

From Paul Burstow MP
Minister of State for Care Services



Ref: POC3 593411

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To: The National Forum of People with Learning Difficulties
The National Valuing Families Forum

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Dear colleague

16 FEB 2011

**The National Learning Disability Programme Board - 20 January –
Presentations by the National Forum of People with Learning Difficulties
and the National Valuing Families Forum (NVFF)**

Thank you for setting out so clearly with me at the learning disability Programme Board all your concerns about the future of work to support people with learning disabilities and their families.

Let me make it clear that I see the two Forums as very important in helping Government understand the issues and challenges which people with learning disabilities and their families face. I believe the Forums have a key role to play, both at a local and national level to ensure that the voices of people with learning disabilities and family carers are heard. We have done a great deal of useful work together – like the Staying Strong guidance which Gavin launched at the Board on 20 January. I have heard, and understand, what the NVFF said about families feeling fearful, overloaded and angry.

I address below the main issues you have raised on behalf of your members about cuts to local services, the Resource Allocation System (RAS), HealthWatch, support for carers, the introduction of GP consortia and the Independent Living Fund. I am sorry if my reply is lengthy but you raised some important points that I want to address in full.

Cuts to local services

In the light of the economic situation we face, every council has to make savings. It will be for each council to decide how to do that, and how to free resources to meet priority local needs and improve people's care. We are keen to ensure that those who need support will have their needs met, and that is why we announced in the spending review an extra £2 billion for social care. We know reform of the social care system is needed. That is why we established an independent Commission to consider how we ensure affordable and sustainable funding for care and support for all adults including those with learning disabilities. The Commission will report to us in July and we will bring forward plans for reform by the end of the year.

Resource Allocation System

You said that your members reported real confusion about the Resource Allocation System (RAS). RAS is intended to be a transparent process and it

is good practice to make this available locally through council websites. You may be aware that the Common Resource Allocation Framework developed by the Association of Directors of Adult Social Services (ADASS) in 2009 was updated last July. If your members have issues about how RAS is being applied locally they need to raise this at the local level through the formal local authority complaints procedure if necessary.

HealthWatch

You ask how people with a learning disabilities and their families can get involved in the development of HealthWatch. The Department has put in place a HealthWatch programme which has a Programme Board and an Advisory Group. They are represented by LINKs, voluntary and community organisations to provide a bottom-up approach to co-production. The Programme Board and Advisory Group met for the first time in late January and early February respectively and the National Forum of People with Learning Difficulties has already been invited to be members of the Advisory Group. It is our intention to extend this invitation to the National Valuing Families Forum (NVFF) in time for the next meeting in March.

Support for carers

You said that your members are angry that funding for carers is not ring fenced. Whilst I understand your concerns, this Government's policy is to enhance freedom for local government and PCTs as much as possible by reducing ring fencing and freeing up resources to concentrate on local priorities and the delivery of essential frontline services. PCTs should pool budgets with local authorities to provide carers' breaks, as far as possible, via direct payments or personal health budgets. For 2011/12, PCTs should agree policies, plans and budgets to support carers with local authorities and local carers' organisations, and make them available to local people.

GP consortia

You also flagged concerns about how GP consortia arrangements would work for the future and that GPs may not take on people with very high support needs. Let me assure you that for the future, as now, practices cannot refuse to register patients due to their medical condition. They would be in breach of their primary medical care contract if they did so.

A patient will become the responsibility of a consortium through registering with a practice within that consortium.

In the recent past, commissioning has been too remote from the patients it serves. The proposal for commissioning to be led by GP consortia will bring decision-making much closer to patients and local communities. It will enable consortia to work closely with secondary care, other health and care professionals and with community partners to design joined-up services that provide the best possible care to patients and the public.

The Independent Living Fund (ILF)

I have noted your concerns about changes to the ILF. We have previously had good discussions on this at the Board and DWP officials have updated you on progress. The Government's view is that with increased personalisation, and

changes to people's rights to direct payments, it is no longer appropriate for the provision of essential social care support to be delivered to people through a cash limited discretionary trust fund rather than by the local authorities who have the primary statutory responsibility. By 2013 councils should be offering all eligible social care users a personal budget. This means much more control for individuals to decide how best to meet their needs. It is thus more equitable to integrate the ILF into this more personalised social care system. The ILF budget will be protected through the spending review period and will continue to administer payments to existing users throughout this period. And we will consult on proposed changes.

You gave some key messages around the key priorities in valuing people.

Health

We will work with PCTs and local authorities in the transition to the new arrangements with the NHS Commissioning Board and GP consortia as they develop to ensure that the needs of everyone, including people with learning disabilities and their families and carers are fully recognised.

You asked about future funding of the Confidential Inquiry and the Public Health Observatory. As I said at the Board, I am expecting advice soon from officials about how these have performed this year, to help me decide whether to go ahead with years 2 and 3. The Monitoring and Evaluation Group for these projects on which Viv Cooper and Dot Goldsworthy represent the Forums meets on 15 February and I expect advice shortly after that.

Housing

I share your ambition that people with learning disabilities are supported to live independently as active members of their community. I have been in discussion with other external partners and ministerial colleagues on the issues around changes to benefits and how these might impact on people with disabilities. I understand the concern that they may make it more difficult for people with learning disabilities living with ageing family carers to move into their own homes in the community. Officials in this Department and in the Department for Work and Pensions are working closely together on this.

Employment

The Government is committed to helping people with learning disabilities get jobs. The Vision for Adult Social Care made it clear that employment is the business of social care. It forms a part of the new Adult Social Care outcomes framework which we are currently consulting on.

We're also talking to colleagues at the Department for Education about how this important issue will be included in their Green Paper on Special Educational Needs and Disability which will be published soon.

In your letter you raised three questions about funding and accountability.

- o First, you ask about future funding of the NVFF and the National Forum and about transitional arrangement. I hope to be in a position

very shortly to write to you about funding. If funding is agreed, there will be a tender process for both contracts. We are considering the transitional arrangements that would be needed for the 4-6 months when the tender exercises are underway.

- o Secondly, I know that you are very worried about what will happen when the funding for the Valuing People team at DH stops at the end of March. I would like to say very clearly again that I, with the rest of the Government, am determined to continue to drive forward work to give people with learning disabilities control over their lives and the care they receive. I want to continue to focus work from Government to support people to get jobs and homes of their own and to improve health outcomes.
- o Thirdly, you ask how families will know who is accountable when things are not working locally. As I explained earlier, the introduction of GP consortia will mean that commissioners as decision-makers are closer to and accountable to patients and local communities. The establishment of HealthWatch, a key part of the vision set out in the White Paper 'Equity and excellence: Liberating the NHS', will give consumers a stronger voice, building on the current LINKs to create local HealthWatch organisation.

Our key aim is to put people with learning disabilities – and the families who care for them – in the driving seat, with greater choice and control and able to contribute to/influence decisions which affect their lives. "Nothing about us without us" is as important to me, and to my fellow ministers, as it ever has been. I, and my officials, will continue to work very closely with you, and all our other external partners, to keep your voices at the heart of policy at a national level.

Yours sincerely,



PAUL BURSTOW