



# **Who Cares?**

## **The Future of Adult Care and Support in Northern Ireland**

### **Consultation Questionnaire**

Please use this questionnaire to give us your views on the future of adult care and support services in NI. Please send your responses to:

Reform of Adult Care and Support Team  
Department of Health, Social Services and Public Safety  
Room D3.7  
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BELFAST BT4 3SQ

Email: [reform.careandsupport@dhsspsni.gov.uk](mailto:reform.careandsupport@dhsspsni.gov.uk)  
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**Please send us your views by 15 March 2013.**

**NB. Before responding to this consultation please take note of the Freedom of Information requirements in Appendix 1 at the end of this questionnaire.**

**Consultee Details**

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<b>Organisation (if applicable):</b>	<b>Northern Ireland Federation of Housing Associations (NIFHA)</b>
<b>Job Title (if applicable):</b>	<b>Chief Executive</b>
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<b>Contact Telephone Number:</b>	<b>028 9089 7693</b>
<b>Date:</b>	<b>15 March 2013</b>
<b>Are you responding (please tick):</b>	<b>On behalf of yourself?            <input checked="" type="checkbox"/></b> <b>On behalf of someone else?       <input type="checkbox"/></b>
<b>Are you/they (please tick):</b>	<b>a) over 65;                               <input type="checkbox"/></b> <b>b) under 65;                              <input type="checkbox"/></b> <b>c) disabled;                               <input type="checkbox"/></b> <b>d) a carer;                                 <input type="checkbox"/></b> <b>e) a parent;                                <input type="checkbox"/></b> <b>f) other?                                    <input type="checkbox"/></b>

**Question 1:**

**Were you aware previously what care and support services are available to you, and where to go or who to ask to gain access to these services?**

**Please delete: Yes**

**Question 2:**

**Do you agree with our vision for care and support?**

**Please delete: Yes**

**Comments:**

**NIFHA broadly agrees with the vision of Who Cares? for the future of care and support, including the ‘founding vision’ and ‘draft vision’, as set out in Part 3. However there is little detail provided on how the system can more effectively promote prevention and early intervention.**

**Northern Ireland’s housing associations and their charitable partners are major providers of housing related support services funded through Supporting People. Integrating housing, health and care and support is essential to delivering preventative services that deliver better outcomes. Housing associations are important partners for government in addressing the increasing demand for more flexible offers for care and support.**

**Housing is therefore a central part of an effective health and social care system. Integrated care, housing and support enables alternative care pathways to be provided that reduce the demand an individual has for acute services, as well as improving their quality of life. Specialist housing and housing-related support help people to live independently in the community, reducing the need for care and preventing poor health. Timely home adaptations and re-ablement services get people home from hospital quickly and prevent hospital readmissions, helping them to recover their independence after illness.**

**Effective joint working between providers of housing, health and care and support can:**

- Avoid or delay a move to residential care;**
- Reduce admittance to hospital and avoid readmission;**
- Reduce the demand for assessment and treatment centres;**
- Prevent the need for domiciliary care;**
- Prevent health emergencies and reduce demands on A&E; and**
- Prevent mental health deterioration and overall deterioration in health and wellbeing.**

**Therefore to deliver the vision of Who Cares? and Transforming Your Care, housing must be much more effectively integrated in to our health and social care system.**

**Question 3:**

**Do you agree that care and support should continue to be provided on a partnership basis between the statutory, private and voluntary sectors?**

**Please delete: Yes**

**Comments:**

**NIFHA agrees that care and support should continue to be provided on a partnership basis between the statutory, private and voluntary sectors.**

**Whilst existing partnership arrangements have achieved much, there is ample scope for them to be strengthened to achieve more effective and efficient service delivery.**

**Given the importance of Supporting People funded housing support and other housing services in delivering the objectives of Who Cares? and Transforming Your Care, joint commissioning of services between health and housing should be considered for the next spending period. At the very least there needs to be greater alignment of capital budgets across health and housing.**

**A more collaborative and consistent commissioning approach is needed for supported housing that commits all partners to provide and maintain housing, care and support in the community for people with complex needs. A more collaborative approach between the statutory, private and voluntary sectors is also required in service design and strategic commissioning. For example, housing associations and other charitable partners should be represented on the Supporting People Commissioning Body.**

**A more distinct and formal split between commissioning and provision within the public sector is also needed to maximise the potential for non-statutory providers to compete for services on a guaranteed level playing field.**

**Care and support services provided by housing associations are subject to rigorous quality monitoring from a number of bodies including the Northern Ireland Housing Executive (NIHE), DSD and the Regulation Quality and Improvement Authority (RQIA). This can result in costly and unnecessary duplication in inspection and inconsistent regulatory standards. Successful integration of health, housing, care and support requires clarity on the scope of the various regulatory and inspection regimes. Initiatives such as greater use of simultaneous inspections could greatly assist in reducing the time and costs needed to demonstrate compliance.**

**Question 4:**

**Do you agree care and support should focus more on earlier intervention and prevention of loss of independence? Should savings made in hospitals be reinvested in preventative care and support services?**

**Please delete: Yes**

**Comments:**

**NIFHA agrees that care and support should focus more on earlier intervention and the prevention of loss of independence, and that any savings made in acute services be re-invested in preventative care and support.**

**There is a growing evidence base that housing-related interventions can prevent or delay people entering the social care system and produce better outcomes for people at a lower overall cost. As the Dilnot Commission Report recognises, integrating housing, health and care is essential to delivering preventative services that deliver better outcomes. Northern Ireland's housing associations are well-placed to deliver the intermediate care envisaged as an alternative to long-term care.**

**Learning from good practice across the UK and further afield is also important here. NIFHA commends the work of the National Housing Federation, such as its recent publication '[On the Pulse](#)'. The report shows how housing associations can work with health and social care commissioners to enable older people to manage changes in their health, help people live as independently as possible, and reduce the need for more costly care. Its case studies describe innovative solutions including support for patients with dementia, use of telecare, home from hospital services, short-term intermediate housing and end of life care.**

**Question 5:**

**Do you agree that people who need care and support should have control over how their assessed care and support needs should be met?**

**Please delete: Yes**

**Comments:**

**NIFHA agrees that people in receipt of care and support should have as much choice and control over the services they receive as they wish and is reasonably possible. We welcome the increasing opportunities for service users to personalise services through the use of Direct Payments, and the piloting of Self-Directed Support.**

**Housing associations already deliver a wide range of services that promote independence and prevent people needing more intensive and institutional forms of care, including:**

- **inclusive design including new homes built to Lifetime Homes**
- **adaptations, handyperson and care and repair schemes**
- **advice and information on housing options**
- **supported, sheltered and specialist housing**
- **support services built around individual needs and preferences**
- **assistive technology, telecare and telehealth, as pioneered by Fold Housing Association**

**Greater personalisation of services will have to be accompanied by careful consideration of the degree of independence that is desirable, realistic and economically viable for particular groups of people. For example, service users such as frail elderly people with mild dementia may not welcome onerous expectations that they personalise their housing, care and support. Also in some circumstances their needs may be met more effectively and cost-effectively through living in a group setting, such as an Abbeyfield community, rather than be supported to live independently as long as possible.**

**Question 6:**

**Do you agree that we have identified the right areas for reform?**

**Please delete: Yes**

**Question 7:**

**Do you agree that there should be a balance between fulfilling individual preferences for how care and support needs are met and ensuring that resources are used efficiently to provide support to as many people as possible?**

**Please delete: Yes**

**Comments:**

**As already outlined above, NIFHA believes that by integrating housing, health and care services more closely, it should be possible to better support service users' aspirations to live in their own homes whilst managing constrained budgets. We are keen to enter in to a dialogue with DHSSPS on how to accelerate this integration process.**

**Question 8:**

**Do you think that the current balance of responsibility between government, people who use services and carers is fair/right?**

**Please delete: No**

**If not, how should we change the role of:**

- (a) Government?**
- (b) People who use services?**
- (c) Community and Carers?**

**Comments:**

**Who Cares? highlights significant anomalies in the way for care and support is funded, such as the personal domiciliary care being provided free of charge whereas residential and nursing home care is means-tested.**

**In England, The Dilnot Commission has grappled with the major funding challenges of funding care and support including:**

- **How best to meet the costs of care and support as a partnership between individuals and the state;**
- **How people could choose to protect their assets, especially their homes, against the cost of care**
- **How, both now and in the future, public funding for the care and support system can be best used to meet care and support needs**

**NIFHA believes that as a decent society prioritises care for its most vulnerable, Government will have to remain a major funder of care and support for the foreseeable future, and that its resources should be prioritised towards people least able to pay for their care and support.**

**This will require most people being expected to take on greater financial responsibility for funding their care and support needs. We expect that approaches taken in Great Britain to the funding of care and support will have a major influence on the policy eventually adopted in Northern Ireland. The approach outlined by Dilnot that would allow for much greater funding of services by individuals whilst offering significant protection of assets seems fair and sustainable.**

**ENDS**