

Dear [Addressee]

**“The true measure of any society can be found in how it treats its most vulnerable members.”<sup>1</sup>**

We at Rescare are reaching out to a range of influential social care professionals, academics, politicians and families and friends of adults with learning disabilities, complex needs or autism, in order to stimulate debate and bring about policy changes to enhance lifestyle choice for the most vulnerable people in our society. Rescare was founded in 1984 and has members all over the UK. We have campaigned for, and always supported, the right to choose the type of care which is most suitable for each individual.

In the first instance, our priority is to seek to bring an end to the current national trend of breaking up long-established, residential communities of disabled adults<sup>2</sup>, which is inflicting on their vulnerable residents the distress and anxiety (and, in some cases, life-shortening trauma) of being forcibly “moved on” from their long-term homes.

Our impetus is the distressing reality that this trend is eroding choice for adults with learning disabilities, complex needs or autism and inflicting real human distress on some of society’s most vulnerable people. Our perception is that this is occurring because of a number of structural and practical defects in the current system which, most prominently, include the following:

- **Commissioning practice** – There is a clear preference among those who commission adult social care in many local authorities to move people away from the option of life in a residential community of similarly disabled adults, in favour of alternative accommodation options, like supported living. In our view, this preference, which is motivated by the otherwise laudable objective of increasing independence for adults with disabilities, fails to recognise and give due weight to the fact that good care is not a “one size fits all” proposition and that there are a significant number of adults, with moderate to severe learning disabilities, complex needs or autism, for whom care in residential community is the best option and the one which many such adults and their families and carers would freely choose, if it was available.
- **A distorted funding model** – This trend to moving people on from residential communities has been exacerbated by a structural anomaly in the funding of adult social care, which means that it costs more for a local authority to accommodate people in residential care, not because that mode of care is inherently more expensive<sup>3</sup>, but because the current system imposes the entire cost of “residential care” on the local authority, whereas the cost of “supported living” is shared by central government via the housing benefit. This creates an artificial financial incentive for local authorities to place, or move, adults with moderate to severe learning disabilities away from a residential care setting, even though this may be the best option for that individual.

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<sup>1</sup> Mahatma Ghandi.

<sup>2</sup> Recent examples include: the closure of Milton Heights in Oxfordshire in 2020 - [www.bbc.com/news/uk-england-oxfordshire-51537724](http://www.bbc.com/news/uk-england-oxfordshire-51537724) ; the announcement in October 2020 of the proposed closure of Furlong Close in Wiltshire - [www.facebook.com/StopHFTClosure](http://www.facebook.com/StopHFTClosure) ; and an ongoing review of the possible closure of Ravenswood Village in Wokingham - [jewishnews.timesofisrael.com/letters-to-the-editor-wrong-about-ravenswood/](http://jewishnews.timesofisrael.com/letters-to-the-editor-wrong-about-ravenswood/)

<sup>3</sup> On the contrary, it is generally less costly than the primary alternative of “supported living”.

- **Apparent misuse of CQC guidance** – The running down and closure of residential communities is often justified on the basis of a misconception that the CQC is opposed to the continuation of such communities. In fact, however:
  - The CQC does not rule out the registration of even new larger services, as long as the provider can “*demonstrate that they can provide appropriate, person-centred care*”<sup>4</sup>; and
  - Critically, in relation to existing sites, the CQC’s policy is that it does not want “*to disrupt the lives of people who are currently residing in a service that is not small-scale, provided that the care provided is person-centred*”<sup>5</sup> and, indeed, that it would be “*wrong*” to require such places to close because of the distress and trauma this would inflict on vulnerable people who are happily settled there<sup>6</sup>.
- **Residential communities disappearing** – Over time, these influences have increasingly led to the running down and closure of such communities, which has had the result of:
  - Inflicting considerable distress and trauma on some of the most vulnerable people in our community; and
  - Narrowing choice for disabled adults, who are being pressed into other accommodation options which are, in many cases, not those which are most appropriate for their needs and which they do not want.

Further, at the same time that the intentional community sector is being steadily dismantled:

- There is a nationwide shortage of accommodation for adults with learning disabilities or autism with complex needs or challenging behaviours; and
- Adults with learning disabilities are increasingly living into old age, when they are unable to be cared for by their aging parents. The fact that these vulnerable adults also experience poorer health than the general population and have a higher prevalence of mental health problems and early onset dementia, means that there is an increasing need for high-quality, residential care accommodation for them.

There has also been an increasing recognition in recent years that well-run residential communities<sup>7</sup>, far from being the isolating institutions of yesteryear, provide a model of communal care which can offer adults with moderate to severe learning disabilities, complex needs or autism:

- “*An unparalleled opportunity for community engagement and involvement*”<sup>8</sup>, recognising that “*people with learning disabilities, like all human beings, search for community and building relationships*”<sup>9</sup> and “*people with learning disabilities are no different from the rest of us in that they, too, want friends and a peer group with whom they can feel comfortable and share interests*”<sup>10</sup>;

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<sup>4</sup> Registering the Right Support, CQC, June 2017, p. 5

([https://www.cqc.org.uk/sites/default/files/20170612\\_registering\\_the\\_right\\_support\\_final.pdf](https://www.cqc.org.uk/sites/default/files/20170612_registering_the_right_support_final.pdf))

<sup>5</sup> Registering the Right Support, CQC, June 2017, p. 7

<sup>6</sup> *Lifeways Community Care Limited v CQC* [2019] UKFTT 464 at [38], [52]

<sup>7</sup> For instance, like Stanley Grange in Lancashire - [www.stanleygrange.org.uk/](http://www.stanleygrange.org.uk/) - and Paradise House in Gloucestershire - [www.paradise-house.org.uk/](http://www.paradise-house.org.uk/)

<sup>8</sup> *The Need for Community: A study of housing for adults with Learning Disabilities*, The Centre for Social Justice, June 2016 ([www.centreforsocialjustice.org.uk/wp-content/uploads/2018/03/CSJJ4540\\_Enabling\\_Independence\\_Report\\_06.16\\_WEB-READY.pdf](http://www.centreforsocialjustice.org.uk/wp-content/uploads/2018/03/CSJJ4540_Enabling_Independence_Report_06.16_WEB-READY.pdf))

<sup>9</sup> Dr Theresia Baumker, Housing Learning & Improvement Network, Viewpoint 88, October 2017 -

[www.housinglin.org.uk/assets/Resources/Housing/Support\\_materials/Viewpoints/HLIN\\_Viewpoint\\_88\\_LD-Choice.pdf](http://www.housinglin.org.uk/assets/Resources/Housing/Support_materials/Viewpoints/HLIN_Viewpoint_88_LD-Choice.pdf)

<sup>10</sup> Rosa Monckton, *Thrown out of their homes by penny pinchers*, Daily Mail, 16 April 2014.


- For some, whose disabilities are too profound to allow them to freely access the local community, an escape from the loneliness and isolation which can all too often accompany “independent” living in the general community<sup>11</sup>;
- Life in a peaceful village or countryside setting which can often meet the sensory needs of a learning disabled or autistic adult “*far better than the hustle and bustle of a town house*”<sup>12</sup>; and
- The ability to choose the lifestyle they want, which is a central tenet of modern practice in adult social care i.e. “*Social justice is about giving people the opportunity to shape their own lives ... only by giving those with learning disabilities options to choose effective support that is right for them will we achieve this in our society*”<sup>13</sup>.

For these reasons, we believe that the current national trend to closing down long-established, residential communities of disabled adults is a matter of real and urgent concern.

We are writing to people with an interest in adult social care, like yourself, to open a line of communication with you and to ask you to register your interest in participating in our campaign. Depending upon interest we may be in a position to convene a national conference to share ideas and debate ways forward.

If you are interested in joining or engaging with us, or know of someone else who might be interested in doing so, we would be very happy to hear from you. Alternatively, if you are not interested in receiving our communications, please let us know and we will remove you from our mailing list.

Yours faithfully,



Anita Bennett  
Chair, RESCARE



Dr Katie Booth  
Trustee

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<sup>11</sup> See “*Vulnerability to Loneliness in People with Intellectual Disability: an explanatory model*” (2014) Journal of Policy and Practice in Intellectual Disabilities; Carwyn Gravell, *Loneliness + Cruelty*, Lemos & Crane, 2012.

<sup>12</sup> *Centurion Health Care Ltd v CQC* [2018] UKFTT 615 at [36]

<sup>13</sup> *The Need for Community: A study of housing for adults with Learning Disabilities*, The Centre for Social Justice, June 2016