership is a viable option for people with learning disabilities who fall in to the following categories;

- Those who earn enough to support a mortgage for all or a share of a property.

- Those who have access to capital through their families or have an inheritance or trust funds.

- Those who are in receipt of Income Support or Incapacity Benefit who are *moving to accommodation more suited to their needs because of their disability* are entitled to Support Mortgage Interest (SMI) to meet the mortgage interest payments on a mortgage of up to £200,000.

Many people with learning disabilities meet the criteria for Support Mortgage Interest from the DWP of up to £200,000 to purchase a home either through the various low cost home ownership products, purchasing a home on the open market or in mixed tenure extra care or assisted living schemes.

Ownership models are gradually becoming more widely available to people with learning disabilities but for example, very few local authorities and RSL partners made bids for funding in the last HCA (formerly Housing Corporation) bidding round to help disabled people buy through the HOLD scheme or in Extra Care schemes. Many that did bid for such schemes only bid for very low numbers so it has only been made available to a small number of people.

Some people with learning disabilities and their families have access to significant capital in the form of inheritance, trust funds and savings to invest in housing yet for many, their only choice is to accept some form of social housing. This does not make sense when there are ways for people to purchase their own homes.

5.2 Public sector rented housing

Public sector rented housing is housing provided by a council or housing association. It is usually low cost and has long term security. It works best for people with learning disabilities who want to live on their own or with someone who they are in a secure relationship with such as a partner or family member. A person who needs support at night-time can apply for a larger home with an extra bedroom for a carer to stay overnight.

This type of housing also works well for those who work and are on a low income as the rent is usually affordable (some other housing options for people with learning disabilities make it difficult to work and puts them in a 'benefit trap').

All people must apply for public sector rented housing via a council housing register. The housing register has two main functions: it provides a process to prioritise and allocate housing to applicants. It is also used as a means for a council housing department to identify numbers of people waiting for housing, and the particular groups that have greatest need. This then enables councils to prioritise funding and development of new housing.

There are no robust figures for how many people with learning disabilities are on council housing registers in England as different councils collect information about disability in different ways, but anecdotal evidence suggests that figures are very low. Not only does this stop individuals from getting public sector rented housing but the failure to include people with learning disabilities on housing registers means that Councils do not have the necessary data and evidence to inform housing plans and the local Joint Strategic Needs Assessment (JSNA). This is one reason for the limited bids for funding and developing new housing options for people with learning disabilities by Housing Authorities.

By 2010 all councils will be expected to allocate public sector housing by using Choice Based Lettings (CBL) Schemes. CBL schemes in principle offer greater choice of housing and have generally been successful in terms of customer satisfaction. The main principle of CBL is that the customer takes a more proactive approach in seeking housing and uses web sites and newspapers that advertise public sector housing to apply for the housing they want. This has been problematic for people who have difficulty with communication and comprehension – for example people with learning disabilities. A report by the Valuing People Team, *Choice Based Lettings and People with Learning Disabilities, Hall, C & Wood, A, DH 2008* found that many CBL schemes do not make enough adjustments of their schemes to ensure that people with learning disabilities benefit from the same housing choices as others. There is concern that with the wider implementation of Choice Based Lettings Schemes, this will make access to public sector housing even more problematic for people with learning disabilities.

In many parts of the country, public sector housing is in high demand and people with learning disabilities will struggle to get priority over (for example) homeless families. For some people with learning disabilities, public sector rented housing will not meet their needs. The housing register however is also a route to other housing options that can work well for people with learning disabilities and it is important that people use this process even if they would not choose to rent a home from a council or housing association.

5.3 Private/non RSL rental sector

The private and non RSL rental sector covers the following:

- **Renting from private landlords** on the open market or through an intermediary who leases the property from the landlord such as a council or housing association scheme.

- **Renting from a family member**

- **Renting from a non profit making body** such as a charity or non-registered housing association.

Renting from private landlords

In many parts of the country there is a robust supply of privately rented housing and in theory, there is a ready source for people with learning disabilities. The main problems are that (i) landlords often do not like to accept tenants who are reliant on state benefits and (ii) it may be difficult to achieve the longer term security that some people will want.

A solution can be for an intermediary who leases the property from the landlord - such as a council or housing association. The intermediary secures the property for a fixed length of time, usually 3-5 years. The intermediary agrees a rent that is below market rents but the landlord has this sum guaranteed for the entire period of the lease as well as the maintenance and upkeep of the property. There are schemes that secure privately rented housing for vulnerable people in most local authorities but they are rarely targeted at or accessed by people with learning disabilities and tend to be targeted at homeless families.

The private rental market offers a quick and flexible solution to housing for people who need an ordinary housing environment and for people with learning disabilities this option can be a straightforward short or medium term solution to getting housing. It can work well for those who want to try out independence or living with other people without making long term commitments.

For the commissioner and support provider setting up a shared housing model, using this option means that they do not need to make long term commitments of capital to bricks and mortar and can be more flexible when people want to move on or if the support service or sharing arrangement is no longer working.

Renting from a family member

It is possible with the Housing Benefit regulations to rent from a family member as long as the property is self-contained and the arrangement is commercial. This includes families renting out a separate property or an extension to their own home. Many families have access to funds and properties that they can use to help provide a secure home to their son/daughter and possibly to others.

Families can also use an intermediary to act as a landlord and this is advisable, particularly where the property is being rented out to more than one person and arrangements become more complex.

Renting from a non-profit making organisation that does <u>not</u> provide care and support

Non- profit making landlords are usually charities or housing trusts that are <u>not</u> a registered social landlord (RSL) and therefore do not attract housing subsidy to develop housing. This means that this type of landlord <u>may</u> need to charge higher rents than average local rents, particularly if they are taking out a 100% mortgage to purchase the property or if the property requires special adaptation.

This type of housing has been a fairly common source of housing to people with learning disabilities partly because of the difficulties in getting housing through other routes but also because of the belief that people with learning disabilities need to use a specialist housing provider.

6. The Pathway to Housing

There is no one route to housing for people with learning disabilities. Most people go to social services but others will approach specialist providers and others will go to the housing department or via the Supporting People team.

The process can appear confusing and fragmented for people with learning disabilities and their families. Many people are not aware of their rights to housing, what the options are and how to achieve their desired housing options. It is often a lottery as to whether good advice and support will be provided by the agencies involved. Success in achieving good housing options is often the result of committed, articulate and persistent families.

Support and housing for most people with learning disabilities needs to be planned together but it can be problematic to co-ordinate housing and social services and deal with the complexities of the benefit system, various regulations and funding streams. To achieve any housing option that is out of the ordinary often requires additional support and expertise and this is usually outside of the care manager or social workers role – and sometimes knowledge and expertise.

Young people going through transition to adulthood and their families do not get good information about housing options. Many have expectations that they will stay in the family home indefinitely or go into some form of residential care, perpetuating the purchasing of residential care placements. There are real opportunities to educate people and families about the range of options for the future and help people to envisage a more ordinary life.

Equally for older people with learning disabilities, there is little support to make that transition. Many older people with learning disabilities end up placed inappropriately in nursing homes. Options to stay where they are and have adaptations and more support, extra care housing or mainstream housing need with support should be considered.

In our service orientated culture we see transition as a series of services that people 'qualify' for at various stages of their lives and people are moved around and placed according to where they are assessed as being best placed. Many people are told that they must share with other people until they learn to be more independent (and thus 'earn' their own home), whilst older people and those developing dementia are sent to a nursing home. Instead we need to help people get homes and lives and adapt support accordingly when people need it.

7. Models of Support

For most people with learning disabilities, support is intrinsically linked with people being able to live successfully in their own homes and a strategy for housing cannot be separated from a strategy for support. This support may vary from a very low level to help manage a tenancy and the essentials of daily life to an intensive package of support to help manage all aspects of life.

In many existing supported living/housing schemes, the support provided is based on a fixed model with a fixed set of hours of support for each tenant with these hours being attached to the scheme rather than the tenant. For example, a scheme may have 20 hours per week SP grant per tenant which may work well for some people but for others may offer no greater flexibility than residential care.

Support in some more intensive supported housing schemes is still often based on a residential model of care with fixed 8 hour shifts and an overnight on call person, and therefore has a similar impact as residential care in terms of the 'one size fits all' approach and inflexibility with some people being over supported and others not getting enough support.

The group model of supporting people is also often used as a way to deal with social isolation. For some people this may work, but for others living with people they do not choose to live with can be even more isolating. Group models of support assume that people living together will share social lives but the reality is often that paid supporters spend a great deal of time replacing friendship. Models of support need to focus more on helping people make friends of choice and connect with communities and other people living more independently so that isolation can be dealt with in more natural ways, maximising social connections and reducing dependency upon paid support.

The group model of supporting people is also used as a way to achieve economies of scale. This may be achieved for some people, particularly those with moderate learning disabilities who need 24 hour support available but do not require intensive support. This assumption however is based on a comparison between a traditional package of support in shared housing and a traditional package of support provided on a one to one basis. As more people choose to live in ordinary housing options alone or with friends, there needs to be a more flexible and imaginative way of providing support that is financially sustainable.

As with housing, a mixed range of support options need to be available that can be tailored to meet individual need. With the introduction of personal budgets, it is already becoming evident that people are opting for a range of flexible and natural support options rather than buying into services with fixed levels of support. The role of the commissioner will need to change to reflect this. Low level and low cost supports such as assistive technology and home sharers need to be maximised whilst block contracts need to be made more flexible and not necessarily attached to accommodation, with incentives for providers to incorporate a range of support mechanisms.

The following is a range of support options that should be available in any one local authority area in addition to those traditionally commissioned and available. These examples will illustrate just some of ways that people can get different types of support so should not be restricted to only these;

- **Floating support** – this model of support can be more efficient and better value if commissioned as a block contract that can be delivered in a flexible way

- **Assistive technology**- there is growing evidence that assistive technology can work well for people with learning disabilities and deliver greater independence, social inclusion, privacy and dignity as part of a wider support package. Assistive technology (AT) ranges from standard telecare to help keep people safe and reduce risk to one off devices that are designed to support people in specific situations as well as ICT to support communication and make and maintain social networks.   A DH commissioned report[5] *Gadgets, Gizmos and Gaining Independence*, gives an example of one provider, who by assessing 33 people with learning disabilities in supported housing for AT were able to deliver greater independence, privacy and dignity by purchasing a range of devices at a cost of £10,000. In addition, by using AT they achieved a saving of £122,000 from direct staff salaries and were able to develop a mobile night response service in the area at a cost of £54,000, thus achieving a net saving of £68,000 that was used by the commissioner to invest in other services.

- **Homesharers/Support Tenants** – This model is where a disabled or older person gives a room in their home to a supporter in return for rent-free accommodation and sometimes a small tax-free payment. The Homesharer is usually a local person and is employed elsewhere or a student. The Homesharer provides an agreed amount of support, usually social and household but not personal care and for people with learning disabilities, is usually part of a wider support package. This model promotes a much more natural and socially inclusive way of supporting people and is mutually beneficial for the householder

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[5] *Gadgets, Gizmos & Gaining Independence- Assistive Technology and People with Learning Disabilities, King, N & Wood, A, Advance Housing 2006*

and the homesharer. The Homeshare[6] model provides a framework for recruitment, management and monitoring of individuals in this set up and has a start up costs for one local authority of £20,000. Operating costs of this scheme are £60 per person per week. Community Support Volunteers (CSV) offer a similar but shorter term service.

● **Live in carer** - This model is commonly used by people with physical disabilities as a way of getting intensive support with personal care and daily living at a lower cost than using an agency. This model transfers well for some people with learning disabilities as part of a wider support package or alone.

● **Good neighbour schemes** – This model is more commonly used by older people as a way of getting low level support such as shopping, changing a light bulb or responding when urgent help is needed. The good neighbour is recruited and paid a small retainer fee in return for providing low levels of support. Again, this model transfers well to people with learning disabilities who need a fast response in some situations but do not need constant supervision.

● **Community living networks-** This model was developed by Keyring[7], a national organisation that supports people with learning disabilities to live in their own homes. The model is based on a small number of people living in their own homes (usually 10) being part of a network that both receive low level support from the co-ordinator and give support to other network members where they can. This model also has a focus on drawing in natural and community supports for individuals and has a strong community development focus to achieve this. At the moment, this model is mainly used for people with low support needs but has been tested with people who have more complex support needs and early results show that the model adapts well and helps people with higher support needs achieve greater social inclusion and less isolation even though they live alone. This model usually costs in the region of £40,000 to support the entire network.

● **Community Schemes** supporting people to access community based schemes is a key way that we will help people to develop community networks and reduce reliance on paid support. Timebanking is one example of a range of similar schemes that enable people to get involved in volunteering by providing anything from dog walking to window cleaning and earn 'points' to be able to get some support in return. The Timebanking type scheme is particularly valuable because it can be both a source of support and a way to contribute to the community.

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[6] http://www.naaps.org.uk/en/homeshare

[7] www.keyring.org

8. Conclusion

There is no **one** housing and support option that works for everybody. We need to get a better balance of housing, support and service options so that people with learning disabilities have real choices, wherever they live. At this point in time, we struggle to get the balance right because we are trying to operate within financial and service structures that are often still geared towards 'the old way' of doing things. We should not allow that to put us off making the changes that give people real choice, control and inclusion.

Some housing options work for part of our lives but as we learn and grow, we change our ideas of what is important to us and we need to move on or change. This is no different for people with learning disabilities and we need to ensure that we have the flexibility with the service structures and funding so that housing and support can change with people.

Making wide-scale change is difficult when we are investing so much money in 'the old way' of doing things, in this case residential care. Thus a concerted effort is needed to shift the resources that we currently invest in residential care into more flexible supported living models, in the same way we have had to invest in the move from long stay hospitals and NHS campus provision

There are providers and commissioners wanting to make this change, that are then confronted by the maze of regulations and legislation that is intended to improve the lives of people with learning disabilities, that sometimes in itself makes this change difficult. The legality and sustainability of some supported living schemes has rightly been challenged through the Turnbull Judgement and the Alternative Futures cases[8]. This has left many providers and commissioners confused and nervous about changing residential care services, when policy dictates that they ought to be. In some cases there are no clear answers as to how we are going to do it. Consequently both local support and national action are important components of a change programme that will result in people having access to better housing options.

Over the coming 3 years, the NDTi Housing and Social Inclusion project will explore how we might challenge and overcome some of the barriers that stop us from shifting resources from residential care and make the move towards real supported living.

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[8] http://www.housing.org.uk/Uploads/File/Policy%20briefings/turnbull.pdf
http://www.housingoptions.org.uk/general_information/gi_quickbriefs/qb_24.pdf

Max Neill from Central Lancashire Learning Disability Partnership Board is given the last word in this paper;

"*The aim should not be to cut budgets, but to increase community supports, and to use budgets in a much better, more person centred way. When people get the control over their support they are entitled to, they naturally refuse to waste money.
Resources that enable people to connect and contribute are never wasted. Resources spent on inflexible systems that segregate and limit people's lives are doubly wasteful.*"

9. Further reading

Valuing People Now & PSA 16 housing delivery plan

The Valuing People Now and PSA 16 Housing Delivery Plan was launched on 31 March 2010. This is a cross government plan led by the Department of Health and Department for Communities and Local Government, to help people with learning disabilities get more choice and control in where they live. The delivery plan is supported by the Socially Excluded Adults Public Service Agreement target (PSA 16 target) that aims to increase the proportion of adults with moderate to severe learning difficulties in settled accommodation.
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_115235

This suite of resources was launched on 31 March 2010; it covers many subjects around different housing options available for people with learning disabilities.
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_115224

Delivering Social Inclusion: the role housing associations can play in PSA 16 – National Housing Federation

This guide, published by the National Housing Federation with support from CLG and the Cabinet Office summarises the PSA 16 target, highlights the role housing associations and support providers can play and looks at some of the opportunities and approaches that housing associations and local authorities have taken together to improve outcomes for groups experiencing exclusion.

www.housing.org.uk/careandsupport

Assistive Technology

http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/browse/LearningDisabilities/?parent=992&child=1174

Choice Based Lettings Guides

http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/browse/LearningDisabilities/?parent=992&child=3433

Communities and Local Government housing policy & guidance

http://www.communities.gov.uk/publications/localgovernment/strongsafeprosperous

http://www.communities.gov.uk/publications/housing/homesforfuture

Housing Options is a national housing information and advice service for people with learning disabilities.

www.housingoptions.org.uk