

**Witness statement****Brackenridge Services Ltd (BSL)****27 June 2022****In response to Mrs Alison Adams statement WITN0984001**

Thank you for the opportunity to respond to Mrs Adams' statement. I want to acknowledge that contributing to the Inquiry will be extremely difficult for Mrs Adams and her family and whānau. I am very sorry that the support provided to her sons at the time of their move to Brackenridge Services Ltd (BSL) in 1999 was inadequate, and for the distress this caused the family. BSL aspires to a higher standard of support today and I acknowledge, in reviewing her testimony, that the transition from the Templeton Centre to BSL could have been actioned better in support of Nigel and Malcolm and their family or whānau.

**Some context about BSL:**

BSL is a wholly owned subsidiary of the Canterbury District Health Board and provides community residential and respite support across the Canterbury region for over 200 people with high and complex support needs, this includes people who are intellectually disabled and/or have an autism diagnosis. Many of the people BSL support experience a mix of sensory impairments, some communicate non-verbally, some express behaviours that are challenging, some have multiple physical disabilities and / or high health needs and some have difficult social circumstances. The youngest person supported is age 7 years old, and the oldest 70 years. Service funding is predominantly provided through a range of Ministry of Health, Ministry of Social Development, Oranga Tamariki and ACC contracts. We employ over 400 staff and provide care and support 24/7.

BSL was established when the former Templeton Centre closed in 1999 with 84 clients of the Templeton Centre residents transferring into BSL service. At the core of our practice philosophy is our belief in all people and the rights of all to live in and be part of the community and to exercise citizenship. Our practice is outcomes focussed and informed by the Enabling Good Lives vision and principles.

**In specific response to Mrs Adams' statement:**

- Decisions about who lived in which homes at the time of the transition to Brackenridge were made by the management & leadership of the Templeton Centre and it is assumed that this was informed by detailed knowledge of the people transitioning into the new homes, including their individual needs and behaviours.
- Having 6 people with high and complex support needs move into a single small home from the larger Templeton Centre would not be acceptable today. This clearly impacted negatively on the lives of the men in this home. Staff recollection is that the men in these homes did go out of the home, they did go on trips, outings and holidays from the home but that it was not easy to achieve this given the complexity of their support needs and limits on appropriately skilled resource at the time.
- Nigel and Malcolm's move to their own home at a later stage was a very positive outcome for them.
- From the time they moved to their own home, there have been ongoing discussions with Ministry of Health about funding levels for the two brothers, because having two people in a home is very difficult to sustain financially in a sector where Ministry of Health disability support community residential funding is generally based on four to six people living in group homes. To date, the Ministry of Health has been unable to agree to cover the funding shortfall which has impact for BSL. This has led BSL to have conversation with Mrs Adams about another person sharing the home with her sons. Mrs Adams has always been strongly opposed to this and BSL has honoured her views and subsequently has not moved anyone else into the home. In supporting her view, BSL has incurred ongoing financial consequence with no financial impact for Mrs Adams. We also recognise that the current living arrangement is in the best interests of Nigel and Malcolm.
- We agree with Mrs Adams that for the majority of the people we support, smaller homes in the community are the best living arrangements. While this may not be the case for everyone, we continue to work with the Needs Assessment Service Coordination Service, LifeLinks and the Ministry of Health, to make

these smaller, community homes more achievable and financially sustainable for more individuals.

### **What we are doing to continuously improve**

- In line with broader Sector and System Transformation for the Disabled Community of Aotearoa that is underway in New Zealand, BSL is working its way through a comprehensive programme of work that aims to strengthen and evolve service provision. This work is aligned with the principles of Enabling Good Lives and in support of our obligations to the New Zealand Disability Strategy, upholding our obligations to the Convention of Rights for People with Disabilities.
- Over the past four years we have prioritised a significant increase in front line staff and team leader numbers. Our commitment has always been to ensure the right levels of staff are in place. As per the rest of the sector, we are challenged, particularly in a pandemic response environment, to find enough appropriately qualified and skilled staff for these front-line roles.
- Respite care does not attract more funding and we struggle to maintain financially viable respite services. Dialogue about this with LifeLinks and Ministry of Health has occurred over many years and has intensified recently as we endeavour to navigate bespoke funding arrangements.