

Housing and support for people with learning difficulties: a local authority development programme

Promoting independence and supporting people in their own homes is a well-established priority for services for people with learning difficulties. Achievements nevertheless remain limited. Maurice Harker and Nigel King of the Housing and Support Partnership initiated a group development study with six local authorities supported by the Local Government Association and the Joseph Rowntree Foundation. The aim was to create more diverse housing and support. The study also reviewed the usefulness of this collaborative approach. The exercise showed that:

- f** There was often limited opportunity for choice. Two demands were substantial, places for those living with older carers and for those unsuitably placed in existing services.
- f** People with learning difficulties and their families needed information from authorities about housing or residential accommodation with support. Local authority managers wanted to be better informed of options.
- f** Data collection and comparison could be greatly improved. There was no common form for this and few authorities had a good map of services or of service gaps. Care assessments were not always used systematically to inform new service development.
- f** Social service, health and housing partnership has been frequently recommended in guidance but was inhibited by traditional functional structures. Health-funded hospital resettlement projects gave cause for concern because the investment is not protected and their future use uncertain.
- f** Amongst the factors identified as requirements for successful development were: the framework of a strategy; stability and consistency within the authority; commitment from senior management; a lead officer with authority for the task; and a local development group to act as focus for joint effort.
- f** The local authorities in the study were committed to positive programmes for change. They developed training materials, local action plans, annual targets for new housing placements, factsheets and tools for performance measurement. The study gave authorities a wider horizon, the confidence of shared aims and a focus and sanction for activity.

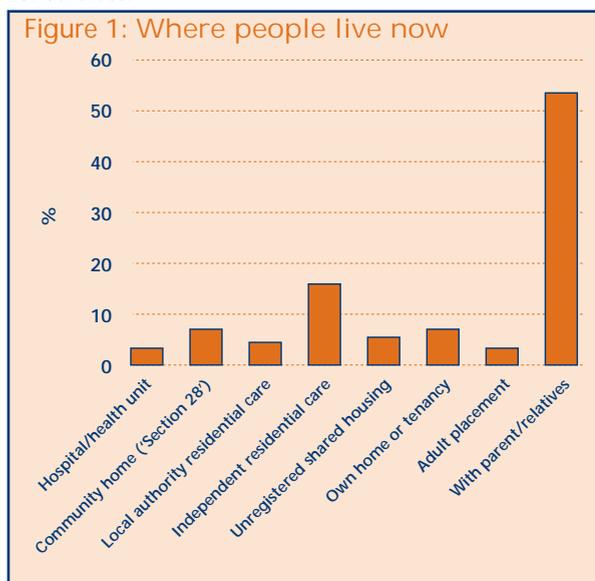
Background

The Housing and Support Partnership initiated a group development study with six local authorities with the aim of creating more diverse housing and support services for people with learning difficulties. The study helped each authority create a practical action plan and involved a collaborative group exercise.

Variety and range of options

Commissioners and service managers were keenly aware of the limitations of the housing and support available. There was insufficient opportunity for choice at the same time as the numbers of people with learning difficulties continues to rise and there are new expectations about independent living.

Until recently the main options have been hospital or residential care and this was reflected in the existing patterns of services in the pilot authorities. Although housing through ownership or renting is usual for the general population, amongst the study authorities only 7 per cent had their own home or tenancy and 53 per cent were still living with their families (see Figure 1). The study recommended a local target for new housing placements as part of a strategy for services.



In the six authorities, hospital resettlement had often produced a limited range of alternatives which took little account of future needs. Partnership between health and social services was patchy. There were examples of hospital resettlement still being based on a single model of provision. Some people were thought to need a move either because they were at home with ageing carers or because they were wrongly placed in existing residential services. There were particular difficulties finding options for those with complex needs and 'challenging behaviour', and

many examples of people receiving residential care when they could have been living more independently if the right form of support had been provided.

A strategy for service development

Some of the authorities did not have a good map of needs, services and service gaps; this may reflect the lack of a national standard of data collection. However, there were exceptions amongst the study group members. This evidence pointed to similar patterns of need but widely varying numbers and standards for services. Each of the authorities introduced improvements in the course of the study.

Casework information from care management and from local authority service providers was often not used for planning service development. The spot purchase of individual places may not help to shape a planned set of services, range of choice, good value, or ensure the right kind of service providers available for the job. The study proposed the setting up of local development groups as a way of sharing information and developing both strategy and a practical plan.

Value for money

There was a general lack of method to compare types of service and providers or performance between authorities. Relationships between purchasers and providers were often uncertain and the relative roles of in-house and out-of-house services not clearly defined.

The pilot study members contributed to the development of a 'toolkit' of simple methods. It was felt that costs, standards, quality assurance, audit, service aims and specifications, regulation and monitoring could each contribute to assessment and should be standard practice to improve efficiency.

Information for people with learning difficulties and their families

From the unexceptional cases of the pilot study there were many examples of people with older carers coping under stress and in difficulty. The absence of a plan for the future giving a measure of certainty was a common cause of anxiety and lack of confidence. This was a reason parents' organisations gave for resisting change.

There was inadequate public information for people and their families about the options for housing or residential accommodation with support, either because the information had not been collated or because there was uncertainty about what could with confidence be offered. This uncertainty could be both technical and financial.

Managers were aware that some families might resist change; some people would rather not face the prospect of a son or daughter leaving home. However,

others could be very clear what they wanted but could gain no firm guidance or support. The study members contributed to a detailed guide on housing and a series of simple leaflets for families.

Making better use of housing

The study authorities deliberately set out to improve the use of housing and had several recent examples of achievement. There were seen to be two essentials:

- a flexible, well-managed supported living or outreach service
- proper supervision and monitoring to ensure the safety and well-being of residents

Discussion with self-advocacy organisations highlighted concerns over the proper use of ordinary lettings where inadequate supervision failed to deal with problems of isolation or harassment. This made clear the need for explicit criteria for the suitability of ordinary housing to be agreed between housing and social services. The study produced an outline for the participating authorities - *Setting up a supported living service* - drawing on examples of current practice.

The system for the registration of residential care was a constant source of difficulty for new supported housing services. There was uncertainty over whether housing projects need to register and the impact of registration on residents' income and home life was seen to frustrate supported living options.

Partnership

Amongst the study authorities the relationship with the health authority and trusts generally needed better definition. There was no firm understanding of their future role. Past experience of joint commissioning lacked real integration. Some hospital resettlement programmes seemed to be taking place regardless of the local authority and continuing care responsibilities often required clarification. The places produced through earlier hospital resettlement represented a substantial investment whose future needed planning.

The partnership between social services and housing was generally well-intentioned and better developed but there were sometimes operational weaknesses. Systems ran in parallel rather than together and older habits and ways of thinking persisted despite strategic collaboration. This was most evident in two-tier authorities where a County social services authority covered several housing districts, but also occurred in the established unitaries. Despite examples of good practice among the study members - planning new development, shared information using

quotas - community care can still be a marginal concern for housing departments.

Strengths and weaknesses of the study

The group work required a shared agenda of aims and tasks. Local workshops or conferences were used to establish ideas and inform programmes. The group workshops and seminars were judged by participants to have been of benefit and to have produced useful general material. They allowed the sharing of ideas and experience and comparison between the authorities and were generally seen to be good value for money.

The study suggested that for action to be effective, it had to be closely linked to the local authority, its circumstances, agenda and organisation. The local report produced for each authority provided direction but the neither the study nor its consultants could manage the process for implementation. This crucially depended on local momentum which might change as local interests and pressures dictate.

A successful action programme required that the lead officer or group had the authority and support of the organisation. The organisational culture of corporate decision-making and planning might make this difficult and the study members gave first priority to the need for commitment from senior management and members.

A department or an authority which has suffered constant change or reorganisation may lose the consistency and confidence needed for effective action. The day-to-day pressures of operational work can push development, research or planning aside while emergencies are dealt with. Political and organisational change can spoil stability and commitment. Priorities, posts and budgets change and continuity or consistency lost.

The emergence of an effective local steering group for the work, properly 'tasked' or given the authority for the job was a vital step. Examples of failure to implement new initiatives had caused lively innovators to lose interest. In several of the pilot study authorities there were excellent examples of good ideas carried through. Particular local achievements referred to in feedback included:

- establishing a supported living 'outreach' service
- updating and improving the local database, producing a better 'service map'
- agreeing the agenda with housing, using allocations and nominations
- establishing a local action team or creating a post to develop services
- consultation meetings with families and in-house staff briefings

- producing information for families
- producing and implementing a local action plan
- working in partnership with registered social landlords
- involving families and service users
- working with health on planning and operational decisions

Conclusions

The researchers conclude that deliberate strategies and medium-term plans are needed to improve the range of housing, residential and support choices for people with learning difficulties. Lessons from the study include:

- The local profile of need and priorities, a map of existing provision and clear aims for services are all essential for proper planning. A housing need list offers a simple operational method.
- The knowledge of managers, providers, users and carers can all provide formidable incentives for improvement and change, without which services may remain inert. A strategy is needed for informing families and engaging in planning with them.
- By illustration the study showed how it is possible to do better within existing budgets if cost and effectiveness measures are used to improve the efficiency of commissioning and contract supervision.
- Proper supervision and monitoring to ensure the safety and well-being of residents are essential: routine management monitoring, looking at 'gains' or outcomes for service users, service audit, user consultation, formal regulation, care management systems, contract review, provider accreditation systems - all offer ways of driving performance.
- Agreement needs to be reached with registration authorities on the treatment of supported tenancies. Nationally a less intrusive system is needed to regulate a range of types of service where residents have their own home or a proper tenancy.
- Incentives are needed for partnership, joint strategies, budget agreements and shared programmes. In particular, health-funded hospital resettlement projects gave cause for concern because the investment is not protected and their future use uncertain.

About the study

The study was supported by the Local Government Association and the Joseph Rowntree Foundation. The study helped each authority create a practical action plan and involved a collaborative group exercise. The work included:

- forming a population and needs profile
- reviewing existing services and commitments
- deciding priorities for developing new services and reshaping existing ones
- illustrating new opportunities and housing options
- investigating better value and cost results
- supporting consultation with families and service users
- using lessons and good practice from the group and elsewhere
- evaluating the collaborative approach

Each authority identified its own aims for improvement which influenced local action plans.

How to get further information

The full report, **An ordinary home: Housing and support for people with learning disabilities** by Maurice Harker and Nigel King, is available from IDEA Publications, Layden House, 76-86 Turnmill Street, London EC1M 5LG, Tel: 0171 296 6600 (ISBN 1 84049 135 3, Ref: H0114, price £20 or £10 to local authorities).