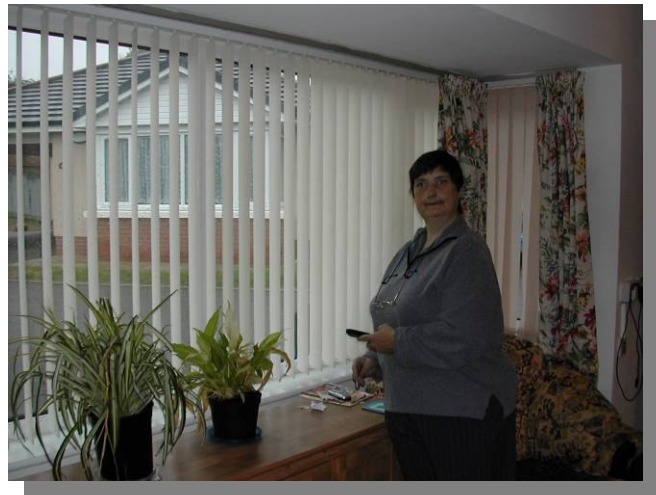


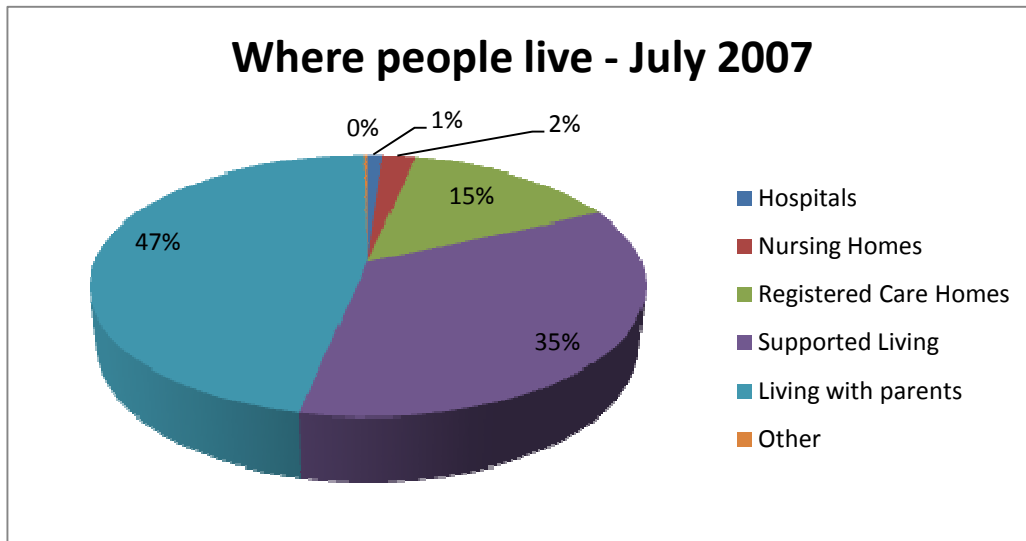
# Being Independent in the Community



## Introduction

This paper is about how people can be supported to be as independent as possible in the community. It has been written by Rick Wilson of Community Lives Consortium and John Craig of Walsingham Wales.

At the moment in Swansea we spend about £11.3 million on support to people living in the Community. (Figures (2005 / 2006) Accommodation Commissioning Strategy July 2007).

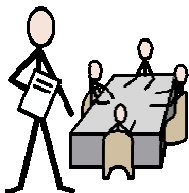


Firstly we are very proud of the services that we have created to help people to live in the community. These are very successful in supporting a large number of people to live happy, safe, and empowering lives. However we want to help people to get support to become as independent as they can while staying safe and happy in their own home.

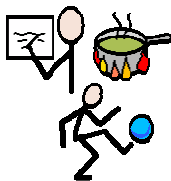
At the moment people often move into housing with support that meets their needs at the time when they move, however there is not a clear plan about how they will become more independent over time.

There is also not enough money to provide supported housing to all of the people who need it, when they need it using the approaches that we use mostly at the moment. This means that people may stay living in their family home longer than they should, or they may need to live in a hostel that does not meet their needs if they have to leave home.

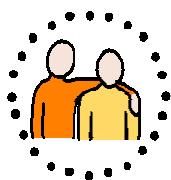
We want to see a more flexible way of providing services.



**Planning for the long term** - We want people to complete their own Housing Opportunity Plan, which helps them and their supporters to make some clear choices about how they wish to live over the long term and to plan the skills that they need to achieve their ambitions.



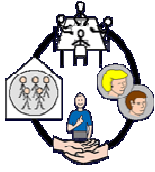
**Developing skills as early as possible** - We want people to get support to learn new skills and make relationships with support providers if necessary before they leave the family home.



**'Safe and happy at home' not 'homes for life'** - We want people and their supporters to accept that services that people use when leaving home will change, the support that they receive may increase or decline, it is normal for people to move home if they need to.

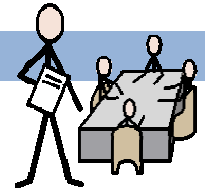


**Flexible services** – We want the agencies that support people to be able to be more flexible and to be monitored based on whether they are meeting people's needs rather than on how many hours that they are delivering.



**More open partnerships** – We want to have much more open discussions between people, their family members and the professionals who deliver and commission services about the types of service that people are offered and the ways that services are being delivered.

## Planning for the long term



In the Consortium and Walsingham Wales we are increasingly helping people to think about how they want to live their lives using person centred planning tools. We also gather satisfaction information from people through questionnaires and interviews.

Comparing these two sources of information is often very interesting and a bit confusing. Some tenants will tell you that they are completely satisfied with the services that they are receiving, and then present a person centred picture of a life which is completely different from the one that they are currently living.

While this is understandable, it does highlight that people are choosing from what is available rather than what they want. People often do not have a clear view of what they want, thus what becomes available becomes an 'end' rather than a step in the process of getting to the desired end.

When resources are scarce and services are in great demand, often people can feel under great pressure to settle for what is available and may at that point in time meet their immediate needs. Equally this pressure can discourage professionals from exploring with people their desired service for fear of raising people's expectations that then cannot be met.

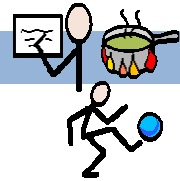
We want to start a person centred planning process that helps people and their supporters to consider their needs and ambitions to get support in the community. This would encourage people to think in the short, medium, and longer term about their desired outcomes. It would also help people to think about the way they want to live and be supported (ie. House or flat, alone or with others, help with money or personal care) rather than the agencies that provide services. They would also be supported to identify what help they need to make this plan occur; only one of these sources would be the local authority, others would be family or their personal network.

This process would be at arm's length from the Unified Assessment process which is required to ensure that resources are rationally and fairly allocated.

This will not prevent the need for compromise services, for example moving into a shared supported service when you want to live alone in a flat near your brother because support is required quickly. However the presence of the plan will enable services to identify how they can help the person get closer to their desired outcome through preparation and skill development while the next step is being planned.

Examples of these planning systems are already available; the [Housing Opportunity Planning](#) system designed by 'Housing Options' does this, as does planning approaches developed by ['Plan' \(Planned Lifetime Advocacy Network\)](#).

### Developing skills as early as possible.

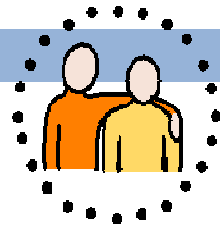


This next area naturally follows from the last.

If people are supported to think about their desired life in the community possibly years before they choose to move away into their own place. They then can choose to work slowly but systematically at developing the skills that they will need when they are more independent. This development of skills and experience can be supported by a growing relationship between the person, their family members, friends and people that they know in the community as well as support agencies. These networks of relationships can develop into robust networks of trust and knowledge with the person at the centre.

This is very different to the experience of many people currently who may get the majority of support from one source (often family members) for many years without a clear shared plan, if this support fails then everything has to be built from scratch at a time of crisis. This approach is very traumatic and probably more costly because without trust and shared knowledge stakeholders may often seek the most cautious option for the person.

### 'Safe and happy at home' not 'homes for life'



Many people who moved from long-stay hospitals and their families, experienced a great deal of uncertainty and anxiety. The hospitals whatever their limitations seemed to offer an unchanging stability that life in the community did not. The concern was that although people may be satisfied with their initial housing or support on leaving the hospital, what if it changed, where would people be then? Some family members sought assurances that things would not change in the future that these services would be 'Homes for Life'.

This notion of 'home for life' has become an expectation that services and support should stay static over time. This does not reflect the realities for many of us who move a number of times becoming more independent as we move away from the family home and becoming more or less dependent on the people around us depending on our personal circumstances, wellbeing and health.

We want to help people to change their expectations of support services, to services that are able to change to support people's continuing safety and happiness in their own home. This would mean that we would develop support systems that are much easier to move around depending on people's needs.

People may also choose to move, from somewhere they have been living successfully to try living more independently. This will help them to achieve their long-term plan and give others the chance to try living with others in the community.

Equally sleep-in support, although successful and essential initially, may be withdrawn and replaced with on-call support where there is evidence that it is not required.

This flexible approach may cause great anxiety, especially where family members want their relatives to be settled. However as long-term relationships of trust and partnership are built as discussed above, then the risks of being more flexible may feel safer. However the advantages to people who currently get no support or are in services that do not meet their needs or restrict their independence are huge.

We want to create mechanisms for exploring sharing expectations about services with stakeholders that create safe but empowering services.

## Flexible services



Currently a great deal of support is primarily focussed on particular groups of service users in particular services or addresses, however many people who live close to these services receive no additional support.

We want to work towards approaches for housing and support which are much more flexible:

Nigel King of the Housing Options agency approaches this flexibility with a discussion of variables. These are firstly:

- Built form – Housing can include; flats, houses, bungalows, maisonettes.

Then,

- Design Features – including; purpose built, adapted, ordinary street properties.

The legal status of the service and occupants is significant;

- Registration Status – Own home with Domiciliary Care service, or Care Home where accommodation exists together with personal care.
- Tenure – Owned or rented.

The Source of housing offers further alternatives;

- Housing Source – Local Authority, Registered Social Landlord, Private Landlord, Family Home (yours or other), Purchased on the open market.

You can live alone or together with others;

- Sharing or not – Live alone, shared housing, live with other people requiring support, live with other people who don't.

Now we can think about support;

- Type of Support – Professional paid staff, Support Tenant, Directly employed / Personal Assistant, Family, Community Support Network, Assistive Technology, Natural Support / mutual support.

You can get support from a range of agencies;

- Sources of support – Private agencies, voluntary agencies, charitable agencies, local authorities, relatives, landlords.

How you purchase support is also significant;

- Purchase of support – Support can be purchased for you through commissioned services; it can be purchased by you through Direct Payments, or Individual Budgets.  
Funding sources could include; Local Authorities, Health, personal or benefit income, ILF, and Supporting People funding.

Nigel King goes on to suggest that if you do the maths about these options there are literally 1000's of potential variations of ways that you can live successful lives in the community.

The reality of services in Wales is not so diverse. In reviewing the huge list of choices above we should ask ourselves why so few people get the opportunity to make them.

We feel the answer to this question concerns our assumptions about people's support needs.

- We believe that the majority of people require 24 hour support from people at home to support them. Without this they will be vulnerable and at risk of accident, neglect and exploitation.
- Thus from this comes the expectation that once people have moved away from the family home that they need 24 hour support from paid staff. If people have left home following a crisis, people may need higher levels of support because of the impact of this and the inability of their personal support network to support the transition.
- Due to the need for paid staff people must live together in groups with other people who need support or with another carer family. This is necessary to make the costs of the staff support affordable.
- Now that these people are living together in groups it becomes harder to find accommodation from mainstream housing sources. Thus specialist housing projects are commissioned. This makes these housing projects costly and complex to commission.
- Because these projects are relatively rare, places within them are in high demand. Therefore people are considered for them due to their acute housing need not because of their compatibility to their potential house mates. This will create a need for higher support packages and thus more expensive services.

Thus services norm around particular models, while this may be successful for many people these are; inflexible, too expensive to be replicated for all the people who need them, and do not reflect many people's aspirations.

They may also be based on an inaccurate premise;

- Research has shown that for people a significant range of learning disabilities 'drop in' assistance can be more empowering and is as safe as support that is always available. This research was conducted in Australia by Stancliffe & Keane (1999). This research has been replicated in the UK by the Welsh Centre for Learning Disabilities and the University of Lancaster (Welcome Trust Report 2006)

We want to be able to support people to move on from supported shared housing, they should be able to live in more independent models of housing when they choose to following a personal planning process.

We want to develop new models of personal support, these could include:

- Support Tenants and Home Share arrangements; this is where home owners with a disability recruit a supporter to live with them. Free housing is supplied in exchange for personal support.
- A much higher and wider use of assistive technology.
- The development of a 24 hour community response service. This will be able to direct personal support workers to people living in a local area where they require assistance, these could be requested by; the individual, other supporters, or assistive technology triggers.
- The development of telephone or computer based support for more able people to help them with mail, shopping, finance or other advice and support.
- Community development work to support the development of natural networks around people.

Services of this type would make the cost of supporting people who choose to live on their own more affordable and would thus open up more mainstream routes to housing and tenure.

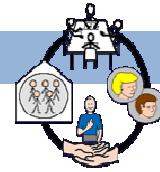
Making this happen would not require additional resources, these new models of service either exist in other parts of the UK, or are under development locally. They would be funded by re-modelling existing models of service.

However these changes do require:

- An Outcome based approach to commissioning which directs, supports, and monitors agencies on the basis of explicit Outcomes for services users, rather than focusing on service outputs and the process of delivery. This framework would either free providers to reallocate resources from existing contracts to develop new services or would provide bridging funding to support service development set against potential cost reductions once change had occurred.
- An open discussion about risk management and service outcomes between stakeholders including; commissioners, provider agencies and staff, service

users, and family members. For us to move forward this discussion must lead to an agreement to make risk more openly and collectively for the shared good.

## More open partnerships



The final area this paper addresses is that of open partnerships.

This paper has discussed how services could be delivered in a more person-centred more effective fashion to a greater number of people. However making this shift would require a much greater level of dialogue and partnership between stakeholders.

For example there is tremendous potential in re-modelling night time assistance. Swansea funds sleep-ins within Walsingham Wales and Social Services funded services. Swansea also spends £355,000 per year with CLC on 28 sleep-in members of staff, within the CLC this money funds support for 80 tenants.

- These staff, who are paid to sleep at these 28 addresses, respond to the needs at night of these tenants for security, care and support.
- This gives tenants, family members and other supporters security that these needs will be safely met.
- These sleep-ins also supplement the income of many excellent staff who do not receive a high rate of pay. However there are concerns whether this can continue due to the requirements of the working time directive.

However incidence recordings indicate that this sleep-in service although very important is used rarely by the majority of tenants.

Also this service is of no use to the range of people living close to these services who are supported by family or live alone but may sometimes need help.

Would it not make sense to share this support across a locality provided by fewer staff who are awake and can respond to people's needs when they occur?

Then the same investment could serve more people, more effectively and potentially create better employment.

This could only happen if all the different interests are openly explored and balanced through active dialogue. The cultural changes implicit in this paper can only occur through this kind of facilitated 'win win' dialogue.

We would like to explore how we can engage people in discussion like this, in this discussion the local authority is responsible for facilitating debate and problem solving rather than accountable for meeting expectation.

### **This is all very interesting, but what do we want to happen?**

This document has been deliberately written to stimulate discussion rather than to recommend specific action, however there are some useful action points that help us to move this forward, these are:

- To explore how Community Support Provider agencies or care managers could support people to develop for themselves a person-centred Housing Opportunity plan.
- To develop an Outcome based approach to commissioning which directs, supports, and monitors agencies on the basis of explicit Outcomes for service users, rather than focusing on service outputs and the process of delivery. This framework would either free providers to reallocate resources from existing contracts to develop new services or would provide bridging funding to support service development set against potential cost reductions once change had occurred.
- To request the provider forum to consider how an open discussion about risk management and service outcomes between stakeholders (including; commissioners, provider agencies and staff, service users, and family members) could be facilitated.
- To request the provider forum to further report on the potential to re-model community support services. This could be based on potential case-studies to enable effective discussion with the wide group of stakeholders.