

Thank you for the opportunity to respond to the very full and detailed consultation document. Firstly, we would like to express our grateful thanks for the way in which the ILF has enabled our son to have a transforming experience leading to him being able to live in his own flat with the appropriate care. Up until 2003 he lived at home, basically in one room reliant upon computer games and TV. The Local Authority were able to provide some support for activities based round the Lorn Resource Centre in Oban, but effectively he was isolated at all other times. Once he was awarded ILF and Supported Living he was able to move into a flat and his Support Workers help him to lead as normal a life as possible. He goes out for social events, plays darts and pool and is encouraged in all aspects of daily living. His dad and myself are now getting older and are less able so it is a great relief to us that he has his own support. As you can imagine, it has been very stressful wondering what will happen when the Fund closes in 2015.

The Consultation Document goes into a lot of detail in ways that we had not even considered, and we recognise that we are inevitably biased towards trying to ensure that our son has continued care to enable him to lead a happy and safe life.

With that in mind we would like to make the following observations:

- 1) As you stress, it is important to continue with existing levels of care for present ILF users. To fail to do this would be potentially disastrous in terms of social mobility and safety. And this is a great relief as parents of an ILF client.
- 2) We realise that funding is dependent upon relevant finances being allocated by the UK Govt. and also note that it is important to use unallocated funding wisely as it inevitably becomes available over time.
- 3) We are not in favour of Local Authorities being responsible for the allocation of the money. There is too much evidence in the past of monies becoming "swallowed" in the budget and ring-fenced money has not always worked. Also, there could be a tendency to look at overall need according to client-base and then allocate care up to the money available. In other words it would stop being client-based and would be revenue based. We already know that the ideal scheme for disabled people is not available under present levels of taxation. Having seen the benefits from the ILF scheme people like ourselves would be in favour of a higher tax payment as in Sweden, but we realise that is not likely to happen.
- 4) Our firm belief is that the ILF should be administered separately and that existing users should be cared for first according to need. The expense of a system looked after by the Scottish Parliament is indeed a negative factor so thought should be given to making the ILF a charity operated by a charitable board, with the ability to fundraise and charged with following specific guidelines as to clients and care allocated. This would have the benefit of reducing costs and helping to ensure the ability to raise funds and expand as time goes on.
- 5) Extra funds, as they become available could be allocated on a case by case basis with referalls from Local Authorities and Health professionals. By doing this, the money can be spread as far as possible.

We trust these points will be considered and would be happy to talk about them in more detail if required.  
In the meantime, thank you on behalf of our son and our ourselves.