

Response to Consultation

Date: 03 October 2008

Consultation: Bamford Review of Services for People with Mental Illness or learning Disability

Introduction

The Northern Ireland Federation of Housing Associations (NIFHA) represents 40 housing associations. This includes 33 of the associations registered and regulated by the Department for Social Development (DSD). Collectively, these associations provide 30,000 good quality, affordable homes for renting or equity sharing. Further information is available at www.nifha.org

Background

Many of NIFHA's members work directly with people who have a mental illness or learning disability. We were therefore keen to make a response to this consultation issued by the Department for Health, Social Services and Public Safety.

General Comments

The consultation was submitted online. There were a series of questions presented with a Yes or No answer. This was a mandatory system which we found extremely restrictive. We believe this format may distort the picture emerging from the consultation.

Specific Comments

Following are the additional comments NIFHA gave to some of the questions posed:

Q3: Chapter 4 summaries the current health and social care funding for mental health and learning disability services and proposes targets for the proportion of this which should be spent on community services. Is this the right balance?

Much more should be devoted to prevention and services outside hospitals.

Q10. Chapter nine identifies a range of issues that are being or will be addressed to improve services for people with a learning disability. Are this acceptable?

- a. Effective co-operation with the Dept for Social Development and the Housing Executive is required to reverse the very unwelcome decline in the number of supported housing schemes included in the Social Housing Development Programme. This requires much better joint planning and co-ordination between capital and revenue funding streams.
- b. Led by the DHSSPS, the Health and Social Care sector should enter into meaningful discussion with DSD about contributing some capital towards

the cost of accommodation offering physical standards that are significantly higher than the "wheelchair design standard" currently in the DSD's Housing Association Guide. A similar principle should be applied to the cost of adapting existing properties for social tenants who become disabled.

Q11: Chapter 10 identifies a range of issues that are being or will be addressed to improve services for adults with mental health problems. Are this acceptable?

As for Q 10

Q13: Chapter 12 identifies a range of issues that are being or will be addressed to improve services for older people with mental health problems or dementia. Are this acceptable?

As for Q10

Q14: Chapter 13 identifies a range of issues that are being or will be addressed to improve services for people with mental health problems and addiction problems. Are this acceptable?

As for Q10

Q17: Appendix 3 describes the outcome of the equality screening exercise. Do you think that the proposals outlines in the Executive's response to the Bamford Review are likely to have adverse impact on equality of opportunity or on good relations with regards to the Section75 categories of people?

The proposals do not seem to be backed by sufficient firm plans and resources to avoid worsening the disadvantage of disabled and older persons.

Q18: If you believe there are like to be adverse impacts on any of the S75 categories of people, can you suggest any ways in which they could be reduced or alleviated in the proposals?

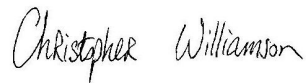
Adequately resourced community-based preventative services, support services and supported housing.

Q20 Are there any other comments you wish to make?

The housing associations in N Ireland are leaders in the field of community-based accommodation with care and/or housing support services. Aided by considerable sums of grant from the DSD (and since 2007 the NIHE) they have been facilitating the transfer into the community of hundreds of patients in mental health and learning disability hospitals and residents of substandard care homes and the provision of community-based accommodation for even more who might otherwise have to be admitted to hospital.

Often working in partnership with a wide range of more specialised voluntary organisations they have accumulated considerable experience and expertise that they are keen to continue contributing. But they are frustrated by the lack of resources for the task and the slow, cumbersome and opaque commissioning processes through which proposals must pass. Given these frustrations and the considerable financial and other risks involved, many are reluctantly concluding that they cannot continue developing supported accommodation. Urgent action is required to prevent the flow of new supported schemes from drying up.

Submitted on behalf of NIFHA by:

A handwritten signature in black ink that reads "Christopher Williamson". The script is cursive and fluid.

Chris Williamson
Chief Executive