Social care and support

De-registration of care homes by local authorities

Date: August 2020

What is the de-registration of care homes by local authorities?

This is the term used to describe the process of changing a registered (with the Care Quality Commission) care home into what is described as supported living or as the government calls it ‘permanent or settled accommodation’. This is where the resident has tenancy rights to live within and occupy the property and has full access to their welfare benefits entitlement.

What difference will it make to the way the home runs?

It is more than just changing the sign above the home to say ‘supported living’.

The change involves setting up a new support plan with the person, them (or their representative) signing an assured shorthold tenancy and applying for the welfare benefits they are entitled to (including council tax exemption).

It also means making sure that an ‘active support’ approach is taken by the support provider which in simple terms means doing things with the person (to the greatest extent that they can be involved) and not doing things for them.

Sometimes the existing building stays exactly as it is but occasionally there may be physical changes made such as the conversion of some or all of the property into shared or individual flats or there may be an extension built with additional accommodation as an annex for example.

Why is this happening?

Services have been changing from Residential Care Home status into Supported Living services for more than 18 years. However, there is ever more increasing emphasis being given to ensuring that people who use services are offered greater choice and control on how their services are delivered.

This approach reflects the moves towards the implementation of the “personalisation” agenda and applies equally to the services delivered to people who have learning disabilities.

In recent years many local authorities have been moving away from ‘placing’ people in residential care. The momentum for changing from residential care to supported living can
come from different perspectives usually the main commissioner, the provider or much more unusually, from the “residents” themselves.

There are usually a number of reasons that lead up to the change including:

- A wish to move in line with national and local policy intentions
- The provider has concerns about the medium to long term sustainability of their residential care homes in a market where supported living is becoming the de facto choice for more and more young people moving towards adulthood
- Changing expectations of people who have learning disabilities and their families around increased understanding of their rights, choice and control of their support
- An awareness of the need to spend the resources available as effectively as possible.

There is also a real need to respond to the limitations on the housing stock available, particularly in certain parts of the country – de registration adds to the amount of available permanent accommodation in an area and this is considered by councils to be very desirable.

**Is the local authority doing this to save money?**

The fees paid by local authorities to residential care providers always include an element to pay for the cost of the persons accommodation (mortgage cost, building repairs and maintenance etc).

When a residential care home changes to become permanent accommodation the responsibility for paying the accommodation costs transfers from the local authority to the housing benefit office. There may therefore be a weekly cost saving for the local authority through the change of funding source but the net cost to the public purse remains broadly the same.

**So...the local authority is making a cost saving. Are there any actual benefits for the person then?**

It isn’t all about money though – there are genuine benefits to people when changing from residential to supported living.

The table below illustrates the difference between the two types of approach:

<table>
<thead>
<tr>
<th>Supported Living</th>
<th>Residential care home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Own home or tenancy. Long term security of tenure.</td>
<td>Licence agreement with no security of tenure. Can be evicted from home with only 28 days’ notice if home owner decides.</td>
</tr>
<tr>
<td>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.</td>
<td>Support is provided as part of a package with housing and either element cannot be changed without impacting on the other.</td>
</tr>
<tr>
<td>Supported Living</td>
<td>Residential care home</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>As a tenant or homeowner, the person has a right to choose who they live with if anyone.</td>
<td>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.</td>
</tr>
<tr>
<td>Tenants and homeowners have rights to full welfare benefits including housing benefit, Universal Credit (UC), Employment and Support Allowance (ESA) and either Disability Living Allowance (DLA) or Personal Independence Payment (PIP)</td>
<td>People in residential care have rights to limited amounts of welfare benefits and most people access a small residential care allowance per week to purchase personal belongings, clothes and holidays</td>
</tr>
<tr>
<td>Can access Direct Payments and Individual Service Funds (ISFs) giving greater flexibility in choosing how to use their social care funding to meet outcomes</td>
<td>Cannot access Direct payments or ISFs. Restricted to receiving support only from the residential care provider (or their contractors). No flexibility in how personal budget gets used.</td>
</tr>
</tbody>
</table>

**What about people who have made the change already......what do they think?**

The personal story below is provided by Choice Support – they made the change from being a residential care provider to supported living a number of years ago.

**What the change of my home means for me!**

'I am a 68 year-old woman and I live in a large house in East Dulwich with 7 other people. The service manager and staff team asked me, my brother and my advocate if where I live should be supported living. We all agreed this was a good idea. On 8 May 2010 we got a letter from CQC to say that my home is now supported living.

'The first thing was for me to sign my new tenancy agreement. The manager explained the rights my tenancy agreement gives me. I can stay in my home for as long as I want so long as I pay my rent and do what the tenancy says. This is much better than the license I had in registered care because the license could be ended at any time and I would have to move out. Now where I live really feels like my home.

'Next the staff helped me to apply for the benefits that someone in supported living can claim. I claim housing benefit which pays my rent. I also get pension credit and DLA to pay for my daily living costs. Before I only had a little money each week and my bills were paid for me. Now I have a lot more money. I pay my own bills and what is left over is for me to spend as I wish. I hope to save enough money to go on holiday – twice a year! I have more choice about my home now – how I want my room to look is up to me.'
‘The staff don’t use a room in my home as an office anymore. They do their paperwork at the Choice office in Barry Road. The staff are only in my house to support me and the people I live with. This is much better. Now I have a cupboard in my room where I keep my money and my medication and personal documents like my support plan. Before these were kept in the office. Now I have control over who sees my private things and I choose which staff support me with my paperwork, money and medication.

‘I am glad my home changed to supported living. I have a lot more say in what happens in my home and more choices.’

What should the de-registration look like?

Broadly the steps that need to be taken to de-register a care home are the same anywhere in England.

The table below is based on the NDTI’s Feeling Settled Project and shows what a good de-registration should look like from different perspectives:

<table>
<thead>
<tr>
<th>The individual’s step-by-step pathway</th>
<th>Activity required by others to support each step</th>
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<tbody>
<tr>
<td><strong>Step 1</strong></td>
<td><strong>Support provider</strong></td>
</tr>
<tr>
<td>I am told about the idea of changing my service from a residential Care Home to a Supported Living Service.</td>
<td>Care Manager/Commissioner</td>
</tr>
<tr>
<td>I need to find out what my choices are and then decide what I want to do.</td>
<td>Accessible materials to set out why this process is being considered, the pros and cons of the choices available, a timetable and details of who will do what.</td>
</tr>
<tr>
<td>Some people might decide to move either to another Supported Living arrangement or to another Residential Care Home.</td>
<td>Service users will also be assured that the position of the staff is also part of the process.</td>
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<tr>
<td></td>
<td>Arrangements for accessing independent advocacy are made and explained to service users.</td>
</tr>
<tr>
<td></td>
<td>Initial consultation with service users, families, advocates and other interested parties.</td>
</tr>
</tbody>
</table>
| **Step 2** | **Support provider**  
**Care Manager/Commissioner** | **Housing Provider** |
|-------------|---------------------------------------------------------------|---------------------|
| I have decided that I want to stay in my home as it changes into a Supported Living Service.  
I work out how I want to live my life by doing a person-centred plan (and in the future, a self-assessment questionnaire).  
This PCP will help me work out what is important to me, what is good about where I live and what I would like to change, and how my new home should look. | Arrange for person-centred planning to be carried out with advocates involved as requested. | Design and cost potential changes, taking into account individual preferences, building regulations, planning requirements, other restrictions, future proofing, CQC requirements.  
Check affordability of possible changes.  
Talk through position with individuals, support provider and commissioners/care managers. |

<table>
<thead>
<tr>
<th><strong>Step 3</strong></th>
<th><strong>Care Manager/Commissioner</strong></th>
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</table>
| I have an assessment which works out what my support needs are.  
Sometimes staff with specialist skills will be part of this (eg. occupational therapists) if I need help with making decisions; this should be fully covered at this stage as well. | Carry out assessments (or support self-assessment as part of personalisation processes). |

| **Step 4** | **Care Manager/Commissioner**  
**Support provider** |
|-------------|---------------------------------------------------------------|---------------------|
| I find out how much money is available for my support.  
I also find out what other income I can get and I apply for it.  
I work out how to use this money by doing a support plan.  
I might share some support with others. | Agree a resource allocation or funding level for each individual, inform DWP of changes.  
Agree Support Plan. | Assist people to maximise their income.  
Help people set out a support plan ensuring that advocates, families etc are fully involved where this is wanted.  
Assist people to apply for maximum income available.  
Support people to think creatively about using community and natural resources for support and to consider sharing support where suitable. |
<table>
<thead>
<tr>
<th>Step 5</th>
<th>Support Provider/Housing Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>I find out who my landlord is and get information about my rights and responsibilities as a tenant.</td>
<td>Use accessible tenancy information to explain the individual’s rights and responsibilities.</td>
</tr>
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<thead>
<tr>
<th>Step 6</th>
<th>Support Provider</th>
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</thead>
</table>
| I decide on my staffing support arrangements. | Arrange staffing so that individual support can be delivered. 
Where necessary support individuals in receipt of direct payments to recruit personal assistants and involve advocates as needed. |

<table>
<thead>
<tr>
<th>Step 7</th>
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<tbody>
<tr>
<td>My support package starts.</td>
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</tbody>
</table>

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<thead>
<tr>
<th>Step 8</th>
<th>Support provider</th>
</tr>
</thead>
</table>
| I review how things are going and make any changes I need to. | Care Manager/Commissioner 
Arrange reviews and ensure person remains aware of all the choices available to them and is supported by the people they choose. 
‘Quality assurance’ systems such as REACH should be in place along with continuing opportunities for individuals and staff to reflect on how the services are being delivered. |
Who should I contact to find out more?

In the first instance you should speak to the residential care home provider and the local authority commissioner of the service who should talk you through the planned process and explain any changes that will be made in terms of the persons support.

We can help

If you have any questions about social care, please contact us using Tel: 0333 1212 300 or Email: info@downs-syndrome.org.uk. If our information officers are unable to help, they will refer you to our social care adviser.

Contact us

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