



# The Right Living Space

## Housing and Accommodation Needs of People with Disabilities





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*A Citizens Information Board/  
Disability Federation of Ireland Social Policy Report*

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## Preface

This report points to a considerable gap between policy aspirations and principles and experiences on the ground of both people with disabilities and voluntary/community organisations working on their behalf. There is clearly a hidden housing need among the population of people with disabilities in Ireland. Many people with disabilities have not benefited from the social progress over recent decades in that their accommodation options and choices have not widened to any significant extent.

The housing options available to people with disabilities generally fall far short of those available to the general population. Limited understanding of disability and the needs and aspirations of people with disabilities on the part of society generally may result in inadequate policy responses to the housing needs of people with disabilities. There may be an assumption on the part of society that a person with a disability will be looked after by family, or by a partner, which determines how his/her accommodation needs are assessed and addressed.

Ensuring that adequate, reasonably priced accommodation is within everybody's reach is one of the most effective ways of combating social exclusion. While the relationship between housing and social inclusion is complex, suitable housing is widely regarded as an essential and fundamental social inclusion measure in that poor or inadequate housing impacts negatively on people's mental and physical health. In practice, some valuable housing initiatives have been developed in Ireland which promote social inclusion for people with disabilities. However, this is not comprehensive or reliably replicated in each circumstance where there is a housing need.

Accessibility continues to be a major problem for people with physical and sensory disabilities in relation to both the availability of accessible accommodation and the suitability of the built environment. A range of housing options need to be available to people with disabilities to cater for a diversity of needs and to provide for choice. These should include standard housing (by both local authorities and voluntary housing associations), supported/sheltered/clustered housing and innovative provision of residential care for those who cannot be accommodated in any other settings. This will require more integrated and mixed social housing generally, different models of community living for those currently living in community group homes and, crucially, additional supports for independent living.

Ensuring that accessibility and supports are provided for people with disabilities living in the private, owner-occupied sector is crucial. Further the issue of accessibility needs to be dealt with in the context of universal housing design to cater for lifetime adaptability, particularly as most disability is acquired over the life cycle and people (including people with disabilities) are living longer.

The development of the Housing Strategy for People with Disabilities offers a timely and significant opportunity to put the housing and accommodation needs of people with disabilities centre stage. A shift in thinking from a position where the housing needs of people with disabilities are viewed primarily in terms of 'special needs' housing to a mainstream approach is needed to allow for the diverse accommodation needs of different categories of people with disabilities to be addressed. This will undoubtedly be resource intensive and will almost certainly require a corresponding shift in our social priorities.

Citizens Information Board

Disability Federation of Ireland

# The Housing and Accommodation Needs of People with Disabilities

## 1. Focus of Report

This report is based on a joint study between the Citizens Information Board (formerly Comhairle) and Disability Federation of Ireland (DFI). The focus of the report is on the housing and accommodation<sup>1</sup> needs of people with disabilities as experienced by people with disabilities and their families as well as by voluntary and community organisations working with them.

A three-pronged methodological approach was used in the study to gain insight into the social realities and experiences of people with disabilities and their families – a survey of voluntary/community organisations, focus groups (involving people with disabilities and voluntary/community organisation representatives) and identification of case examples.

There was wide consultation with people with disabilities and with a diverse group of organisations working in the disability field. Some of the organisations consulted are housing service providers, others provide complementary support services and for some the main focus is on advocacy on behalf of their members. Feedback based on the experience of users of Citizens Information Services (CIS) throughout the country was an integral part of the study.

The report highlights key factors which impact on the ability of people with disabilities to access accommodation appropriate to their needs. It points to a need for new thinking which would address the accommodation and related support needs of people with disabilities in the context of social inclusiveness, equality of access and the provision of accessible and integrated living environments. This approach would be significantly different to the approach which sees the accommodation needs of people with disabilities being met primarily in the context of 'special needs housing'.

The study findings confirm and expand on many issues relating to the accommodation needs of people with disabilities that have been identified in recent years by both the voluntary/community disability sector and by Government. Areas where existing policies have fallen short are highlighted in the report. The main challenges for the emerging housing policy agenda in respect of people with disabilities are outlined and key pointers for policy-makers seeking to address these challenges are provided.

## 2. Housing Policy Context

The current housing policy context for people with disabilities is underpinned by a life-cycle approach, person-centred planning and the promotion of independent living, all of which inform the protocols and structures being put in place for the implementation of the requirements of the Disability Act 2005. These principles are reflected in the commitments set out in the social partnership agreement, *Towards 2016*, in the most recent Government policy statement on housing, *Delivering Homes, Sustaining Communities*, and in the new framework for social housing needs assessment currently being put in place.

The report explores how the issues identified in the study might translate into policy and practice and, specifically, how they might be addressed in the Housing Strategy for People with Disabilities to be drawn up by 2009. A number of recommendations are included in this regard which, it is suggested, should form part of the deliberations of the working group drawing up the Housing Strategy.

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<sup>1</sup> The terms housing and accommodation are used interchangeably throughout the report in order to reflect the complexity of need that exists across all categories of people with disabilities.

The study points to a considerable gap between policy aspirations and principles and experiences on the ground. While the research shows that, without doubt, valuable initiatives have been developed and that in some cases a good level of provision occurs, this is not comprehensive or reliably replicated in every circumstance where there is a housing need.

## 3. Key Issues Identified

### 3.1 People with disabilities with a housing need

There is a shortage of social housing generally and community-based accommodation for people with different types of disability, particularly in relation to accessible housing and the availability of appropriate supports to allow people to live independently in their own homes.

There is a considerable hidden housing need in that many people with disabilities of one type or another are living in accommodation not of their choosing. The following are identified as categories of people who are likely to have a housing/accommodation need that is not, or only partially, being met at present:

- adults in family homes when they wish to and/or would be better off living elsewhere
- some people in long stay residential settings
- some people in community group homes
- people awaiting discharge from hospital
- people without accommodation
- some people in nursing homes, for example, people with an acquired brain injury, people with MS
- people with Alzheimer's or other dementia who are not in appropriately designed accommodation.

### 3.2 Limited housing options

In practice the housing options for many people with disabilities are limited because they frequently have specific, and often individual, design, location and support requirements. They are, therefore, at a considerable disadvantage in relation to people who do not have a disability. While some of the difficulties identified in the study relate to the specific needs of different categories of people with disabilities and to individual needs, many arise because of the lack of a strategic framework to support the provision of tailored housing and housing supports generally for people with disabilities.

### 3.3 Inadequate housing needs assessment

Provision for housing needs assessment has not to date catered adequately or inclusively for the needs of people with disabilities, either individually or collectively. Needs assessment by Local Authorities has been inadequate in terms of identifying numbers or nature of need. There is a lack of clarity and transparency from service providers on how housing need and related support services are measured. In cases where a housing support need is identified, this may not always be delivered because of resource constraints.

### 3.4 Supports for independent living

A key factor in enabling people with higher levels of dependency to live in community settings is the availability of supports for independent living, including Personal Assistant (PA), home support and home help. The general picture that emerges from the study is that, while there are some comprehensive support packages for independent living in place, supports for independent living are under-resourced. There is also a lack of clarity about entitlements and options arising from different models of delivery of supports for independent living in different parts of the country.

### 3.5 Accessibility

There is insufficient attention given in Ireland to accessibility/lifetime adaptability aspects of housing design. Existing Building Regulations (Part M) provisions (currently under review) provide only for houses to be 'visitible' and indicate minimum dimensions for various facilities such as toilets and door widths. However, often a building will be compliant with regulations but not 'liveable in' by a proportion of the population.

### 3.6 Good practice

There are clearly some innovations and good practice in accommodating people with disabilities in existence at local level. These include responses by local authorities and joint initiatives involving a local authority, a voluntary/community organisation and the HSE. Such initiatives generally involve strong inter-agency collaboration, the provision of supports to allow for optimum independent living and options for progression to more independent accommodation. Other initiatives incorporate a mixed housing element.

## 4. Addressing the Issues

### 4.1 A Continuum of Housing Provision

Addressing the housing needs of people with disabilities will require a significant shift in focus from viewing people with disabilities primarily as people requiring 'special needs' housing to one which sees their accommodation needs being addressed by a continuum of housing provision to cater for a wide range of individual circumstances. This means:

- further innovative models of provision for all categories of people with disabilities
- more use of general social housing for people with disabilities
- addressing needs within mainstream housing policy as opposed to segregated housing for people with disabilities
- the provision of a much wider range of housing options for people with disabilities than is currently the case
- additional transitional sheltered/supported accommodation with progression options readily available for all categories of people with disabilities.

### 4.2 Funding

A comprehensive housing/accommodation policy for people with disabilities will be resource intensive if it is to facilitate best practice in terms of housing options, integrated supports and accessibility.

There is a need for an integrated response from the relevant funding authorities and stakeholders – Department of Environment, Heritage and Local Government, HSE and Local Authorities, to better facilitate the delivery of support/care services in the context of housing provision.

### 4.3 Housing needs assessment

The commitment to the development and implementation of a new and systematic approach to housing needs assessment and the recent introduction of new protocols for inter-agency collaboration are important steps towards inclusive needs assessment. The detailed working of these initiatives will need to be examined in the formulation of the National Housing Strategy for People with Disabilities.

### 4.4 Effective joint working

Effective joint working requires that all stakeholders (people with disabilities, voluntary/community organisations, local authorities and the HSE) are involved in identifying needs and in considering the various ways of addressing those needs. Voluntary/community organisations have a centrally important role to play in identifying unmet need and in facilitating innovative responses.

The delivery of an integrated housing/key supports programme to allow a person with a disability to live independently in his/her community should be at the core of the Housing Strategy for People with Disabilities.

### 4.5 Person-centred planning

The systematic adoption of a person-centred planning approach to identifying and meeting the accommodation needs of people with disabilities is essential. The policy aspiration of providing packages of individually tailored supports based on a case management approach needs to be translated into practice on the ground.

### 4.6 Accessibility

As ageing populations are acquiring disabilities and people with disabilities are living much longer, housing design in the longer term must be based on lifetime adaptability.

It is essential that the new provision for adaptation grants, introduced in 2007, caters for all those in need of adaptations as a result of an acquired disability.

## 5. Housing Strategy for People with Disabilities: Proposals

A number of proposals are put forward for consideration in the formulation of the Housing Strategy for People with Disabilities, which is being developed as part of the implementation of *Towards 2016*. These proposals are aimed at ensuring transparency, standardisation and equality of access nationwide. The Housing Strategy must be underpinned by adequate resources in the short, medium and longer term and the proposals put forward should be systematically addressed with a view to their phased implementation as resources permit.

### 5.1 Housing and related support needs assessment

Assessment of housing need should include protocols for systematic consultation with individuals and, where appropriate, independent advocates to ensure that people's wishes are understood

and accommodated as far as possible. This assessment should explore the appropriate mix of accommodation, supports and design to cater for optimum independent living.

Local authorities should give a person with a disability a housing services statement (akin to the service statement required for health and education services in the Independent Needs Assessment required under Part 2 of the Disability Act 2005) setting out the type of housing and the supports s/he requires and the timeline for their delivery.

## **5.2 Enhancing supports for independent living**

There should be significantly increased provision of housing supports for people with disabilities and more provision for different models of support at both personal and community infrastructure levels.

Funding for house adaptations should reflect the level of need and funding levels should be reviewed every two years in the context of market prices and existing demand.

## **5.3 Improving inter-agency collaboration**

A community-based case management approach should be applied to identifying and meeting the housing and related support needs of people with disabilities.

A stronger national policy framework is required to ensure that local authorities and voluntary housing associations at local level work more collaboratively to specifically target and plan for the needs of all categories of people with disabilities.

## **5.4 Addressing the accessibility issue for people with physical and sensory disabilities**

There should be a general target for fully accessible and lifetime adaptable social housing based on best international practice.

Sufficient resources should be provided to ensure the strict enforcement of Part M of the Building Regulations following the introduction of new regulations and the strengthening of enforcement mechanisms.

## **5.5 Strengthening information, advice and advocacy**

All service delivery agencies relating to people with disabilities should adopt a stronger proactive approach to information provision based on the principles of quality service delivery and on best practice.

Statutory agencies and the voluntary/community sector should work together to ensure that people with a disability requiring housing and related supports have access to independent advocacy support as needed.

## Research Findings

### Survey of Voluntary/Community Organisations

- Despite progress in the area of policies for people with disabilities, the responses to the questionnaires appear to indicate a substantial discrepancy between the aspirations and principles of Irish social policy instruments in respect of housing and accommodation provision for people with disabilities and social realities as experienced by the respondents.
- Stated principles of housing policy, especially person-centred planning, supports for independent living and accessibility, were reported by survey respondents as being aspirational in many of the instances of housing need among people with disabilities encountered by these organisations on an ongoing basis.
- Respondents pointed to the limited options for owning their own homes available to the people with disabilities they encounter in their day to day work. People with disabilities depend to a large extent on local authority or other social housing and respondents stated that in their experience suitable housing for people with disabilities was in short supply.
- Low incomes/borderline poverty levels were identified by respondents as crucial factors in preventing access to adequate housing by people with disabilities.
- Respondents felt that there was a substantial underestimation by local authorities of housing needs of people with disabilities.
- Respondents pointed to the lack of a standardised national, transparent housing needs assessment for people with disabilities.
- Respondents stated that in their experience landlords in the private housing sector were often reluctant to accept people with disabilities or rent supplement/rent accommodation scheme tenants. Also, in the private rented sector, accessible dwellings are in short supply.
- Respondents reported that people with disabilities known to them are currently living in what they deem to be unsuitable or inappropriate accommodation.
- Emergency accommodation and sheltered/supported accommodation for people with disabilities were stated by respondents to be in short supply.
- Respondents expressed the view that people with disabilities experience difficulties in managing transitions from residential/hospital settings to living in the community because of lack of suitable housing resources and related supports and poor levels of collaboration between housing and health authorities.
- While respondents were aware of instances of people with disabilities being very successfully housed by local authorities in appropriately designed accommodation, they also identified shortfalls in local authority housing provision for people with disabilities. Respondents pointed to waiting lists which did not adequately reflect levels of housing need amongst this group. Issues of design and construction of local authority housing were also identified as problematic in relation to catering for disability over the life cycle.
- While the voluntary housing sector was seen by respondents as initiators of innovative housing provision for people with disabilities, access to such schemes was limited due to short supply and uneven geographical spread.
- Budgetary constraints, inability to purchase sites on the open market, lack of design expertise and lack of adequate support from relevant statutory authorities were identified by respondents as factors impeding the role played by the voluntary housing sector in the provision of housing for people with disabilities.

- Respondents identified the crucial role played by community group homes and sheltered/ supported housing schemes in providing long term accommodation, particularly for people with intellectual disabilities. However, they noted the scarcity of such facilities in some geographical areas and only limited availability relative to demand in other locations. The respondents identified significant lack of resources in this vital area of provision for people with disabilities.
- Respondents highlighted problems their clients had encountered in relation to the Disabled Person's Grant, including maximum grant levels being inadequate to cover the cost of adaptations, problems locating builders to undertake the work, lack of availability of occupational therapists and significant delays in processing applications by local authorities. (A new Housing Adaptations Grant Scheme for people with a disability commenced in November 2007).
- Supports for independent living and community based services were identified by respondents as key components in meeting the housing needs of people with disabilities. These involve a wide spectrum of services from personal assistants (PAs) to home help services and on-call support services. Again, respondents reported these services to be in short supply relative to need and to be very vulnerable to cutbacks as agencies experienced budgetary constraints. Respondents also noted the dearth of social work, occupational therapy and physiotherapy services which they considered vital to an adequate response to the housing and accommodation needs of persons with disabilities.
- Respondents identified six core issues vital to an adequate response to the housing needs of people with disabilities:
  - a person-centred planning approach with people with disabilities at the centre of the planning process
  - community supports for independent living
  - high levels of inter-agency collaboration
  - choice of housing options
  - enforcing high levels of design and accessibility standards
  - information, advice and advocacy as a key component to ensuring equality of access to housing services commensurate with need.

## Focus Groups

- There was a strong consensus across the five focus groups that there is considerable hidden housing need amongst people with disabilities. According to focus group participants, many people with disabilities currently live in situations not of their choice, frequently with their family of origin, because of the very limited housing options available to them.
- Perceived social attitudes to people with disabilities were identified by participants as a key factor in shaping responses to the housing needs of people with disabilities. Focus group members stated strongly that society has not to date fully subscribed to the right of people with disabilities to live independent and autonomous lives, form separate household units, engage in family formation and carry out productive work. Attitudes still prevailed of expecting people with disabilities to be cared for in families of origin and by partners.
- Focus group participants expressed the view that failure to provide adequate housing options for people with disabilities undermined their independence and caused severe stress on personal and family relationships.
- Focus group members pointed to the urgent need for training for public service personnel in respect of housing needs assessment for people with disabilities.

- Accessibility was identified as a core concern which needs to be urgently addressed. Current building regulations fall short of delivering fully habitable housing for people with disabilities. The built environment continues to pose significant problems of accessibility.
- Focus group members expressed concern regarding the operation of the Disabled Person's Grant in relation to waiting time, amount of grant, difficulty for people with disabilities in making up shortfall between grant and actual building cost and in accessing builders to carry out the work.
- A significant absence of a co-ordinated approach to meeting the housing needs of people with disabilities was identified by focus group members. The involvement of a number of statutory agencies makes it difficult for integrated packages of housing provision and support to be put in place. Focus group members pointed to the need for a co-ordinated approach and for significant improvement in inter-agency planning and communication.
- Focus group members identified a number of areas where local authorities were providing clear information about eligibility criteria and prioritisation for social housing in respect of people with disabilities and suggested that these instances could serve as examples of 'best practice'.
- Information, advice and advocacy services were identified by focus group participants as crucial in meeting the housing needs of people with disabilities. Members felt that access to good quality information varied widely from housing service providers. The role of advocacy services was identified as a key element in ensuring that the housing needs of people with disabilities were adequately met.
- Focus group participants identified seven key priorities of an adequate policy response to the housing needs of people with disabilities:
  - equality of access for all people with disabilities
  - extending housing options and choices
  - a life-cycle approach to planning social housing
  - a commitment to the concept of independent living as a cornerstone of public policy
  - a commitment to person-centred planning with the individual person with a disability at the centre of the planning process and consultation carried out accordingly
  - enshrinement of the concept of mainstreaming in the heart of housing policy to ensure mixed housing, mixed communities, choice of tenure, housing style, size and accessibility
  - more consideration given to reasonably priced housing, shared ownership and loans/mortgages for those on low incomes.



*Chapter 1*  
**Background**

# Background

## 1.1 Introduction

This report is based on a joint study between the Citizens Information Board (formerly Comhairle) and the Disability Federation of Ireland (DFI). The Citizens Information Board has a particular role in developing information, advice and advocacy services for people with disabilities and is also the agency responsible for the implementation of a Personal Advocacy Service for people with disabilities. DFI is the national support organisation and advocate for over 150 voluntary organisations in Ireland that provide services to people covering all areas of disability and disabling conditions. DFI works to ensure that Irish society is inclusive of people with disabilities so that they can exercise their civil, social and human rights.

The focus of the study is on the housing and accommodation<sup>2</sup> needs of people with disabilities as experienced by people themselves, their families and the voluntary and community organisations working with them. It should be noted at the outset that the population of people with disabilities is diverse and, consequently, their housing and accommodation needs are complex and wide-ranging.

The need for the study was identified by Citizens Information Services and organisations represented on DFI's Housing Sub-Group that had noted the ongoing and emerging accommodation difficulties experienced by people with disabilities. Although these difficulties have been acknowledged in the current Partnership Agreement, *Towards 2016*, there has been relatively little systematic reporting of barriers to people with disabilities getting appropriate accommodation.

This study seeks to capture the actual experiences of people with disabilities and their families in accessing the appropriate accommodation and community supports necessary for independent living. It also seeks to document the experience of voluntary service providers trying to deliver suitable accommodation and housing. Attention is focused on the main accommodation difficulties experienced by people with disabilities and on ways of addressing these difficulties. The report juxtaposes policies and practice with the perceptions and experience of people on the ground. It concentrates on a range of housing aspects that directly and indirectly affect people's lives. It is hoped that the report will inform the National Housing Strategy for People with Disabilities to be developed by the Department of the Environment, Heritage and Local Government (DEHLG) by 2009.

## 1.2 Research Objectives

The study seeks to identify the barriers facing people with disabilities in accessing and retaining appropriate accommodation and explores how these barriers might be broken down. The research objectives were as follows:

- Identify the accommodation difficulties experienced by different categories of people with disabilities
- Document and analyse the experiences of people with disabilities and the people who work with them in accessing appropriate accommodation
- Contrast the experiences of those consulted with existing housing policy for people with disabilities

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<sup>2</sup> The terms housing and accommodation are used interchangeably throughout the report in order to reflect the complexity of need that exists across all categories of people with disabilities.

- Identify good practice in accommodation provision for different categories of people with disabilities
- Identify policy issues to enable stakeholders to contribute to the emerging policy agenda.

### 1.3 People with Disabilities

Policies aimed at meeting the accommodation needs of people with disabilities need to recognise the diversity of that population. The Disability Act 2005 (see Appendix 1) states that “disability’, in relation to a person, means a substantial restriction in the capacity of the person to carry on a profession, business or occupation in the State or to participate in social or cultural life in the State by reason of an enduring physical, sensory, mental health or intellectual impairment” (Section 2.1).

The 2006 Census reports that 394, 000 (9.3% of the population) have disabilities. At present, information about people with disabilities and their housing situations is incomplete. In June 2006, a total of 25,692 people under the age of 66 years were registered on the National Physical and Sensory Disability Database<sup>3</sup>. The total number of people with intellectual disabilities registered on the National Intellectual Disability Database<sup>4</sup> in 2006 was 25,518. Data quoted in a 2007 Health Research Board Report (Doherty et al. 2007) for the Mental Health Commission shows that in 2004 there were 3,065 people in community residential facilities for people with mental health difficulties and 1,755 people in public psychiatric hospitals (774 being long-stay).

People’s disability status is not fixed and the incidence of disability increases with age, with most disability being acquired over the life cycle. The gradual or sudden onset of disability frequently necessitates changes, sometimes major, to people’s accommodation requirements.

### 1.4 Policy Context

The range of government documents that deal with housing for people with disabilities are referred to in Chapter 2. The underlying theme of these documents is that people with disabilities, like the rest of the population, have a number of accommodation options available to them, including privately owned, privately rented and social housing. However, they frequently have specific and often individual support, design and location requirements. This means that in practice their options are restricted and they are thus at a considerable disadvantage in relation to people who do not have a disability. In order to live in the community, many people with disabilities require community-based support services which, ideally, should form part of their accommodation provision. As people are ‘de-institutionalised’ and move into community settings, appropriate accommodation provision is critical.

The social partnership agreement *Towards 2016* notes that “people with a disability often have fewer choices in terms of providing for their housing and accommodation needs” (p. 68). Reference is made to the need to “support the provision of tailored housing and housing support to people with disabilities” and in this context to “have particular regard to adults with significant disabilities and those who experience mental illness” (p. 68). The NESG (2004) Report, *Housing in Ireland*, refers to “the lack of a strategic framework to support the provision of tailored housing and housing supports for people with disabilities” (NESG 2004:157).

Placement in a residential institution has traditionally been considered the only option for a person with additional support needs who could not continue to live at home. However, this has been fundamentally challenged by the emergence of new thinking internationally and in Ireland on

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<sup>3</sup> This is a voluntary self-reporting database to facilitate service planning.

<sup>4</sup> The Database is a service planning tool and people are only included if they are deemed to have a requirement for a service.

independent living by people with disabilities. The availability of other support services, such as personal assistance, home support, sheltered/supported housing, has resulted in more people with a disability being able to continue to live in their own home or in mainstream housing settings. Voluntary and community organisations have played an increasingly important role in developing innovative approaches to meet the housing and accommodation needs of people with disabilities. However, it is generally acknowledged that there continue to be fundamental obstacles to independent living by people with disabilities because of a shortfall in supports.

The current policy context for people with disabilities is evolving significantly as protocols and structures are put in place for the implementation of the commitments in the Sectoral Plan on Disability of the Department of Environment, Heritage and Local Government (DEHLG). It is also evolving in light of the commitments set out in the social partnership agreement *Towards 2016* and in the Department's paper *Delivering Homes, Sustaining Communities*. A framework for housing needs assessment, contained in the DEHLG's 2006 Consultation Paper on Housing Needs Assessment, is also significant. The key elements in the new policy environment are outlined in more detail in the next chapter.

## 1.5 Methodology

The research methodology used in the study was based on the concept of triangulation, the process of "building checks and balances into a design through multiple data collecting strategies" (Patton 1987:60). This approach allows the researcher to draw data from a range of sources and to strengthen the validity of his/her observations and findings. The following research tools were used:

- Review of policy documents
- Survey questionnaire (see Appendix 2)
- CIS Social Policy Alert<sup>5</sup> (see Appendix 2)
- Focus groups with a cross-section of organisations working with people with disabilities and with selected people with disabilities and their families
- Identification of case examples
- Consultation with selected key informants in both statutory and voluntary sectors.

It should be noted that the study focused primarily on people with disabilities availing of services and on voluntary/community organisations providing such services and that not all people with disabilities fall into this category.

### Survey

Survey questionnaires were sent in early 2007 to voluntary/community organisations on the DFI database involved in the provision of housing and related supports and to CIB funded voluntary/community advocacy projects for people with disabilities. A total of 41 completed survey questionnaires were returned representing a 53% response rate<sup>6</sup>. The survey findings are presented in Chapter 3. The survey information was also used to identify themes and issues which were explored and developed in the focus groups (see Appendix 2).

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<sup>5</sup> A Social Policy Alert is a tool used by the Citizens Information Board from time to time to ask Citizens Information Services (CIS) to pay particular attention to named categories of queries for a period of time in order to identify any policy issues arising. CIS throughout the country dealt with 835,000 queries in 2006.

<sup>6</sup> This is a good response rate given the diversity of voluntary organisations that received the questionnaire.

## *Focus Groups*

Five focus groups were organised as part of the study – two in Dublin and one each in Limerick, Tralee and Sligo – in March/April 2007. A number of organisations working with people with disabilities were invited to nominate representatives (staff and service users) to participate in the focus groups. Participants were selected on the basis of providing a cross-section of people with different types of disability. A total of 63 people (35 service providers and 28 service users) participated in the focus groups.

The focus group discussions focused on capturing people's actual experience and perceptions and provided an opportunity for the researchers to interact directly with the research target group. The approach adopted was to work towards a consensus on the various points made and, where this was not possible, to identify the range of perceptions around different issues. The discussions were recorded in writing and their content was analysed and distilled into a range of findings, which are outlined in Chapter 4.

## *CIS Social Policy Alert*

A Social Policy Alert was sent to all Citizens Information Services and detailed case examples were provided by 5 CISs. These responses covered broadly similar themes to those that emerged in the survey and the focus group discussions.

## *Case examples*

Case examples included in the report were sourced through the questionnaires, CIS Social Policy Alert, focus group discussions, interviews with key informants and follow-up by the researchers and DFI personnel. The case examples relating to individuals are based on their description of their experiences, reported to a CIS, a voluntary/community organisation or directly to the researchers. They are used to illustrate individual experiences and perspectives and include both positive and negative experiences. Some cases of what is regarded by the study participants as examples of good practice in housing provision for people with disabilities are also included.

## *Key informants*

The findings from the analysis of the empirical research were validated by the researchers through discussions with the Study Advisory Group and the DFI Housing Sub-Group and through interviews with other key informants from both statutory and voluntary sectors.

## **1.6 Project Structures**

### *Steering Group*

The Project Steering Group overseeing the research had representation from the Citizens Information Board (CIB), Disability Federation of Ireland (DFI) and the National Disability Authority (NDA). It met on a monthly basis from October 2006 to October 2007.

### *Advisory Group*

An advisory group had representatives from a range of voluntary and community organisations, DFI, NDA, CIB and the Department of Environment, Heritage and Local Government. It met on two occasions. (See Appendix 4 for a complete listing of the organisations that participated in the study.)

### *DFI Housing Sub-Group*

A consultation meeting was held with members of the DFI Housing Sub-Group at which preliminary findings were discussed.

### *Research Personnel*

The research was co-ordinated by a consultant researcher with assistance from a Citizens Information Board social policy executive. The focus group discussions were conducted by an independent facilitator and attended by the research personnel.

## **1.7 Outline of Report**

The report contains 5 chapters. Chapter 1 has set out the overall context of the report, the research objectives and methodology. Chapter 2 describes the current policy context in Ireland in respect of housing and people with disabilities. It also outlines some of the key factors relevant to policy formulation in the area. Chapter 3 presents a synthesis of the main findings from the survey of voluntary and community organisations. Chapter 4 presents the main findings from the analysis of the focus group discussions. Chapter 5 sets out the main implications for policy and practice from the study findings and explores how these issues might be addressed in the national housing strategy for people with disabilities. The report contains 4 appendices.



## *Chapter 2*

# Current Policy Context

## Chapter 2

# Current Policy Context

### 2.1 Introduction

This chapter describes the existing housing policy context in Ireland and its underlying principles as it relates to people with disabilities. It also outlines the new housing policy environment emerging in Ireland: the policy principles, commitments and key changes proposed. These provide the framework within which the shortcomings identified in Chapters 3 and 4 can be addressed.

### 2.2 Principles of Current Housing Policy

The core objective of Irish housing policy, according to the most recent government policy statement on housing, is “to enable every household to have available an affordable dwelling of good quality, suited to its needs, in a good environment, and as far as possible, at the tenure of its choice” (Department of Environment, Heritage and Local Government (DEHLG) 2007:37). A 2006 Consultation Paper on housing needs assessment succinctly states that the aim of housing policy should be to “devise a graduated and flexible system of housing supports to effectively meet the housing needs of applicants over their lifetimes” (DEHLG 2006c:1). This approach recognises the complexity of housing needs over the life cycle and offers a useful context for addressing the accommodation needs of people with disabilities.

#### 2.2.1 Social Inclusion

The obligation of the State to recognise the right to adequate housing and to implement appropriate legislation and policies has come very much to the fore in recent decades. Suitable housing is widely regarded as an essential and fundamental social inclusion measure because poor or inadequate housing negatively affects people’s mental and physical health. Difficulties that people with disabilities have generally in relation to access and social inclusion are compounded by a lack of appropriate housing. A particular focus in *Delivering Homes, Sustaining Communities* (DEHLG 2007) is on interventions by Government to help those who cannot meet their accommodation needs fully from their own resources. There is an emphasis on ensuring that housing support is provided in a tailored way, reflecting the changing needs over a person’s life cycle.

#### 2.2.2 Life-cycle approach

The life-cycle approach to housing is strongly endorsed in *Towards 2016* and in *Delivering Homes, Sustaining Communities*. It refers to the provision of supports to meet the needs of people in different phases of their life with a particular focus on the housing needs of people with disabilities:

*This approach requires a holistic perspective on people’s needs as they move through key life cycle phases - childhood, working age, older people. A particular focus is placed on people with a disability (who will benefit from mainstreamed measures through all stages of the life cycle)* (Department of Environment, Heritage and Local Government 2007:10).

#### 2.2.3 Sustainable communities

The concept of sustainable communities (outlined in *Towards 2016* and in *Delivering Homes, Sustaining Communities*) has clear implications for people with disabilities. Measures identified by Government as relevant to building sustainable communities are:

- Continuing to improve the quality of houses and neighbourhoods
- Providing tailored housing services to those who cannot afford to meet their own housing needs
- Developing inter-agency cooperation where there is a care dimension
- Maintaining the impetus for the delivery of housing at affordable prices to the market

- Progressing the social housing reform agenda
- Providing for integrated communities in planning for affordable and social housing.

#### 2.2.4 Equality of access and choice

The Equal Status Acts 2000-2002 apply to the area of housing. Everyone is entitled to equal access to accommodation regardless of their gender, marital status, family status, age, disability, sexual orientation, race, religious belief or membership of the Traveller community. While formal equality of opportunity exists within the Irish housing system, there are significant institutional, administrative, attitudinal and cultural barriers to people with disabilities exercising their right to adequate and appropriate accommodation.

#### 2.2.5 Supports for independent living

The need has been acknowledged for a range of housing supports to enable people with disabilities to live optimally in the community, as has the need for protocols to ensure "that a combined approach to the accommodation, care and support needs is taken" (Department of Health and Children 2006:79).

Community-based support services required for independent living range from minimum support services to comprehensive assisted living services. They may include training for independent living, a settlement support service, crisis intervention, personal/emotional support, home help, public health nursing, social work and personal assistant services. People may need assistance whether living in mainstream housing or in dedicated sheltered/supported housing. Given the diversity of requirements, support services need to be made available in a manner that maximises choice for the service user and allows him/her to exercise the greatest degree of autonomy and control possible.

The need for a proper funding basis for the provision of care and other supports by voluntary sector providers of supportive housing has been identified as a key issue by the sector (Irish Council for Social Housing, 2006) and by the National Economic and Social Council (NESC, 2004).

### 2.3 Housing Strategy for People with Disabilities

The Disability Act 2005 contains specific provisions requiring the Department of Environment, Heritage and Local Government (DEHLG) to outline its plans for housing and accommodation and for co-operation between housing authorities and the Health Service Executive (HSE).

In DEHLG's Sectoral Plan (DEHLG 2006b), it is proposed to develop a National Housing Strategy for People with Disabilities as recommended in the NESC (2004) *Housing in Ireland Report*. This commitment is also reflected in *Towards 2016* as a priority action in the social partnership agreement.

The National Housing Strategy for People with Disabilities is aimed at supporting the provision of tailored housing and housing supports to people with disabilities. Legislation is to be introduced to provide for a new means of assessing housing needs, based on the framework in the Consultation Paper (DEHLG 2006c) to ensure that all people can live with maximum independence within their community.

The strategy is to be progressed through the establishment of a National Group under the aegis of the Housing Forum (see Appendix 1) headed by DEHLG and involving the Department of Health and Children, the HSE, social partners and other relevant stakeholders, including the National Disability Authority. This work commenced in autumn 2007.

## 2.4 Assessing Housing Need

Needs-based assessment is now widely recognised in legislation and policy statements relating to people with disabilities as a key factor in accommodation provision. *Delivering Homes, Sustaining Communities* states that needs assessment should give prominence to “individual choice, the provision of a range of support options and the creation of responsive capacity within housing authorities to take account of changing individual circumstances” (DEHLG 2007:48).

Each housing authority is required, under Section 9 of the Housing Act 1988, to carry out periodic assessments of the need for the provision of housing for persons who are unable to provide it from their own resources. The assessments cover the need for local authority housing as well as other social housing options. The last such assessment of need was carried out in March 2005. It showed that 43,684<sup>7</sup> households were in need of local authority housing. Of these, 480 households (just over 1% of the total) were included in the category “disabled or handicapped persons”.<sup>8</sup> There is general agreement that this figure is an underestimate and that many people with disabilities are not registered for local authority housing for a number of reasons, including people’s limited awareness of the process. The data available from the Health Research Board’s Disability Databases, voluntary housing bodies and service providers also indicates higher numbers in need of accommodation.

The 2006 Consultation Paper, *Housing Needs Assessment* (DEHLG 2006c) identifies the following limitations in the current assessment process:

- An incomplete picture of the level of need
- An out-of-date picture of need
- No system for prioritising need
- Failure to distinguish between long-term and short-term need.

*Delivering Homes, Sustaining Communities* (DEHLG 2007) recognises that an objective and comprehensive assessment of a household’s accommodation need is an essential first step towards forming an improved basis for policy and development and service delivery that in turn provides a modern system of housing supports.

A revised process (DEHLG Circular N13/2007 – implementing the Revised Housing Needs Assessment Process – Phase 1) is being put in place for the next statutory assessment of housing need to be carried out in 2008. This is related to the development of an overarching framework for the assessment of needs. It includes provision for the allocation of support<sup>9</sup> and the delivery of services based on an overall assessment of the housing needs in the area.

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<sup>7</sup> This includes 13,778 households (31% of total) in receipt of SWA Rent Supplement. It should be noted, also, that there is some double counting in this figure as some people would have applied to more than one local authority.

<sup>8</sup> It is likely that there are some people with disabilities included in other categories used in the needs assessment – ‘persons living in accommodation that is unfit or materially unsuitable’, persons sharing accommodation involuntarily and having requirements for separate accommodation’, persons in need of accommodation for medical or compassionate grounds’, ‘homeless persons’.

<sup>9</sup> The allocation process, whereby households are provided with social housing support in accordance with priority needs (schemes of letting priorities), is to be the subject of a separate consultation paper.

The assessment of need forms the basis on which supports will be allocated and involves two distinct phases:

- An initial evaluation to determine the most appropriate support option for the customer's needs
- A more comprehensive assessment for those who have been identified as having a long-term housing need.

### *Special Needs Housing*

The Consultation Paper, *Housing Needs Assessment* (DEHLG 2006c), suggests that the area of special needs is a particularly important part of the assessment process. It noted that a separate set of criteria is required to identify the level of need and to link particular forms of housing and social supports to special needs' applicants. "The first step is to categorise the nature of the special need, linking particularly to the type of support measures needed" (DEHLG 2006c:22).

A new HSE system of statutory independent needs assessment (INA) for people with disabilities commenced in June 2007 for children aged under 5 years and is due to be extended to all age groups by 2011 in line with the implementation of the statutory requirements of Part 2 of the Disability Act 2005. INA signposts the various services required by an individual across different statutory and non-statutory agencies. People who have been identified as likely to require housing support are to be referred to their local authority and protocols on this have been established between local authorities and the HSE (see Appendix 3). It is hoped that this new joint approach by the HSE and local authorities will result in a more holistic needs-based assessment of individuals and better planning in the delivery of their accommodation needs. However, the rigorous eligibility criteria under Part 2 of the Disability Act 2005 may not deal with all areas of housing need.

## **2.5 Social Housing**

Social housing (see Appendix 1) is an important component of housing for people with disabilities, especially given their relatively low incomes. The Planning and Development Act 2000 requires each planning authority to develop a strategy for ensuring the housing of the existing and future population of the area. The National Economic and Social Council has argued that "a housing strategy must assess the existing and future need for housing, ensure that housing is available for persons with different levels of income, that a mixture of housing types and sizes are developed to match the different categories of households (including the special requirements of elderly persons and persons with disabilities) and counter undue segregation" (NESC 2004:119). Part V of the Planning and Development Act states that, for most new housing developments, up to 20% of the land must be reserved for social housing or affordable housing.

Social housing was traditionally provided by local authorities but the voluntary housing sector has emerged in recent years as a significant provider for people with disabilities. Currently, a total of 82 housing associations are providing 2,064 units for people with disabilities across 267 schemes (Irish Council for Social Housing 2007). Over half (56%) of the units provide accommodation for people with an intellectual disability followed by 24% for people with physical disabilities and 15% for people with mental health difficulties. A number of voluntary housing associations providing accommodation to people with disabilities also provide a range of services and supports to tenants. Referrals to voluntary housing associations are made mainly by the HSE and local authorities.

The Social Partnership Agreement, *Towards 2016*, makes a commitment to progressing a social housing reform agenda. This includes an acknowledgement of the conclusions of the NESC report on housing (NESC 2004) on the need for substantial additional provision of social housing units over the period to 2012. *Delivering Homes, Sustaining Communities* (DEHLG 2007) sets out a programme for social housing

recognising the current policy context. Proposed reforms are aimed at improving service provision, ensuring that social housing is delivered in a way that is fair and efficient, that housing support is available where necessary and that there is choice.

### *Proposed Government Actions*

Key actions proposed by Government (DEHLG 2007) which would affect the provision of housing and related supports to people with disabilities include:

- A specific focus on special housing needs
- Local authority housing advice centres to be established
- A new means of assessing social housing need<sup>10</sup>
- Homeless strategies to be revised, including a particular focus on the situation of homeless people in long-term emergency accommodation
- A National Housing Strategy for people with a disability to be developed by 2009
- A revised framework of grants for adapting the homes of people with a disability and older people (implemented on 1 November 2007)
- The provision of funding to meet the needs of some 140,000 households over the period of the National Development Plan 2007-2013
- Governance of the voluntary and co-operative housing sector to be enhanced as well as the streamlining of support schemes and provision of sites/units to improve delivery by this sector
- New inter-agency responses and protocols to co-ordinate housing support interventions with other supports where there is an accommodation and care perspective.

These actions indicate a commitment both to improving the housing situation of the general population and addressing the particular needs of people with disabilities. There is an acknowledgement that disability may be acquired over a lifetime, that extra services may be required to enable people to live in their own homes and that inter-agency collaboration will be required.

## **2.6 Inter-Agency Collaboration**

It is generally acknowledged (DEHLG 2006a) that stronger collaboration is required between the Department of the Environment, Heritage and Local Government and the HSE in order to ensure that effective, efficient and accessible support structures are in place for people in all housing tenures. To address this issue, the Disability Act 2005 contains specific provisions requiring Government Departments to outline plans for inter-departmental co-operation and include these provisions in the different sectoral plans (see Appendix 1).

Section 32 of the Disability Act requires that the sectoral plan of the Department of Health and Children makes provision for arrangements for co-operation between the HSE and local authorities in relation to the development and co-ordination of the services provided by housing authorities for persons with disabilities.

Section 12 of the Disability Act 2005 provides for the exchange of information between the HSE and public bodies (including housing authorities) for the purpose of assisting a person with disabilities when applying for personal or individual services provided by the body. It requires that, where a public body has been notified of a possible need such as housing, someone from the body must contact the person with a disability to facilitate or coordinate the provision of any services to which he or she is considered to be entitled.

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<sup>10</sup> See Department of the Environment, Heritage and Local Government (2006), Consultation Paper: Housing Needs Assessment

Three new protocols are being established for inter-agency cooperation for all special housing needs to ensure a combined approach. Specifically, they apply between the HSE and local authorities. They cover the following areas:

- *Assessment of housing needs*: This protocol came into effect on 1 June 2007 and applies initially to children under 5 (see Appendix 3). It governs liaison between the HSE and local authorities on the assessment of individual accommodation needs of people who have been identified by the HSE during the Independent Needs Assessment (INA) process. The effectiveness of the protocol will be fully tested when the INA begins to cover older children and adults with disabilities by 2011.
- *Support costs for social housing projects* (either by housing authorities or voluntary housing associations): This second protocol is being developed to facilitate the financing of comprehensive services and is expected to be put in place later this year (2007).
- *Liaison between the HSE and local authorities to inform housing action plans*: The third protocol will be developed to govern liaison between the HSE and local authorities on the exchange of information necessary to assess the nature and extent of the local housing needs of people with disabilities, and to underpin the development of local authority housing action plans and future social housing investment.

## 2.7 Accessibility

Accessibility is a hugely complex issue. It presents significant challenges in housing provision for people with disabilities both in terms of the built environment generally and the accessibility of new and existing housing stock. In relation to new houses, Part M of the Building Regulations (amended in June 2000) requires newly built homes to meet certain accessibility requirements, including level entrance at the hall door and provision of a WC at living room level. However, it has been noted, particularly by disability groups, that there has been a tendency for developers to circumvent these regulations and a lack of appropriate resources to ensure their enforcement.

Part M is being reviewed by the Department of Environment, Heritage and Local Government. The Building Regulations Advisory Body (BRAB) is currently advising the Department on draft proposals and is expected to furnish a definitive draft of the amended Part M regime to the Minister for approval in 2007. The Minister will then publish this draft for a further round of consultation. It is envisaged that following the review, there will be changes to the regulations and the technical guidance. Provision for a Disability Access Certificate, to confirm compliance of the design of proposed new buildings with Part M, included in the Building Control Act 2007,<sup>11</sup> and other provisions of this Act are intended to strengthen the enforcement powers of Building Control Authorities in implementing the Building Code.

An NDA-commissioned report on the Effectiveness of Part M of the Building Regulations (NDA 2005) concludes that there has been a poor level of compliance with the requirements of Part M. In rural areas, there appears to be a notably lower level of compliance in one-off houses than in residential developments. The report notes that there appears to be less awareness of the requirements of Part M among small builders than among those involved in larger developments. It also states that only two-thirds of suburban low-rise residential development built to current Part M standards is likely to be "socially accessible" and none is likely to be built to wheelchair-accessible standards unless adequate policies are introduced. These issues present considerable challenges relating to the enforcement of Part M and will have to be addressed once the new underpinning regulations have been signed by the Minister.

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<sup>11</sup> This Act was signed on 21 April 2007.

## House Adaptations

The Disabled Person's Grant (DPG) scheme provides for the payment of a grant by local authorities to residents in order to adapt a dwelling to make it more accessible for a person with a disability. An analysis of the DPG by the NDA (NDA 2006) showed that about 2% of Ireland's total housing stock in 2002 had been adapted with the assistance of the DPG. The NDA report showed an annual increase in the number of people applying for, being approved and receiving DPG grants from 1994-2002 with a fall-off thereafter.

Despite the relatively high level of take-up of the DPG, the scheme has been characterised by a number of shortcomings. These have included geographical variation in grant assessments and the level of DPG granted, as well as delays in assessments primarily due to the lack of Occupational Therapists to carry out assessments. To address these issues, to improve equity and to target the grant at those most in need of adaptations, the Department of the Environment, Heritage and Local Government undertook a review of the DPG in 2006. A new scheme was introduced in November 2007.<sup>12</sup>

## 2.8 Summary

The current system of providing housing and accommodation for people with disabilities contains a number of deficiencies: for example, the current needs assessment, inter-agency collaboration and accessibility. Many of these deficiencies have been recognised by Government and the commitments to address them have been outlined in this chapter. The social housing reform agenda, the Consultation Paper on Housing Needs Assessment and the Review of Part M of the Building Regulations are all particularly relevant in this regard as is the emerging emphasis in policy discourse on the life-cycle approach, equality of access and choice, and the building of sustainable communities.

There is an unprecedented policy window for changing and improving the provision of accommodation for people with disabilities. The development of the Housing Strategy for People with Disabilities will be significant in this regard.

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<sup>12</sup> The DPG is being replaced by a new framework of grant aid, i.e., a Mobility Aids Grant Scheme which will introduce a fast track scheme for small works (e.g. grab rails) and which may cover 100% of the cost of works; a Housing Adaptation Grant for People with a Disability which will provide means tested grant aid to cover large works not covered by the Mobility Aids Grant Scheme and may cover up to 95% of the cost of works. The revised schemes were implemented on 1 November 2007. A third scheme, Housing Aid for Older People, will amalgamate the existing Essential Repairs and Special Housing Aid for the Elderly schemes with the aim of making habitable the homes of older people.



## *Chapter 3*

# Postal Questionnaires: Main Findings

# Postal Questionnaires: Main Findings

## 3.1 Introduction

This chapter sets out the main findings arising from an analysis of postal questionnaires to DFI-affiliated organisations and to voluntary/community sector advocacy projects funded by the Citizens Information Board. A total of 41 questionnaires were returned from a diverse group of disability organisations. Table 3.1 shows that some of the respondents are housing service providers, that others provide complementary support services and that for some the main focus is on advocacy on behalf of their members or clients. The organisations vary in terms of size and the range and type of disabilities served.

**Table 3.1 Classification of Respondent Organisations**

Main Activities	Number	%
Housing/accommodation and support services	10	24.4
Support services and advocacy	9	22.1
Advocacy	8	19.5
Housing, advocacy and support services	7	17.0
Support services	7	17.0
Total	41	100

The questionnaires were semi-structured (see Appendix 2) and covered a range of themes relating to the accommodation needs of people with disabilities. The findings from the questionnaire are set out under 7 broad headings:

- Views on current policy and practice
- Housing provision for people with disabilities
- Assessment of housing need
- Accessibility
- Supports for independent living
- Accommodation needs of specific categories of people with disabilities
- Core policy issues to be addressed.

## 3.2 Views on Current Policy and Practice

### 3.2.1 Limited options

The main factor impacting on the housing and accommodation needs of people with disabilities was identified by survey respondents as the absence of a consistent or overall approach to meeting the accommodation needs of people with disabilities either nationally or locally.

The point was made repeatedly that most people with disabilities depend on local authority or other social housing and that there is a shortage of such housing, particularly in relation to accessible housing and the availability of appropriate supports to allow people to live in their own homes. People with disabilities, in the main, do not have the same option of buying and owning their houses as many of the rest of the population because of limited means.

### 3.2.2 Accommodation difficulties

The following were cited by respondents as the main accommodation difficulties experienced by people with disabilities:

- A lack of adequate social housing provision
- Underestimation of accommodation needs of people with disabilities under the current local authority housing needs assessment process
- A heavy reliance on the private rented sector and a related difficulty in getting landlords willing to accept people with disabilities and/or rent supplement tenants
- An inadequate amount of supported accommodation
- The fact that people with disabilities and their families may not see themselves as having a right to adequate and appropriate accommodation
- Difficulties experienced by people with physical and/or sensory disabilities with finding fully accessible accommodation
- Poor collaboration between the housing and health authorities in the provision of housing and related supports to different categories of people with disabilities

#### Case Example 1

A CIS was asked by the local authority to assist in getting accommodation for a homeless person. This person had been recently discharged from a psychiatric hospital even though he had no alternative accommodation. The hospital had referred the man to the local authority on discharge. The local authority could offer bed and breakfast accommodation to the man for 3 nights (over the weekend) and assist him with a deposit for private rented accommodation. While rent supplement would be provided, an official indicated that the local authority could not source appropriate longer term accommodation. The CIS succeeded in getting short-term accommodation for the man but felt that he would require further support and assistance. The CIS referred to “a huge gap in provision in this area” and the fact that social work support was totally inadequate and that there were no proper protocols in place to deal with this type of situation.

### 3.2.3 People living in unsuitable or inappropriate accommodation

Respondents reported that currently people with disabilities are living in unsuitable or inappropriate accommodation<sup>13</sup>, often on a long-term basis. These include the following categories mentioned by respondents:

- Adults in family homes when they wish to and/or would be better off living elsewhere
- People in inaccessible accommodation
- Some people in long stay residential settings
- People in community group homes who do not wish to be there
- People awaiting discharge from hospital
- Some people in nursing homes, for example, people with an acquired brain injury, people with MS
- People with Alzheimer’s or other dementia who are not in appropriately designed accommodation
- People without a home.

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<sup>13</sup> Examples of such situations have been documented as part of the current study.

The experience of voluntary/community organisations that participated in the survey is that there are a number of inadequacies in short-term crisis or emergency accommodation, sheltered/supported accommodation, community group homes and supports for independent living. There is also insufficient provision for people who acquire a disability to transfer to more accessible or otherwise suitable accommodation. Respondents stated that many of these shortages were the result of inadequate resources for social housing.

### *3.2.4 Transition to community living*

The general view expressed by respondents was that people with disabilities frequently experience difficulties in managing the transition from a residential or hospital setting to living in the community. The supports available are frequently inadequate to help people overcome these difficulties. The following points were made by respondents to the questionnaire:

- People with disabilities discharged from hospital sometimes have no option but to live with parents (sometimes elderly), siblings, their children and their families when this is clearly not their preference.
- People with disabilities discharged from hospital sometimes end up in private rented accommodation that is of poor quality and/or not fully accessible.
- High-support and medium-support accommodation is sometimes not available.
- People with an acquired disability (such as a brain injury) sometimes have to stay in hospital or residential care longer than necessary because:
  - Necessary home adaptations have not been carried out
  - A person may have been living in private rented accommodation which is either inaccessible or the lease may have been terminated due to hospitalisation
  - Increasingly, the person may be a foreign national who does not have an entitlement to housing and related services in Ireland.

It was noted that on occasion people are discharged from a specialised hospital to either a nursing home or back to the acute hospital<sup>14</sup> from where they were referred in the first instance. This was seen by some survey respondents as undermining the intensive rehabilitative work geared towards independent living that had taken place. It was also suggested that it is sometimes the case that a person is transferred to a facility where social work services and, consequently, the necessary supports to source appropriate accommodation, are not available.

## **3.3 Housing Provision for People with Disabilities**

### *3.3.1 Local authority housing*

Almost all survey respondents pointed out that some people with disabilities have been successfully housed by local authorities in appropriately designed accommodation. While such positive experiences were reported, there were significant difficulties noted in the provision of housing for people with disabilities by local authorities. Respondents stated that in their opinion:

- There is an insufficient supply of accessible and adaptable local authority housing
- Local authority waiting lists are incomplete in that some people with disabilities do not apply for local authority housing because they do not believe that they have a chance of succeeding

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<sup>14</sup> The National Rehabilitation Hospital has a protocol in place where a referring hospital makes a commitment to take the person back on discharge from the NRH in the event of unsuitable accommodation being available.

- There is a perception among some people with disabilities that their need for independent accommodation is given a low priority on local authority waiting lists
- As with the general population, people with disabilities can be on the waiting list for several years, particularly those currently living with parents or relatives
- Local authorities do not have a comprehensive inventory of accessible dwellings
- Accessible local authority accommodation is usually purpose-built for individuals. This means that there is invariably a significant waiting period and a supply of accessible local authority housing stock is not being built up
- Local authority housing stock is marked by an absence of accessible single-floor dwellings. The usual design is the classic 2-storey, 3 or 4-bedroom family house. This affects people who are putting their name on the housing list for the first time and people who need to relocate or swap to an accessible dwelling
- Current and planned housing construction by local authorities does not reflect either the demographics or needs of people with disabilities
- People with mental health difficulties have particular difficulties in getting and maintaining local authority housing because, frequently, the type and level of supports they need to live independently are not available
- Some people with disabilities in emergency or short-stay hostels<sup>15</sup> on a long-term basis are not being offered local authority accommodation.

Some survey respondents noted that, while a client-centred approach and a new ethos in this regard were emerging in local authorities throughout the country, some officials, in their experience, do not appear to be fully in tune with the particular, and sometimes complex, needs of people with disabilities.

The experience of survey respondents was that local authorities use different practices resulting in inconsistencies throughout the country. Each local authority may adopt different approaches to waiting lists, assessment of housing need, weighting given to medical criteria and the administration of the Disabled Person's Grant. This makes it difficult for individuals seeking accommodation and for organisations working with them and/or advocating on their behalf to determine how to proceed.

### *Case Example 2*

A. lives in local authority accommodation. She has a very significant progressive disability and requires a major care input. The policy of the local authority in the area where A. lives is to re-house rather than adapt existing accommodation when a tenant acquires a disability. A. feels that neighbourhood support is a key factor in a person's quality of life and would much prefer to have her current house adapted to meet her needs rather than have to re-locate. Currently, the family sitting room has become her bedroom. She has no access to a toilet or shower as the bathroom is upstairs. The family have only the kitchen as a family space.

### *Case Example 3*

B. is a CIS client with mental health difficulties who is in receipt of Disability Allowance and who has been intermittently homeless for 15 years. He is finding it impossible to get any kind of accommodation. Private landlords are reluctant to take him as he has difficulty in proving that he would be a reliable tenant and getting references accordingly. The local authority waiting list in the area is long and gives very low priority to single men. There is no hostel accommodation in the area for people in B's situation.

<sup>15</sup> There is a commitment in *Towards 2016 to eliminate long-term occupancy of short-term emergency accommodation by homeless people* by 2010.

### 3.3.2 Social housing provided by voluntary/community organisations

The following points were made by survey respondents on the housing provided by voluntary and community organisations:

- A number of innovative developments by voluntary organisations are geared towards facilitating independent living for people with relatively high levels of disability.
- Access to accommodation in voluntary social housing schemes tends to be somewhat arbitrary. It frequently depends on geographical location or the person having the information in the first instance. Access may also depend on advocacy, personal contacts and sometimes the particular interest of a staff member in the voluntary housing association concerned.
- The fact that some people with disabilities are on the waiting list of more than one voluntary housing association is indicative of the uncertainty and insecurity experienced by people with disabilities and/or their families in relation to securing suitable accommodation.

Respondents were asked to identify the challenges facing voluntary/community organisations providing accommodation for people with disabilities. Almost all involved in providing accommodation referred to funding as a particular difficulty which had a cross-cutting effect on their ability to keep pace with changing demands. It was pointed out repeatedly that voluntary housing associations have to develop their housing projects within the existing budgetary framework. This may limit the scope for innovation and forward planning, and impact negatively on their access to design expertise.

The following were other points made by respondents:

- Voluntary/community organisations can be frustrated by a lack of knowledge or understanding in local authorities on the design needs of people with disabilities. For example, the extra costs of designing accommodation for wheelchair users are not always understood by local authority personnel.
- Voluntary housing associations could take on a more comprehensive role if given the resources.
- Some of the accommodation provided by voluntary/community organisations is no longer deemed suitable and its upgrading presents considerable resource and logistical challenges.
- The move in recent years towards accommodating people with higher levels of disability in independent living situations creates new demands for voluntary organisations.
- There can be difficulty in getting funding for supported independent living accommodation under DEHLG's Capital Assistance Scheme (see Appendix 1).
- Capital budget ceilings<sup>16</sup> are not revised sufficiently frequently and do not keep in line with building cost inflation.
- Under the Capital Assistance Scheme (CAS) (see Appendix 1 for further details) there is no provision for recouping the additional costs that may arise in the management of special needs housing. This almost certainly impacts on the ability of voluntary providers to extend the level and nature of housing provision.
- The competitive nature of tendering and funding for services may undermine joint working between voluntary/community organisations. Also, the costs of networking/collaboration are often not recognised or recoupable from the State.

<sup>16</sup> The Capital Assistance Scheme limits is €110,000 for one and two person units and €135,000 for family type housing. A higher limit applies (€150,000 and €170,000 respectively) in the five County Borough areas and in counties in the Dublin hinterland. These rates have been in operation since February 2006.

- It is extremely difficult for housing associations to buy land on the open market and less land is now available from local authorities or from religious institutions than heretofore.
- Voluntary/community organisations find it difficult to negotiate and secure adequate multi-annual service agreements with the HSE in respect of providing supports for independent living.

### 3.3.3 Home ownership

There was a general consensus among respondents that most people with disabilities capable of independent living are unable to afford suitable housing on the open market, particularly in a climate of rising prices, unless they were already home owners prior to the onset of a disability.

The following points were noted:

- People with disabilities are more likely to be unemployed and/or on low incomes than almost any other sector of society. As a result, they are severely restricted in the amount of a loan/ mortgage available to them.
- Capacity can be an issue for some people when applying for loans or mortgages.
- People with specific disabilities have difficulty getting mortgage protection insurance and/or have to pay additional 'loading'. They may also experience delays because of medical assessments.
- People who acquire a disability, even if it is not permanent, sometimes find they can no longer cover their mortgage and end up in arrears or have to sell their house.

### 3.3.4 Affordable housing

Respondents expressed the view that under the criteria which operate at present, affordable housing was not a realistic option for many people with disabilities (see Appendix 1 for an explanation of affordable housing schemes). People with disabilities generally do not have sufficient means to avail of affordable housing because many have only part-time or low-income work<sup>17</sup>.

### 3.3.5 Private rented accommodation

Private rented accommodation<sup>18</sup> was viewed by survey respondents as offering options for some people with disabilities, particularly in the short term. One possible long-term option for some people with disabilities identified by respondents is the Rental Accommodation Scheme (see Appendix 1).

The following were the main points made by respondents in relation to the private rented sector:

- The cost of private accommodation is likely to be prohibitive for most people with disabilities.
- The experience of many people with disabilities is that some landlords do not want tenants on rent allowance or people with disabilities as tenants.
- The current rent cap for eligibility for rent assistance makes it very difficult for people to find accessible and appropriate accommodation because of prevailing market conditions.
- Rental properties, where available to people with disabilities and/or people on rent assistance, are often of the lowest quality.
- The current rate of rent supplement (ranging from €90 to €130 per week for a single person) only provides for poor quality bed-sit accommodation in many parts of the country.

<sup>17</sup> In 2005 almost one in four of those aged 16 years and over with a chronic illness or disability were at risk of poverty compared to 18.5% of total population. Those with a chronic illness or disability had a significantly higher risk of poverty than those without a chronic illness (15.3%) and they were almost twice as likely to be in consistent poverty (9.5% compared with 4.8%) (CSO 2006).

<sup>18</sup> According to Census 2006, 13% of housing units were rented from private landlords or voluntary bodies.

- Support services for independent living are likely to be less available to people in the private rented sector than to those in voluntary housing projects.
- Even relatively accessible accommodation available in the private rented sector may not have an appropriate kitchen, internal door widths or bathroom suitable for wheelchair users.

### 3.3.6 Community group homes

Respondents stated that community group homes (see Appendix 1) continue to play a crucial role in providing long-term accommodation, particularly for adults with intellectual disabilities. The following points were made in respect of community group homes:

- The demand for community group homes is far greater than the resources available to voluntary/community organisations to provide them.
- In some areas of the country, there are no community group home places available for adults with intellectual disabilities living with parents or carers. As a result, the only other option available in a crisis/emergency situation may be a nursing home.
- Frequently parents/carers of people with intellectual disabilities who wish to make long-term plans for alternative (to parental home) accommodation cannot do so because of the lack of community group home accommodation.
- A number of voluntary/community organisations have service users who want to move from a residential setting to a community setting but the organisations cannot fund the required homes and related support services.

### 3.3.7 Sheltered/supported accommodation

The term sheltered/supported housing (see Appendix 1) is used broadly here to refer to a clustered arrangement of housing where the residents live in self-contained accommodation and where some level of support is implied. The following points were made by survey respondents:

- Sheltered/supported accommodation is limited relative to need and in many instances where it is the desired option, it is impossible or very difficult to secure. This problem is exacerbated by the difficulties voluntary and community organisations have in securing sufficient properties and sites in current market conditions.
- There are people with disabilities currently in residential care settings who would be much more appropriately catered for in sheltered/supported accommodation.
- Some people, due to the progressive nature of their condition (for example, Alzheimer's disease) are not given the option of moving to accommodation that is based on an independent or minimally supported living model. This may be too restrictive an approach in that some people currently being referred to a residential care setting may be able to manage satisfactorily in sheltered/supported accommodation for a considerable period of time.
- There are negative aspects to life in sheltered accommodation settings. These include:
  - people not being allowed to have a friend or family member stay overnight
  - loneliness and isolation
  - lack of adequate storage space.
- The poor availability of mainstream housing with appropriate supports and care services creates a knock-on increase in demand for sheltered/supported accommodation.

### 3.3.8 Emergency/temporary accommodation

Respondents reported a general lack of emergency/temporary accommodation for people with disabilities. Related problems identified by respondents were:

- People with disabilities sometimes have to be accommodated in totally inappropriate emergency B&B accommodation.
- Some voluntary/community organisations have respite places almost permanently blocked due to accommodating emergency cases awaiting long-term accommodation.
- In some areas there is no wheelchair-accessible emergency/temporary accommodation available – the only option in some instances where a person with a disability needs immediate accommodation is a nursing home.

### 3.4 Assessment of Housing Need

Most survey respondents stated that, in their experience, people with disabilities are not included in any comprehensive manner in local authority assessments of housing need. The following points were made in this regard:

- Many voluntary/community organisations have an accommodation waiting list that is fully available to local authorities but that this was not taken into account.
- Local Authorities did not take into account the Health Research Board Disability Databases.<sup>19</sup>
- There is a lack of clarity and transparency in how housing need is assessed and measured by local authorities.
- A more holistic approach to needs assessment is required which would consider factors such as choice, potential for independent living and stage in the life-cycle.
- Statutory agency personnel should be properly trained in needs assessment. and people with disabilities should themselves be proactively involved in the process.

### 3.5 Accessibility Issues Identified

#### 3.5.1 Availability of accessible housing

The following were the main points made by survey respondents in relation to the availability of accessible accommodation:

- There is a shortage of accessible housing stock both in local authorities and the private sector. In particular, relatively few houses have fully accessible kitchens and bathrooms. Major alterations and adaptations are required to most 'mainstream housing' to make it accessible to persons with disabilities.
- Minimum building requirements (Part M) are inadequate – for example, Part M does not include provision for equipment storage or the size requirement of powered wheelchairs which are widely used. Additionally, the Part M regulations have not to date been strictly enforced.
- Designers and builders display a poor knowledge or understanding of the design needs of people with disabilities. Individual people with disabilities are not sufficiently involved in the design of their housing.
- Dementia-friendly design is not generally provided for in the built environment (signage, colour schemes, familiarity of buildings and their internal furnishings).
- There is some anecdotal evidence of people requiring and needing ground floor accommodation from local authorities but being offered other accommodation which was not suitable.

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<sup>19</sup> The National Physical and Sensory Disability Database is a voluntary self-reporting database to facilitate service planning.

The National Intellectual Disability Database is a service planning tool and people are only included if they are deemed to have a requirement for a service. Both Databases are maintained by the Health Research Board.

#### Case Example 4

C. is a separated mother of 2 children aged 6 and 11 years. She lives in a local authority 2-storey house. She has a severe disability which affects several joints and, as a result, has significant mobility problems and great difficulty in going upstairs where the bathroom is located. She needs a single-storey house with an accessible toilet, shower, taps, and door handles. She applied for re-housing but was told that there was a huge waiting list and was not given any date for when she would be re-housed. Over a year after she first applied, she received a letter stating that she had been assessed as having a housing need in accordance with Section 9 of the Housing Act 1988 and that her application would be subject to ongoing review in the light of her circumstances at any given time. However, some time later, she was informed verbally by a local authority official that it was very unlikely she would get a transfer in the short term. She was also informed that it could take up to two years for a stairlift to be installed in her present house.

Following letters from her GP, consultants, TDs, a social worker and an occupational therapist, regular phone calls and visits to the local authority office, she was told verbally (but not in writing) that the next bungalow that became available would be offered to her. She was also told about a new housing estate being built which included bungalows and that she would also be offered one of them. However, she was informed that it could take up to a year and a half for these to be ready. The advocate working on the case noted: "So for the time being she has to crawl upstairs and hope for the best that she doesn't fall down the stairs and suffer a serious injury".

#### 3.5.2 House adaptations: Disabled Person's Grant (DPG)<sup>20</sup>

At the time that the study was undertaken, the Mobility Aids Grant and the Housing Adaptation Grant (introduced in November 2007) had not come into force. Therefore, comments made and issues identified related to the existing policy and practice under DPG. There was a broad consensus that, even though issues relating to the DPG had been highlighted over the years and are well documented, access to the grant continued to be problematic for many people requiring home adaptations. The following were the main problems identified:

- The grant is simply inadequate to cover adaptation costs and restrictive application criteria (including means-testing) introduced in recent years by some local authorities have caused difficulties for many people needing adaptations. The maximum grant frequently falls far short of what is required to carry out the necessary work. For many people, the shortfall in the grant is not easily sourced. Also, people may be unaware that they can apply to the HSE for additional assistance. Some people do not apply for the grant because of difficulties with application, finding a builder and finding the balance of the cost from their own resources. People themselves have to negotiate with builders and sometimes they may not have the capacity or energy to do so.
- It is hard to find builders to carry out adaptations. In some cases, people just gave up trying. It can also be very difficult to get builders to provide quotes and many builders, particularly smaller ones, tend to be vague about building regulations and accessibility requirements. It was suggested that local authorities should provide applicants with a list of approved builders.
- The delays in having grant applications processed and work carried out are unnecessarily long. Significant delays can arise because of the unavailability of an Occupational Therapist (OT) to carry out the required assessment. Advice on the design of adaptations and the application for a DPG is dependent on input from an OT. There are simply not enough OTs and the waiting period for the community OT to carry out the required assessment can be 2 years.

<sup>20</sup> The NDA (2006) Report on the Disabled Person's Grant clearly points to a need for reform of the grant. A Review of the scheme has been completed by the Department of Environment, Heritage and Local Government and a new scheme is being implemented..

## 3.6 Supports for Independent Living

### 3.6.1 Community-based services

Respondents identified the requirement for a wide spectrum of supports to help with accessing and living in appropriate accommodation. It was suggested that, in looking at community-based services, there is a need to distinguish between the following:

- Personal Assistant service requirements
- In-house supports
- Housing supports, for example, to maintain tenancy
- Emotional and/or social support.

A recurring theme in the survey was that some services, such as physiotherapy and occupational therapy, which are available in hospitals and some residential settings, may not be accessible to the same degree in the community. It was also noted that social work services are not available to people in nursing homes who wish to move to community living. Required support and care packages are found to be frequently unavailable and people felt there was a need to have a continuum of support available which could be drawn down as required.

### 3.6.2 Home help services

Opinions on the home help service raised a number of points:

- People with home help requirements are not able to access a service which is flexible enough to meet their specific needs, for example not being able to get assistance with going to bed at a time of their choosing.
- There are waiting periods in some areas.
- It is often difficult to get cover when a home help is sick or on holidays.
- Cutbacks in home help hours are regularly experienced.
- The service is perceived by some families of people with disabilities as being available to people over 65 years only with the result that they do not actively seek the service.

### 3.6.3 Personal assistant (PA) service

The following issues were identified by survey respondents in relation to the current PA service (see Appendix 1 for an explanation of Assisted Living/PA services in Ireland):

- The overall funding available for PAs is insufficient. Many people who are getting a PA service need more hours. Lack of sufficient PA hours can hinder a person from availing of an independent living housing option
- It is difficult to get people to work as PAs on a part-time or limited hours basis.
- A person with a disability may need help to apply for, organise and put the PA service in place. This help may not always be available.
- The person who needs the PA service is not always adequately involved in its design and development.

## 3.7 Accommodation Needs of Specific Categories of People with Disabilities

While there are some common aspects to the accommodation needs of people with disabilities, different categories of disability require different responses. Survey respondents were, therefore, asked to identify the specific needs of five categories of people with disabilities: people with physical/sensory

disabilities, people with mental health difficulties, people with intellectual disabilities, people with Alzheimer's or other dementia and people with an acquired brain injury.

### *3.7.1 People with physical/sensory disabilities*

The main accommodation issues identified for people with physical/sensory disabilities were accessibility (of both accommodation and the local environment), supports for independent living and the transition from hospital to community living. Government policy on physical accessibility of accommodation, with its emphasis to date on house adaptation, was regarded as unsatisfactory. Respondents repeatedly highlighted the shortcomings of the Disabled Person's Grant; these have been widely documented<sup>21</sup> and some have been noted above.

#### *Case Example 5*

D. is in his early 30s and has been a wheelchair user since childhood. His parents encouraged him towards independent living and when he was 19 he applied to a voluntary organisation for accommodation and was given a self contained unit on a short-term basis with support staff to help him to go to bed at night and to get up in the morning. He stayed there for 3 years while he was studying for a diploma. He applied for local authority housing and eventually got an offer of a house 'off-plans'. He feels that he was lucky in that the house had been originally designated for another person who had died. When he was offered the house, only the foundations had been laid so that he could influence the design of the interior. However, he stated that it took considerable negotiation with the local authority to have the house designed to meet his needs. He feels that his negotiating position with the local authority was strengthened by the fact that a friend with similar mobility issues had been allocated a house in the same block and was also negotiating its design. Eventually his own house was built to his satisfaction with an open-plan kitchen and living room. It is a one-bedroom house and, therefore, he feels, not adaptable to his lifelong needs.

In terms of the support that D. needs to live independently, he was originally given 35 hours per week PA service when he moved to his local authority house. He applied for more hours and was eventually given 70 hours per week. In addition, his current place of work pays for a PA for 7 hours a day while he is in work (private businesses can get a productivity grant from FÁS for PAs). He generally has 3 hours service from a PA in the morning and 7 hours service from a PA in the evening from 5pm till midnight. He is, however, on his own from midnight till 7am. If there was an emergency where he had to evacuate the house, he would be unable to do so. He does not have an emergency alarm system and relies on mobile phone contact with a friend.

D. feels that leaders (that is people with disabilities and using the service of a PA) need more supports. He would like to see a system of direct payments to people who require PA services but states that "we don't have that option in Ireland".

### *3.7.2 People with mental health difficulties*

The lack of sufficient accommodation and community-based support services was seen as resulting in significant numbers of people who experience mental illness living long-term in psychiatric hospitals, or having to remain in the family home beyond a time of their choosing or living in sub-standard accommodation. It was noted that this issue has consistently been highlighted in the reports of the Inspector of Mental Health Services.

People with mental health difficulties were considered to have a specific difficulty in that their disability was not always recognised as such. There was a perception that people with a history of mental health difficulties were sometimes treated unfavourably by housing authorities.

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<sup>21</sup> See, for example, NDA (2006), *A Review of the Disabled Person's Grant and Recommendations for Change*.

One of the problems highlighted as facing people with mental health difficulties is finding adequate community-based supports to enable them to manage on a day-to-day basis. The lack of such supports has resulted in people having to be re-admitted to hospital or other institutions. This situation also means that many individuals are part of a 'revolving door syndrome', leaving and returning to institutions on a regular basis. The link between homelessness and mental health difficulties was frequently brought up.

Reference was made to people with mental health difficulties living in very poor quality housing, particularly in isolated rural areas. It was noted that local authorities can be slow to accommodate people with mental health difficulties because of the absence of adequate support packages. As already stated, negative social attitudes and stereotyping were seen by some respondents as impacting on how accommodation needs of people with mental health difficulties were perceived and met.

The voluntary organisations that were surveyed indicated potential for innovative housing solutions, given a more flexible framework for resourcing services. Reference was made to the need for the implementation of the recommendations in *Vision for Change* (Report of the Expert Group on Mental Health Policy 2006), especially those in relation to community supports. The need for further progress on putting in place integrated, multi-disciplinary planning for people with mental health difficulties was highlighted.

### *Case Example 6*

E. is in his 40s and has a mental health difficulty. He is in receipt of Disability Allowance and currently lives in a house which needs total refurbishment. There is no toilet, shower or kitchen. He lives, cooks and sleeps in one room. In March 2006 he applied to the local authority for a Disabled Persons Grant. He was approved for the grant in September 2006. When the local authority engineer visited the house he advised that he apply for a Special Home Improvement loan instead (this would mean him paying back €10 a week for a maximum of 15 years). He was approved for this loan in March 2007 but has to get planning permission. Only on receipt of planning permission can he get quotes from three builders, as this is a stipulation of the grant.

The advocate working on the case has had several meetings with local authority staff to help resolve the issues. The advocate noted that:

- It was clear from the outset that E. was living in totally inappropriate accommodation, yet it was not treated as an emergency
- Public information about the availability of supports and existing processes is poor
- Written correspondence from the local authority is minimal and slow. On one occasion, it took two months to get a response to questions posed following a meeting to clarify issues. The response only came following copied letters to the County Manager.

### *3.7.3 People with intellectual disabilities*

The picture that emerged from the survey was one of a significant shortfall in community-based accommodation for people with intellectual disabilities throughout the country. People in this situation include those living at home with parents or siblings who no longer feel able to provide adequate care and those in larger residential units. This area was seen as presenting significant challenges because of the current mismatch between need and availability.

One issue identified was that some people with intellectual disabilities may want to live independently but cannot articulate their needs and parents may be equally or, indeed, more reluctant, to pursue the matter.

Another issue raised was the requirement to develop new models of alternative accommodation to

cater for the diverse needs of people with intellectual disabilities. Some of these should be designed to allow people a gradual and flexible transition over a period of time from their existing home to a group home and, in some instances, to more independent living. Voluntary organisations noted that they were well positioned to develop innovative models.

A number of respondents referred to the clear need for a long-term care/accommodation plan for each person with an intellectual disability based on his/her ability and choice. Also mentioned was the desirability of a case management approach where a named person is responsible for co-ordination and ensuring implementation.

It was pointed out that residential care is not an appropriate model of service provision because it is very difficult to provide person-centred services in such settings. Older residential centres that provide only bedrooms and shared toilet/bathroom facilities are totally inappropriate. People with intellectual disabilities may also have or acquire physical/sensory disabilities. However, accommodation provision sometimes focuses only on the intellectual disability.

Attention was also drawn to the fact that people with intellectual disabilities who were placed in 2-storey group homes some years back have now developed mobility problems. The provision of more accessible accommodation for these people may result in the disruption of networks and supports that have been built up over a period of years. Planning, therefore, must be forward looking and based on a life-cycle approach to cater for changing needs over a person's lifetime.

### *3.7.4 People with Alzheimer's or other dementia*

Shortcomings of existing accommodation provision for people with Alzheimer's or other dementia were noted by a number of respondents:

- Access to sheltered/supported housing is frequently not seen as an option because of the progressive nature of the disability.
- Some people with dementia live in sub-standard or insecure accommodation by virtue of their age and the age of their home. They may have lost their ability to maintain their home independently and to avail of existing repair schemes, namely the Essential Repairs Grant and Special Housing Aid scheme.
- Some persons with dementia may enter long-term care prematurely, not because they have high physical care needs, but because they require greater supervision.
- Access to assisted living services and other home care supports is often limited and geographically determined and may result in people being unnecessarily placed in nursing homes.

### *3.7.5 People with an acquired brain injury*

These particular difficulties faced by people with an acquired brain injury were identified:

- People with an acquired brain injury often do not fit into existing criteria for social housing for their accommodation needs to be met. Consequently, most existing supported living or independent living arrangements do not cater adequately for the needs of people with an acquired brain injury.
- There are some good models of accommodation provision for people with an acquired brain injury and a number of innovative projects (see Chapter 4). However, there is not enough suitable accommodation with the necessary support systems. This makes it very difficult to move some people with an acquired brain injury (of which there is a growing number) out of a hospital/nursing home setting.
- There is a lack of awareness in society about acquired brain injury and its consequences for people's ability to manage their affairs. This may result in an under-provision of housing options and related services.

### *Case Example 7*

F. is in his early 30s and has an acquired brain injury. He has 3 children. He is doubly incontinent and disinhibited (engages in inappropriate social behaviour). He has to leave hospital because his acute rehab programme is completed. He needs transitional accommodation with a rehabilitation element (as he cannot go back to his family at present). However, such a facility is, according to the social worker involved in the case, very difficult to find.

Hospital staff involved in the case noted that a facility with step-down rehab is essential for people like F. who do not require acute rehabilitation but who are not yet ready to live independently. However, such facilities are only beginning to be put in place and are at present often not available.

### *Case Example 8*

G. is an 18 year old who acquired a brain injury following a car crash which has significantly affected his behaviour and emotional well being. At the time of the crash he lived with his mother in his grandmother's house. They were living there having moved out of their family home (Local Authority) due to estrangement from G.'s father. Since the car crash G. and his mother have had to move back to the family home temporarily due to the difficult behaviour displayed by G. as a consequence of his acquired disability. The situation in the home is extremely difficult. The main support to this family has been through a voluntary disability organisation, which has helped them complete forms for a housing transfer but this transfer is likely to take a very long time. G.'s mother has received no priority with the local authority as they deem her as having a house. This is despite her explaining that she and her son urgently need to move to separate accommodation so that she can provide the necessary care and support to G. in a secure environment. This was verified to the local authority by a supporting letter from the voluntary disability organisation. Another organisation that accommodates young adults assessed G. recently but deemed his needs too high for them to manage. G.'s mother has been looking in the private sector for a number of months without success.

## **3.8 Core Policy Issues Identified by Respondents**

Survey respondents were asked to list the core issues that need to be addressed and the policy actions required. Six main issues emerged from the analysis: person-centred planning; independent living; inter-agency collaboration; accessibility; housing options; and access to information; advice and advocacy.

### *3.8.1 Person-centred planning*

The adoption of a person-centred planning approach for identifying and meeting the accommodation needs of people with disabilities was seen as essential. Putting the person with a disability at the centre of the planning process is acknowledged as a key policy principle but is not always translated into practice on the ground. A stronger package of tailored supports is required to make this principle a reality. Adoption of a case management approach would help to achieve this. There is a need for greater recognition of people's individual views on their accommodation and related support preferences.

### *3.8.2 Supports for independent living*

The implications of the concept of independent living across the range of disability categories are not fully acknowledged in current policy discourse and practice. Applying the concept to housing policy development was seen as presenting huge challenges, particularly for categories of people with disabilities where it is not yet the norm. This has significant resource implications in terms of the range and nature of independent living supports required.

### *3.8.3 Inter-agency collaboration*

The shortfalls in the availability of accommodation and inadequate support services for independent living were felt to be compounded by poor co-ordination between the different agencies involved, particularly housing and health authorities. It was believed that a cohort of people with disabilities are falling between services because of a disjointed approach to service provision at local level.

Although a number of agencies (statutory and voluntary) may be involved with the discharge of a person from hospital, the accommodation aspects of the discharge are not always adequately addressed. This was felt to be particularly relevant in the case of people with mental health difficulties.

There was a general consensus that greater collaboration between health and housing authorities was required across the board in order to ensure that a comprehensive range of accommodation options are available as alternatives to residential care and other unsuitable arrangements.

### *3.8.4 Accessibility*

The commitment by Government to develop higher accessibility standards, and most importantly, to enforce them, was regarded as fundamental to addressing accessibility issues and to building the confidence of people with disabilities. The current Part M review must, it was emphasised, be comprehensive and address current loopholes, minimum design criteria and inconsistencies. Houses must be habitable rather than simply “visitable”.

### *3.8.5 Housing options*

Lack of choice was a recurring theme in the questionnaire responses. The options available to people with disabilities generally fall far short of those available to the general population. A wider range of housing options needs to be available for different categories of people with disabilities than is currently the case. This was seen as being particularly relevant for people with mental health difficulties and people with intellectual disabilities.

### *3.8.6 Information, advice and advocacy*

Access to information was seen as crucial to people in exploring housing options. The current system was regarded as not being proactive enough in ensuring that comprehensive information by service providers was made available on housing and related supports entitlements for people with disabilities. Also, the presence or absence of an advocate was felt to be a significant determinant of outcome.



## *Chapter 4*

# Focus Group Discussions: Main Findings

# Focus Group Discussions: Main Findings

## 4.1 Introduction

The previous chapter has described the findings of a survey of voluntary/community organisations working with people with disabilities. A series of themes/questions based on the findings of this survey were used as the starting point for focus group discussions (see Appendix 2). Five focus groups<sup>22</sup> were organised around the country as part of the study. The groups were made up of people with disabilities (service users) and staff from relevant voluntary/community organisations. The table below gives the breakdown.

### Focus Group Participants

Location	Service Providers	Service Users	Total
Dublin (Group 1)	-	11	11
Dublin (Group 2)	18	-	18
Limerick	11	-	11
Sligo	6	4	10
Tralee	-	13	13
Total	35	28	63

Focus group discussions centred on the participants' actual experience and perceptions in order to explore further and validate the survey findings. The focus group discussions covered broadly similar themes and identified broadly similar issues to the survey of voluntary/community organisations. As might be expected, the focus groups provided a somewhat sharper perspective on the issues in that they allowed for a more personal engagement with the topics being explored.

The findings of the focus group discussions are set out under seven main headings:

- Extent of housing need among people with disabilities
- Impact of perceived social attitudes to disability
- Accessibility
- Dealing with statutory agencies
- Information, advice and advocacy
- Required policy changes for improving access to housing
- Good practice in housing provision.

## 4.2 Nature and Extent of Housing Need

Focus group participants were asked to identify the nature and extent of housing need among people with disabilities based on their own experiences.

The absence of provision for the proactive assessment of people's housing needs was regarded as very significant for people living in their original family home, for some people in community group homes and for people in hospitals or long-stay residential units who could live in community settings if appropriate housing and related supports were available. It was felt that there is generally poor awareness by people with disabilities of the options and supports available.

<sup>22</sup> A number of organisations working with people with disabilities were invited to nominate representatives (including both staff and service users) to participate in the focus groups.

There was universal agreement that there is a considerable hidden housing need. Many people with disabilities of one type or another are living with parents but wish to live separately and independently. As one focus group participant put it, “there are people who are institutionalised without being in an institution”. In some of these situations, there may be significant isolation for the person with the disability. Many such people felt that there was no point in going on local authority housing waiting lists because housing would just not be provided in such instances. They see continuing to live in the original family home as the only option available and see no alternative pathway to accommodation.

A number of other points were touched on in relation to the shortage of suitable housing. People with disabilities tend to have low expectations - the overall shortage of suitable housing exacerbates this. Frontline agency staff who identify a housing need for a person with a disability are often unable to get an appropriate response from the relevant authorities, even within their own agency.

The following comments illustrate the perceptions of focus group participants:

*“It is sometimes the case that families protect a person with a disability and do not encourage them to go on [housing] list. A crisis arises and the person with a disability may end up in a nursing home which is totally inappropriate”*

*“People living with parents may not put themselves on housing lists because they feel they would not be taken seriously and/or would not get the type of supports they would require to live independently”*

*“People with disabilities are frequently not on housing list – they are not supported or encouraged to go on list. Some are now farther down the waiting list than they should be simply because they did not apply earlier”*

*“It is not just a question of meeting physical needs but also of combating social isolation – some people are totally isolated [in their present accommodation]”*

*“There should be more planning for future needs. There are some people living with families who are just about managing now but may not be able to do so as their needs become more acute”*

*“Accommodation shouldn’t be based on response to a crisis situation, when carers or parents can no longer cope”*

*“If a parent/sibling is available, the local authority and HSE don’t want to know”.*

### 4.3 Impact of Perceived Social Attitudes to Disability

The policy responses to housing people with disabilities were regarded as clearly reflecting social attitudes to people with disabilities. A strong sense emerged in the focus groups of people with disabilities feeling that many people in society do not believe that people with disabilities want to and, indeed, should be facilitated in living full lives, for example, forming family units, living independently, engaging in productive work. It was also noted that some people with disabilities may be unable to get community-based accommodation because of social attitudes to particular types of disability, particularly mental health difficulties.

The definition and understanding of disability was regarded as fundamental to equality of access to accommodation and services. It was pointed out repeatedly that limited understanding may determine policy responses, particularly at local level, and that this needs to be challenged in policy discourse at all levels.

Some focus group participants expressed the view that there is an assumption on the part of society that a person with a disability will be looked after by family or by a partner. This limited view of the

needs and aspirations of people with disabilities and their families was seen as being reflected in the attitude of some officials when dealing with applications for housing and other support services. There was a perception of some officials not being fully tuned in to people's desire and need to live independently and to organise their lives accordingly. As one focus group participant (a wheelchair user) stated, "I need to be able to access all the rooms in my house".

The failure to provide suitable housing choices and options for people with disabilities was seen as undermining their independence and putting unnecessary strains on personal and family relationships.

It was also noted that assessment of accommodation needs for people with disabilities does not usually take into consideration the fact that, in some instances, they are planning on forming family units and having children. As one focus group participant stated, "options for 'normal' living did not come into the equation when my housing needs were being assessed". Some public services personnel were seen as being more flexible and/or understanding of disability than others – "it very much depends on who you meet". The need for much more training in disability awareness for public officials was referred to by a number of focus group participants.

The following comments made by focus group participants highlight the perception that negative or patronising social attitudes affect the housing options available to people with disabilities:

*"People with disabilities are normal people – some have jobs, families and children, others have aspirations to have jobs, families and children"*

*"We still have the same [housing] needs and wants as everyone else"*

*"The notion of people with disabilities forming a family in the future is simply not provided for [in housing terms]"*

*"I was told that what I needed was a 1-bedroom accessible accommodation – nobody asked if I had future plans"*

*"The attitude of some officials is 'why can't you live with your parents' – I don't want to continue living with them for ever"*

*"When I looked for more PA hours to manage on my own, I was asked 'can you not get a friend to do it?'"*

*"Because of environmental design being disabled goes hand in hand with being dependent on others"*

*"You want to be independent but if you show too much independence you won't get any support"*

*"What young person with a disability does not want to live somewhere where they can socialise with friends"*

*"It can be a difficult experience for someone with a disability to prove that they have a genuine housing need".*

### Case Example 9

H. is a CIS client in receipt of Disability Allowance who has been living in private rented accommodation for a number of years. His most recent accommodation suits him because of its location but it is of poor quality and has no central heating. He is in receipt of rent supplement but told the CIC that he has to pay the landlord €45 a week rather than the €13 required under the rent supplement, that is an extra €32, to make up the rent that the landlord says he would charge if not restricted by the rent supplement levels. Also, he has to pay €15-€30 per week to the landlord for ESB meter cards which he feels is exorbitant given that he does not have any electric heating. Also, H. cannot avail of the Household Benefits Package because he cannot get the electricity supply in his own name. H. has discussed the situation with the landlord but the landlord is unwilling to reduce charges or allow the man to get the ESB bill transferred into his name. The ESB has told the CIS that the matter is entirely between the landlord and tenant.

H. is unwilling to have any other action taken through the Private Residential Tenancies Board because he is fearful about losing the accommodation. He is of the view that he would find it difficult to obtain any other suitable private rented accommodation and he also does not rate his chances very highly of getting local authority housing based on his past experiences of making applications to different local authorities as a single man.

## 4.4 Accessibility

Accessibility emerged as a major issue in all focus groups. Problems with accessibility arose both for people with physical and people with sensory disabilities. It was generally agreed that although accessible housing was provided in response to individual needs by way of either adaptation or new-build, accessibility was not a core policy consideration. It was pointed out that current Part M provisions indicate minimum dimensions for various facilities such as ramps, toilets and door widths but these are insufficient because of the more widespread use of large powered wheelchairs which require greater dimensions for such facilities.

A number of focus group participants suggested that there should be a percentage of all housing that is fully accessible with some suggesting that 10% of all social housing should be fully accessible to cater both for the needs of people with lifetime disabilities and those who acquire restricted mobility as they grow older.

General comments on accessibility included the following:

*"I need to be able to independently use the bathroom and kitchen in my house – this is crucial for living"*

*"How can one live in a home without being able to use the kitchen and, indeed, without being able to access the whole house"*

*"Disability-friendly is also able-bodied friendly"*

*"Wheelchair-accessible properties are not kept for people with disabilities"*

*"I have to move house but I am having great difficulty in identifying an accessible house to buy on the open market – accessible housing with adequate storage is very hard to come by generally"*

*"Location is nice [private rented], apartment is nice but the bathroom is far too small [for a wheelchair]"*

*"New-builds are visitable but not habitable – how can you visit somewhere if you do not have somewhere to live"*

*"In Sweden planning permission requires provision for a wheelchair-accessible bathroom - we have a long, long way to go in Ireland"*

*“People with appropriate design expertise and know-how must be involved from the beginning of the process, as should people with disabilities”*

*“Accessible private rented accommodation is simply not available in this town”*

*“There is a tendency to build houses with big bedrooms upstairs and small toilets downstairs”.*

A view that emerged strongly in focus group discussions was the need to look at the housing issue in the overall context of the built environment (roads, footpaths, transport). It was felt that these were as important for independent living as the actual accommodation in terms of accessibility. The following comment by a focus group participant (wheelchair user) illustrates the issue:

*“I don’t need a personal assistant but what I do need is fully accessible accommodation, an accessible environment and accessible public transport – in many towns it is impractical and dangerous for a wheelchair user to go out on his/her own – there is a scarcity of safe crossing points, [and there are] uneven footpaths, illegal parking”.*

### **Disabled Person’s Grant**

There was widespread concern expressed by focus group members (as well as by survey respondents, as discussed in Chapter 3) about the operation of the Disabled Person’s Grant<sup>23</sup>. The issues highlighted related to waiting time, amount of grant, difficulty many people have in making up shortfall and difficulty in getting builders to carry out the work. The comments made by focus group participants relating to the Disabled Person’s Grant included:

*“Political pressure is a significant factor in a person getting the grant”*

*“There should be provision for a roll-in shower to be included in adaptations for wheelchair users”*

*“The waiting period to actually get approval, especially for people with mental health issues, is bad enough but then to get the builder to do the work, makes a bad situation worse”*

*“Advocacy gets a speedier response from the county council – we [voluntary organisation] are well regarded by the Council”.*

## **4.5 Dealing with Statutory Agencies**

Focus group participants noted there was not an ethos of collaboration or joint working throughout the service delivery system. There was repeated reference in the focus groups to a lack of co-ordination and insufficient inter-agency communication which was seen as creating significant difficulties for service users. This makes it difficult to put in place the housing and support/care package that may be necessary for an individual to live independently in a manner that is adequate and sustainable. The general experience was one of issues frequently being “bounced back and forth between local authorities and Department of Environment, Heritage and Local Government and between local authorities and the HSE”. The fact that disability support services and housing services are split up administratively means that service users are frequently unsure of which agency has responsibility for dealing with their situation.

It was pointed out that local authorities do not currently have a role in providing community supports and there is a sometimes a shortfall in the availability of such supports from the HSE. As a result, people, even if they do get housed, may not have be able to manage either in the short or longer term.

The focus group discussions suggest mixed experiences with local authorities – some were reported as being fully au fait with the challenges of meeting the accommodation needs of people with

<sup>23</sup> The research was carried out prior to the introduction of new schemes to replace the DPG in November 2007.

disabilities while others are less aware. Some focus group participants reported positive experiences with local authorities in their search for suitable accommodation while others found the process unhelpful and unsupportive. One participant referred to “people with disabilities getting the run around from [local authority]” while another (a wheelchair user) reported a very positive experience with a different local authority “Within 6 months I had a fully accessible house – one official fought tooth and nail to get it done”.

One of the difficulties noted was that some local authorities continued to tend to see disability as primarily a health issue. However, in the view of some respondents, a number of local authorities are becoming more accessible and attuned to needs of people with disabilities. For example, it was pointed out that some are now providing clear information about eligibility criteria for social housing and prioritisation in relation to people with disabilities.

A key point emphasised was that staying in their own neighbourhood is very important for many people with disabilities but that local authorities did not always understand or appreciate the importance of this. “People are sometimes offered accommodation in other areas which are not acceptable because of their need to be near families and friends”.

Another issue raised was that, while some applicants for local authority housing are asked to provide a letter from the HSE stating that adequate personal assistant (PA) hours will be available, this is not an indicator that accommodation is actually being offered. One focus group participant stated that she had submitted such a letter on two occasions in the past two years but had not been offered accommodation by the local authority. She was understandably frustrated by this experience.

#### 4.6 Information, Advice and Advocacy

As already stated by survey respondents, focus group participants felt that access to information on housing options from housing providers is essential but not always forthcoming – “nobody ever comes to tell you what services are available – you have to find out for yourself”.

Access to good quality information was perceived to vary widely from one local authority to another. Some local authorities were seen as providing very good access to information – for example, a person can go online and find most information he or she would require – while others are relatively poor in this regard.

It was noted that, sometimes, information about a housing application by an individual is not passed on from one local authority official to another and the person has to supply the same information all over again with a consequent delay in the process. Also, there was a perception that, while some officials have a good understanding of the disability dimension to accommodation, this is not always transferred to other officials who may be involved in the case.

The following comments by focus group participants highlight information issues:

*“A lot of people don’t have the relevant information and many don’t have someone to speak up for them”*

*“Filling out forms is a problem - ticking boxes may not always be adequate as people sometimes do not fit into predefined categories”*

*“Having to continually prove/show that you have a disability is unfair and unnecessary”*

*“People need to know timelines [for processing applications] but are rarely told”*

*“Correspondence [from local authorities] is totally inadequate”.*

*“Do people know that they can get help [with accessing information]”*

*“Politicians play a key role in many instances”*

*“Many websites are not accessible to blind people”*

*“Some people have dyslexia and some are embarrassed to draw attention to a literacy/writing difficulty in addition to their disability”*

*“People are frightened by the size of the [Local Authority housing application] form and the type of questions asked”.*

*“Form filling is very problematic for people with visual impairment”*

*“There is a lack of proper communication by officialdom with people with disabilities”.*

## Advocacy

Advocacy was considered to be a key element and the presence or not of an advocate (family member or other) was regarded by some focus group members as a key determinant in a person getting appropriate accommodation. This was borne out by the experience of voluntary/community organisations.

It was noted that pressure on local authorities does in fact bring about appropriate interventions in some instances. It was pointed out that one local authority provided accommodation for 6 single men deemed to be at risk as a result of sustained advocacy by a voluntary organisation over a period of time.

The following were some of the comments made on advocacy:

*“Considerable and sustained advocacy is frequently required to get Council housing”*

*“Why should people with disabilities have to fight so hard to get appropriate accommodation - writing to TDs and all that stuff”*

*“Dealing with the system of public housing allocation requires a level of cognitive skill and application that some people with disabilities do not possess – there is a shortfall of available advocacy support to help people in this regard”*

*“Why should it depend on the official one meets?”.*

## 4.7 Required Policy Changes for Improving Access to Housing

Focus group participants were asked to identify policy changes required to improve access to accommodation by people with disabilities. Six main themes emerged from the discussions – equality of access, choice, life-cycle approach, independent living, person-centred planning and mainstreaming of housing provision for people with disabilities.

### 4.7.1 Equality of Access

A key factor for equality of access identified was the fact that people with disabilities have limited options/choices in the Irish context because of the links between disability and low incomes. Access to appropriate quality and affordable accommodation with adequate security of tenure was seen as frequently not being available to people with disabilities.

Some areas, particularly rural areas, do not have active voluntary/community organisations providing housing and related supports for people with disabilities which exacerbated other inequalities.

### 4.7.2 Choice

Choice was regarded as fundamental to equality of access. There was a view, however, that choice of accommodation is by and large non-existent for people with disabilities. People continue to be in accommodation that is totally unsuitable but there are no alternatives available. Reference was made to the fact that people with intellectual disabilities are sometimes in such situations because parents/carers may be concerned about their ability to manage in different settings and consequently do not look for an alternative.

It was also pointed out that people's choice is frequently limited by factors other than accommodation, especially access to public transport. For example, it was noted that a person with visual impairment may find it easier to live in a rural area because it is more environmentally friendly but that the absence of public transport can make this impossible.

Focus group participants caring for adults with intellectual disabilities at home and people working with them indicated the sense of uncertainty which arises for parents from lack of availability of alternative accommodation options. Some noted that, while services were expanding, this was simply not happening at the pace required to meet need and to provide viable alternatives when, for example, parents would no longer be able to carry out the caring role. Some expressed the view that this point was not always fully understood by HSE personnel.

It was noted that a level of stigma continues to be associated with intellectual disability or mental health problems and that this negatively affects the accommodation options available under current policies. The personal aspirations of people with disabilities may also be influenced by their own low expectations in respect of the availability of support services.

#### *4.7.3 Life-cycle approach*

Assessment of housing need based on a life-cycle approach was considered as having the potential to significantly improve the lives of people with disabilities and resolve many of the current difficulties. For example, it was noted that adapted accommodation provided for a child with a physical disability would need to be reviewed when the child becomes a teenager and again when s/he becomes an adult. In practice, people with disabilities are frequently not offered alternative housing options more suited to their needs at different stages in the life cycle. In other words, there is not always an ongoing assessment of people's housing/accommodation needs, e.g. in the case of people with intellectual disabilities who have acquired physical or sensory disabilities.

#### *4.7.4 Independent living*

The concept of independent living was seen by focus group members as a basic principle in the provision of accommodation for all categories of people with disabilities. It was pointed out repeatedly that addressing the question of supports for independent living was an integral element of addressing housing need. The central role of the PA in facilitating independent living was a recurrent theme throughout the focus group discussions as was the need for other community-based supports such as home helps. However, there was a strong sense that the implications of independent living for how accommodation and related supports are provided across the range of disability categories were not fully acknowledged in current policy discourse. Current provision for assisted living services was regarded as inadequate due to a shortage of resources and absence of streamlined and equitable provision across the country.

#### *4.7.5 Person-centred planning*

Person-centred planning, directed by the individual, was regarded as a basic principle in accessing suitable accommodation. There was a strong consensus that there is a need for a stronger package of tailored supports which put the person with a disability at the centre. While this has been established as a key policy principle, it had not, it was felt, translated into practice on the ground in a comprehensive manner. There was very little individual planning for people who have specific problems and insufficient consideration of people's views on their accommodation and related support preferences.

There was some disillusionment about consultation by local statutory agencies with people with disabilities, both individually and collectively, in relation to housing and related support services. For example, it was felt that people with disabilities should be represented on all local authority committees dealing with disability issues but that this was not the case at present.

Another view was that, even where consultation took place in what appeared to be a meaningful

manner, the subsequent follow-through with necessary actions was often seriously lacking. Another view was that consultation tended to be somewhat tokenistic and not a serious attempt to engage people with disabilities in a partnership approach to meeting their accommodation needs.

#### 4.7.6 Mainstreaming

There was a broad consensus among focus group participants that housing/accommodation provision for people with disabilities should in the first instance be clearly located within an overall policy context of mixed housing, mixed communities, choice of tenure, different housing styles and sizes and accessibility. Ensuring that adequate, reasonably priced accommodation is within everybody's reach was considered to be one of the most effective ways of combating social exclusion and should be given high priority in housing policy for people with disabilities. The point was made that more account needs to be taken of the potential of shared ownership and tenant purchase schemes. Special needs housing (see Appendix 1), it was argued, should be but one element of social housing provision for people with disabilities and that many more people with disabilities could be catered for in mainstream social housing.

#### 4.8 Good practice in housing provision

Focus group participants were asked whether they were aware of any good practices in relation to provision of housing/accommodation for people with disabilities. Individual service users pointed to good experiences, some of which have been referred to earlier. Some voluntary/community organisation representatives identified initiatives which were perceived as innovative and based on best practice considerations. Such initiatives generally involved strong inter-agency collaboration, the provision of supports to allow for optimum independent living and options for progression to more independent accommodation. Other initiatives incorporated a mixed housing element.

##### *Case Example 10*

J. is in her mid 30s and has mental health difficulties. She had been on the Local Authority waiting list for social housing since 1998. As a single individual, getting local authority accommodation has proven impossible, even with medical priority. J. has good family support and consequently was able to access private rental accommodation. However, because of mental health difficulties J. had to be admitted to hospital on a regular basis and found it hard to maintain private rental accommodation. Existence of rental caps and the lack of support for day to day independent living significantly added to the strain.

J. was referred to a housing association having had seven years of experience in and out of private rental accommodation. This housing association offers integrated living, allowing individuals to access mainstream accommodation within the community and without risking any stigma by living there. She was allocated accommodation which provides tenancy support and helps her maintain contact with other services that she may need from time to time. The voluntary organisation involved noted that they have no vacancies and that their waiting list is now closed.

### *Case Example 11*

A number of well designed apartments for independent living by people with physical and sensory disabilities are provided by a voluntary housing association. The self-contained apartments are grouped together yet integrated into a large, new residential development. Occupants of the apartments are social housing tenants who have been registered in need of housing. There is a carefully constructed, independent panel established for selecting tenants.

The investment was underpinned by the discount required of developers under Part V of the Planning and Development Act, a 95% capital grant from Department of the Environment, Heritage and Local Government and other financial assistance.

Local community activists were the driving force behind the project. The developer played a continuing supportive role. Another factor that contributed to the success of the initiative was the detailed consultation conducted at the design stage. Consultations with other service organisations helped to clarify the essential elements of accommodation for independent living. The employment of a professional project manager also was instrumental, helping to access the funds required to finance the non-standard dimensions necessary for accessibility. The Local Authority was a participant throughout the planning and construction process.

### *Case Example 12*

A mixed housing development by a voluntary/community organisation provides accommodation as follows:

- 19 family houses
- 40 units for older persons
- Community Group Home
- Transitional housing with progressive independent living supports for people with mental health difficulties
- Emergency Housing (10 units)
- 2 staff apartments.

The following on-site services/supports are provided:

- childcare (pre-school, after-school, summer school)
- day-care centre (serving a radius of 5 miles)
- fitness club for older people
- job-creation initiatives (FÁS/Pobal)
- arts/crafts
- support group for people with physical disabilities.

Inter-agency working is a key component of the project.



*Chapter 5*  
**Addressing the Issues:  
Implications for Policy and  
Practice**

# Addressing the Issues: Implications for Policy and Practice

## 5.1 Introduction

The study findings confirm and expand on many issues on the accommodation needs of people with disabilities that have been identified in recent years by both the disability sector and by Government. The findings of this report are timely in view of national policy changes now being implemented. Drawing on the findings, this last chapter explores how the issues identified in the study might translate into policy and practice and, specifically, how they might be addressed in the Housing Strategy for People with Disabilities.

The challenge for the proposed Housing Strategy is to clearly articulate how the complex accommodation needs of people with disabilities are to be addressed and to set out actions to implement the required changes. This study strongly suggests that the strategy will require a shift in focus from viewing people with disabilities primarily as people requiring 'special needs' housing to one which sees the accommodation needs being addressed by a continuum of housing provision to meet a wide range of individual circumstances. This means more use of general social housing for people with disabilities. It means further innovative models of provision for all categories of people with disabilities. It also means addressing the needs within mainstream housing policy as opposed to segregated housing for people with disabilities.

## 5.2 Overarching Considerations

The study points to three overarching considerations which need to be addressed in a housing strategy for people with disabilities:

- The need to fully acknowledge the diversity of the population of people with disabilities and the complexity of planning and delivering housing to meet their needs
- The need for stakeholders to ensure that the needs of people with disabilities are met in a socially inclusive manner
- The need for resources is commensurate with the task of providing a range of housing options.

### 5.2.1 *Recognising the diversity of the population of people with disabilities*

People with disabilities are not a homogeneous group. Moreover, a person's disability and accommodation needs may change over his/her lifetime. In addition to the major differences arising from disability type, differences also arise because of factors such as class, age, geographical location but also, and more importantly, perhaps, differences in people's ability to deal with and utilise the existing system of social housing provision to their own advantage.

While some of the difficulties identified in the study relate to the specific needs of different categories of people with disabilities, many arose because of the lack of a strategic framework to support the provision of tailored housing and housing supports generally for people with disabilities, which has already been discussed.

Accommodation needs refer to both housing and support needs. People with disabilities should have the opportunity to participate in the process of determining these needs. For example, early identification of potential tenants with accessibility requirements is needed to facilitate their active involvement in the design process.

### 5.2.2 Implementing a social inclusion perspective to meeting the housing needs of people with disabilities

A key challenge going forward is how the housing and support needs of people with disabilities can be addressed from a social inclusion perspective. People with disabilities, like the rest of the population, have in theory a number of accommodation options available to them, including privately rented, privately owned and social housing. However, they also frequently have specific, and often individual, design, location and support requirements. This means that in practice their options are restricted and they are therefore at a considerable disadvantage in relation to people who do not have a disability.

Ensuring that adequate, reasonably priced accommodation is within everybody's reach is one of the most effective ways of combating social exclusion, and should be given high priority. In formulating a more integrated housing strategy for people with disabilities, full account needs to be taken of the potential of subsidies provided to the owner-occupied sector, shared ownership and tenant purchase schemes. Special needs housing should be one of many elements of a housing strategy for people with disabilities.

In order to be fully inclusive, mainstream housing provision should provide for a wide range of options, including standard housing, supported/sheltered/ clustered housing and innovative provision of residential care for those who cannot be accommodated in any other settings. This will require more integrated and mixed social housing generally, different models of community living for those currently living in group homes and additional housing supports.

As NESC noted in its report, *The Developmental Welfare State* (NESC 2005), mainstream and specialised services need to work effectively together, but there also has to be scope for innovative measures to promote greater participation and social inclusion.

Means-testing is a critical factor in social inclusion. Its application to housing needs assessment and access to adaptation grants must, therefore, be kept under continuous review so as to ensure that people with disabilities who have a need are provided for in a socially inclusive and equitable manner.

### 5.2.3 Provision of sufficient resources

The reality is that a comprehensive housing/accommodation policy for people with disabilities will be resource-intensive. While a re-direction of budgets from residential care to the community would offset some of these costs, additional resources will be required if people with disabilities are to have equality of access to accommodation.

Various policy statements have promised substantial expansion in social housing investment in order to eliminate waiting lists of people in housing need. This would significantly improve the situations of people with disabilities.

Increased funding to provide more, and more varied, housing is not the only element to be addressed in the strategy. The provision of supports to sustain people with disabilities in their accommodation must also be a priority. Additional resources are required to stimulate innovation and to maximise supports for independent living.

Funding levels and structures (in terms of continuity and security) need to maximise the contribution of voluntary/community organisations who are most likely to be aware of people's accommodation needs and, also, in some instances keen to develop innovative housing models. Designated resource commitments are, therefore, needed to underpin the long-term planning essential to implementing the housing strategy.

## 5.3 Main Accommodation Issues Identified

The accommodation issues raised in the study can be grouped under seven headings (see Figure 5.1 on page 55-56):

- People with disabilities in inappropriate accommodation
- Shortage of accessible accommodation
- Inadequate housing needs assessment
- Underdeveloped inter-agency collaboration
- Inadequate supports for independent living
- Funding
- Information, advice and advocacy.

### 5.3.1 People with disabilities in inappropriate accommodation

The following were identified as categories of people who are likely to have a housing/accommodation need that is not, or only partially, being met at present:

- Adults in family homes when they wish to and/or would be better off living elsewhere
- People in inaccessible accommodation
- Some people in long stay residential settings
- Some people in community group homes
- People awaiting discharge from hospital
- Some people in nursing homes, for example, people with an acquired brain injury, people with MS
- People with Alzheimer's or other dementia who are not in appropriately designed accommodation
- People without a home.

An overall finding was that there continues to be a mismatch between commitments in housing policy in general and the ability of individuals with a disability to access housing and support services appropriate to their needs. For example, despite people with disabilities being named as a client group within the 1988 Housing Act, there has been no formal requirement on housing providers to provide appropriate housing and accommodation for people with disabilities.

In order to address these issues, social housing provision needs to be fully inclusive of all categories of people with disabilities by making available a range of housing options to cater for a diversity of needs. Some of the needs identified could be met by providing additional mainstream local authority housing.

### 5.3.2 Shortage of accessible accommodation

Currently, there is insufficient physically accessible accommodation in all housing tenure sectors. No overarching design standards exist for new-build programmes that can incorporate all the features of lifetime adaptable housing.

Existing Part M provisions indicate minimum dimensions for various facilities such as toilets and door widths. However, often a building will be compliant with regulations but inaccessible to a large proportion of the population. For example, no recognition is given in the building regulations to the fact that a greater number of large powered wheelchairs are now in use, which affects the minimum dimensions required to, for example, make toilets accessible. Also, local authorities currently have no system in place to identify the location or access and design requirements of people with disabilities prior to the commencement of new-build programmes.

While the current review of Part M is significant and may result in a move from minimum compliance towards design for life, the provision of resources to ensure the enforcement of building regulations will be essential if new housing stock, both private and social, is to meet fully accessible standards.

Populations as they age acquire disabilities and people with disabilities are now living much longer. Housing design in the longer term must, therefore, incorporate a “design for all” approach, based on lifetime adaptability. Such an approach would mean that people with acquired short or long-term mobility problems could continue living in their own homes. As accessible accommodation becomes more widely available, fewer people will confront a housing crisis because of an acquired disability, which may lessen the need for adaptation grants.<sup>24</sup> However, it is essential that the new provision for adaptation grants, introduced in 2007, is closely monitored to ensure that all those in need of adaptations because of an acquired disability can easily access adequate grant aid.

### 5.3.3 Inadequate housing needs assessment

The commitment to the development and implementation of a new and systematic approach to housing needs assessment set out in the Consultation Paper (DEHLG 2006c) and the related procedures recently introduced (DEHLG Circular N13/2007 *Implementing the Revised Housing Needs Assessment Process – Phase 1*) is a welcome development. Also welcome is the commitment to develop further protocols relating to: (i) liaison between the HSE and local authorities to inform housing action plans to meet the needs of people with disabilities, and (ii) the support costs of social housing projects for people with disabilities. These are important steps towards inclusive needs assessment. The detailed working of these initiatives will need to be examined in the formulation of the National Housing Strategy for people with disabilities.

### 5.3.4 Underdeveloped inter-agency collaboration

The study shows that there are some innovations and good practice in existence at local level. These include responses by local authorities and joint initiatives involving a local authority, a voluntary/community organisation and the HSE. The study also identifies significant shortcomings in inter-agency collaboration which is critical to the implementation of an effective Housing Strategy. Often good practice is ad hoc and reliant on individual personalities rather than on a systematic operating framework.

The higher costs associated with accommodating people with disabilities are not always easily resolved, especially in relation to support/care services associated with housing, because of separate functional responsibilities and budgetary processes on the part of the HSE, the Department of Environment, Heritage and Local Government and Local Authorities. The Government should consider initiating a shared funding stream for individually tailored housing and supports for people with disabilities.

Effective joint working requires that all stakeholders are involved in identifying needs and in considering the various ways of addressing those needs. The main stakeholders are people with disabilities, voluntary/community organisations, local authorities, the HSE and the Department of the Environment, Heritage and Local Government. The delivery of an integrated housing/key supports programme to allow a person with a disability to live independently in his/her community should be at the core of a housing strategy. Funding mechanisms need to underpin and promote inter-agency collaboration.

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<sup>24</sup> It is envisaged that the Department of the Environment, Heritage and Local Government's new house adaptation scheme will address many of the problems that characterised the operation of the DPG on the ground and that those most in need will benefit from the grant.

Figure 5.1: Addressing the Accommodation Needs of People with Disabilities

Issue	Difficulties	Policy Context	Addressing the Issues	Actions Proposed
People with disabilities in inappropriate accommodation	Hidden housing need; Inadequate options/choices; Lack of differentiation between disability categories; Difficulties in accessing social housing	Housing Strategy for People with Disabilities; <i>Delivering Homes, Sustaining Communities</i> ; Plans for additional social and affordable housing; National Homeless Strategy	Continuum of provision to meet the wide range of individual needs; More use of general social housing for people with disabilities; New models of provision for all categories; Inclusive person-centred assessment of need	A case management approach to comprehensive and inclusive needs assessment for all categories of people with disabilities; Provision for additional transitional accommodation with built-in progression options; Review process of rent supplement/RAS as they apply to people with disabilities
Shortage of accessible accommodation	Insufficient accessible accommodation in all sectors; Local authorities do not have a comprehensive inventory of accessible dwellings	Review of Part M of the Building Regulations; Building Control Act 2007	Design for all approach based on lifetime adaptability; Broaden definition of accessibility; Enforcement of building regulations	Percentage of social housing to be made fully accessible; Develop lifetime adaptable housing in accordance with best international practice; Incentives for private developers to build fully accessible houses; Incentives to encourage the use of the best of modern technology to support independent living; Resources to ensure full compliance with building regulations relating to accessibility; More consultation with people with disabilities in respect of improving the built environment
Inadequate housing needs assessment	People with disabilities not adequately included in local authority assessments of need; Needs of individuals not assessed in a holistic manner	Disability Act 2005 Assessment of Need; Consultation Paper: <i>Housing Needs Assessment</i> ; Life-cycle approach	Inclusive housing needs assessment based on choices/options; Advance planning; Detailed consultation with individuals and groups; Links between needs assessment, housing strategies, housing action plans	Training in needs assessment for staff; Use of voluntary organisations databanks; Inclusive needs assessment protocols; Inter-agency protocols and templates; Provision for a housing services statement for each individual with a disability

Issue	Difficulties	Policy Context	Addressing the Issues	Actions Proposed
Underdeveloped inter-agency collaboration	People being referred over and back between agencies; Lack of clarity about which agency is responsible; People not referred to voluntary sector as appropriate	Disability Act Sectoral Plans; <i>Towards 2016</i> ; Independent Needs Assessment/Disability Act	A range of housing choices/options at local level; A case management approach to identifying and addressing needs involving key workers	Establish a pilot case management approach; Support services commensurate with independent living and individual choice; A national policy framework for voluntary housing; Additional mechanisms for consultation with voluntary/community sector; Funding mechanisms to support inter-agency collaboration
Inadequate supports for independent living	Supports under-resourced; Different models of delivery; Lack of clarity about options	Disability Act Sectoral Plans; <i>Vision for Change</i>	Provision for Direct Payments to individuals; Uniform nationwide provision for PAs	Pilot: PA Direct Payments Initiative; Improved and integrated revenue funding line for supports for independent living; Adequate annual funding for house adaptations; Additional transitional housing; Targeted supports for voluntary organisations promoting independent and integrated living
Funding	Inadequate funding for social housing; ad hoc funding responses; funding mechanisms disjointed; Inadequate funding for monitoring/evaluation and innovative development	Additional provision for social and affordable housing; <i>Delivering Homes, Sustaining Communities</i> ; Proposed Housing Strategy for people with disabilities	Funding lines to allow for more integrated planning between local authorities and HSE; Increased supports for Voluntary Housing Associations	Implement <i>Towards 2016</i> and National Development Plan targets; Adequate resources for Housing Strategy; Increase Capital Assistance Scheme Grant; Additional funding for on-site supports to maximise independent living; Provide additional funding to stimulate innovation; Increased funding to maximise contribution of the voluntary/community sector
Information, Advice and Advocacy	Inadequate information on housing options, assessment criteria, progress of applications	Quality service delivery; Information, advice and advocacy services; LA housing advice centres; Personal Advocacy Service	Statutory agencies providing proactive comprehensive information on options/choices and letting criteria; Advocacy services available as required	Implement quality service delivery principles relating to information provision by service providers; LA housing advice centres complement existing information, advice and advocacy services; Consultation with voluntary sector and end users; Proactive dissemination of information on housing options available locally; Provision of access to advocacy services as required

### *5.3.5 Inadequate supports for independent living*

The role of assisted living services (personal assistant (PA), home support and home help) has been central in recent years, particularly as people with higher levels of dependency are moving to live in the community. While hospitals, the HSE, the local authority and relevant voluntary/community organisations collaborate to ensure that all services for discharge/independent living come together at the right time, the evidence from the study is that this does not always happen.

The general picture that emerges is that, although there are some comprehensive support packages in place, supports for independent living are under-resourced. There is also a lack of clarity about entitlements and options arising from different models of delivery in different parts of the state. The intrinsic relationship between appropriate housing and supports for independent living is not always recognised in practice.

In addition to developing mainstream options, additional sheltered and supported housing is needed to cater for all categories of people with disabilities. These should be established in accordance with best practice models and in a manner which fosters maximum independence in the context of community living. The supports available should be geared towards meeting individual needs and should be individually tailored in accordance with a person-centred planning approach.

### *5.3.6 Funding*

Increased funding and resources are required at all levels to meet the shortcomings identified in this study:

- To ensure sufficient social housing
- To stimulate innovative developments that offer choice and appropriate housing
- To improve access and cater for lifetime adaptability
- To provide a person-centred approach.

There is a need for additional funding structures to maximise joint working (as discussed in 5.3.4 above) between the voluntary/community sector, local authorities, the HSE and the Department of the Environment, Heritage and Local Government. The involvement of voluntary organisations is likely to increase in the new policy environment, and funding arrangements will need to reflect that change. It is also essential to provide adequate resources to enable the full enforcement of building regulations relating to accessibility and the monitoring of standards in private rented accommodation. Provision by central government for house adaptation grants and for adaptations to local authority accommodation, which has been insufficient in recent years, needs to be substantially increased.

### *5.3.7 Information, advice and advocacy*

The information needs of people with disabilities and their carers, and the organisations that advocate for people with disabilities, are wide-ranging and complex. They need information about housing options, choices and whatever services and supports are available, where they can be found, and who can avail of them. They also need information about criteria for needs assessment, progress on applications for housing and support services. Some people with disabilities should have a 'champion' who accompanies them through needs assessment and provision to ensure an appropriate housing outcome. The Citizens Information Board funded Community and Voluntary Advocacy Projects and the new Personal Advocacy Service will have a role in advocacy promotion.

## **5.4 Proposals for a Housing Strategy for People with Disabilities**

A number of proposals for action relating to the seven broad issues discussed above are outlined in Figure 5.1. It is suggested that these should form the components of a Housing Strategy for People with Disabilities. The proposals are aimed at ensuring transparency, standardisation and equality of access

nationwide. While it is acknowledged that the implementation of the housing strategy will most likely occur on a phased basis as resources permit, it will be essential that short, medium and longer-term funding structures are put in place towards that end.

#### *5.4.1 Catering for unmet housing need*

- The assessment of housing need and related supports for a person with a disability should be based on a case management approach which would tailor the housing and key supports to the particular needs of the individual. There should be collaboration between the Local Authority, the HSE and voluntary/community organisations where relevant.
- Additional transitional sheltered/supported accommodation with progression options readily available is required for all categories of people with disabilities.
- The operation of the Rent Supplement Scheme and Rental Accommodation Scheme (RAS) should be examined with a view to dealing with difficulties experienced by people with disabilities seeking to access private rented accommodation.

#### *5.4.2 Addressing the accessibility issue for people with physical and sensory disabilities*

- There should be a general target for fully accessible social and affordable housing development based on the population of people with disabilities as a proportion of the total population.<sup>25</sup>
- Capital funding should be increased to cover the additional costs of building accessible social housing by voluntary housing associations.
- Lifetime adaptability housing standards should be developed building on best international practice.
- Consideration should be given to providing incentives to private developers to build fully accessible housing on the basis that it would be likely to be more cost effective than retrofitting or making adaptations later.
- Incentives (through additional funding schemes) should be put in place to facilitate maximising the use of new and emerging technologies, such as alarm and communications systems, particularly for people who depend on others for physical assistance.
- Sufficient resources should be provided to ensure the strict enforcement of Part M of the Building regulations following the introduction of new regulations and the strengthening of enforcement mechanisms under the Building Control Act 2007.
- Local authorities should consult more extensively with people with disabilities in planning for upgrading the built environment.

#### *5.4.3 Providing for comprehensive and inclusive needs assessment*

- Training in needs assessment should be provided for statutory agency personnel involved, both in the HSE and in local authorities.
- Protocols for consultation by local authorities with voluntary/community organisations and people with disabilities generally (as distinct from individual assessments) should be developed.
- Assessment of housing need should be comprehensive. It should include provision for individual choice, address both the housing and supports needs of a person and, where necessary, housing design issues.

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<sup>25</sup> This would need to be examined in greater detail taking into account best international practice.

- Protocols being put in place for collaboration between the HSE, local authorities and voluntary/community organisations on identifying and responding to accommodation needs and related supports should be implemented systematically and their implementation monitored and reviewed.
- Local authorities should give a person with a disability a housing services statement (akin to the service statement required for health and education services in the Independent Needs Assessment required under Part 2 of the Disability Act 2005) setting out the type of housing and the supports he/she requires and the timeline for their delivery.

#### 5.4.4 Improving inter-agency collaboration

- A stronger national policy framework needs to be established to ensure that local authorities and voluntary housing associations at local level work more collaboratively to specifically target and plan for the needs of all categories of people with disabilities.
- A community-based case management approach should be applied to meeting the housing and related support needs of people with disabilities. This should be developed on a pilot basis in the first instance and involve the allocation of a key worker (either HSE or local authority) as required. It should also actively engage the voluntary/community sector.
- Housing providers and the HSE should ensure that, as far as possible, the support services available allow an individual to live independently in accordance with his/her wishes.
- Provision should be made for the inclusion of the voluntary/community sector in all protocols relating to housing and related supports needs assessments.
- Additional funding mechanisms to support inter-agency collaboration need to be put in place.

#### 5.4.5 Enhancing supports for independent living

- Consideration should be given to providing people with disabilities greater choice and a wider range of options through the provision of direct payments to individuals. In the first instance, a Direct Payments Initiative should be introduced on a pilot basis modelled on the practice in some other EU countries.
- There should be significantly increased provision of housing supports. A more comprehensive and transparent revenue funding line should, therefore, be developed to cover on-site personal assistance and personal support in supported and sheltered housing. This could take the form of a separate and shared funding stream which could be drawn on by local authorities and the HSE to provide for housing supports for people with disabilities. This should be introduced on a pilot basis in the first instance.
- Funding for house adaptations should reflect the level of need.
- More provision should be made for transitional housing for all categories of people with disabilities as a step towards more independent living.
- Voluntary organisations that are continuously involved with people with disabilities should be encouraged and financially assisted to promote more supports for people with disabilities, through training of workers, developing pilot accommodation schemes and networking mechanisms.

#### 5.4.6 Allocating adequate funding

- Adequate funding needs to be provided for the implementation of the targets for social and affordable housing set out in *Towards 2016* and the National Development Plan.
- The Housing Strategy for People with Disabilities needs to be underpinned with the provision

of additional resources to ensure that all of the agencies involved in its delivery can give greater priority to services for people with disabilities in their overall planning and budgeting.

- The Capital Assistance Scheme Grant to voluntary housing associations should be flexible enough to enable provision of accessible housing and individually tailored design.
- Increased funding is required to enable the provision of on-site supports for independent living by people with disabilities.
- Additional funding should be provided to stimulate innovative developments, particularly in relation to enabling more people with intellectual disabilities and people with mental health difficulties to live independently. Some pilot initiatives should be established in this regard.
- Voluntary organisations will play an important role in implementing the proposed housing strategy. This will need to be fully recognised in ongoing reviews<sup>26</sup> of funding principles and structures.

#### 5.4.7 Strengthening information, advice and advocacy

- As a first step all statutory agencies should adopt a stronger proactive approach to information provision based on the principles of quality service delivery.<sup>27</sup>
- While the proposed Local Authority housing advice centres could have a key role to play in providing people with disabilities with relevant housing and accommodation information and assisting them in identifying options and progressing applications, they should be developed in a manner which utilises and complements established existing independent information, advice and advocacy services provided by CISs and voluntary disability organisations.
- CISs, voluntary/community organisations and people with disabilities should be consulted in relation to how best to structure the proposed housing advice centres
- Local authorities should provide comprehensive information on voluntary housing association provision within their catchment areas as well as other types of housing provision.
- Where needed, people with disabilities should have easy access to advocacy support to help them to negotiate through the housing application process. The funding of voluntary/community organisations for this purpose should be developed and expanded.

## 5.5 Conclusion

While the research shows that valuable initiatives have been developed and that in some cases a good level of housing provision occurs, this is not comprehensive or reliably replicated in every circumstance where there is a housing need.

The report highlights key factors which impact on the ability of people with disabilities to access accommodation appropriate to their needs. It points to a need for new thinking which would address the accommodation and related support needs of people with disabilities in the context of social inclusiveness, equality of access and the provision of accessible and integrated living environments. This approach would be significantly different to the approach which sees the accommodation needs of people with disabilities being met primarily in the context of 'special needs housing'.

A National Housing Strategy for People with Disabilities needs to be comprehensive in order to address the housing and support difficulties of people with disabilities effectively. The experiences of people

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<sup>26</sup> The Department of Environment, Heritage and Local Government Sectoral Plan includes a commitment to review funding structures and the process is ongoing.

<sup>27</sup> Under the SMI Principles for Service Delivery, government agencies are required to take a pro-active approach in providing information that is clear, timely and accurate, is available at all points of contact and meets the requirements of people with specific needs and continue to drive for simplification of rules, regulations, forms, information leaflets and procedures.

with disabilities and the voluntary organisations working with them, as reported in this study, point to a range of issues that the strategy needs to address. The central and strategic position of local authorities in terms of information provision, needs assessment, housing allocation, co-ordinating service packages and planning and implementing future provision must be reflected in the strategy. The respective roles of the HSE and the voluntary/community sector must also be clearly set out.

The Housing Strategy will need to define objectives, identify responsibilities, actions, funding, timeframes, measurable outcomes and key performance indicators. It is hoped that the findings and recommendations in this report will contribute to this work. Only when the reality identified through this study is taken on board will the strategy constitute a valuable reference for the disability sector, and move towards the vision outlined in *Towards 2016*, that “every person with a disability would have access to ... appropriate housing... and be supported to enable them, as far as possible, to lead full and independent lives.” (p.66).

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# Definitions of Terms

## Affordable Housing

The various Affordable Housing Schemes allow lower-income house buyers the opportunity to purchase homes and apartments in areas where property prices have created an affordability gap for them. These properties are offered for sale to eligible purchasers at prices significantly below their actual market value. To qualify for an Affordable Home a person should:

- Be a first time buyer (but there are some exceptions, for example if you are divorced)
- Have sufficient income to meet your mortgage repayments after you have paid all your other costs
- As a guide, earn up to €58,000 in a year as a single person (up to €75,000 between a couple). These are the approximate income limits only – lower limits may apply.

## Assisted Living/Personal Assistant Services

Assisted living services provide the support of a Personal Assistant (PA) to individuals with a physical or sensory disability. The services are provided in the individuals' homes and communities, facilitating community participation, access to education/employment and improved quality of life. The service enables users to have maximum control of their lives.

A PA carries out tasks that the person with a disability might find difficult or impossible to do in their daily lives. Assistance is tailored to the wishes and needs of the person with a disability. Tasks undertaken vary depending on the needs of each individual and may include some or all of the following types of assistance:

- personal care, including showering, bathing, toileting, transferring to bed/wheelchair
- essential cooking, feeding and domestic support
- social support e.g. trips to shops, social events, outings etc
- essential overnight/weekend services
- assistance for access to employment or education.

The PA service is usually organised by a voluntary/community organisation and funded by the HSE or through the FÁS Community Employment (CE) Programme. The service is typically organised around two options/packages:

### *Self-directed or leader-managed package*

In a self-directed or leader-managed package, the person with the disability acts as the leader or service manager. This involves recruiting his/her own PAs, organising their weekly rosters, returning their timesheets, arranging holiday cover, etc. The leader can consult the service coordinator when necessary.

### *Supported package*

In the supported package, the service coordinator takes responsibility for some or all of the management, delivery and operation of the service.

## Capital Assistance Scheme

The main form of financial support for voluntary housing associations providing supported/sheltered housing is the Capital Assistance Scheme (CAS). This typically funds up to 95% of the set-up costs of a scheme by an approved housing association, up to established maximums (€110,000 to €150,000 for 1 and 2 person and €135,000 to €170,000 for family type housing, depending on location). Since the 1st of November 2007, the Capital Assistance Scheme covers 100% of the approved costs.

## Community Group Homes

Community group homes refer to houses occupied by a number of people with disabilities, usually people with intellectual disabilities, where in-house support is provided around the clock.

## Disability Act 2005

The Disability Act 2005 establishes a statutory basis for:

- an independent assessment of an individual's needs and a related service statement
- access to public buildings, services and information
- Sectoral Plans for six key Departments which will ensure that access for people with disabilities will become an integral part of service planning and provision
- an obligation on public bodies to be proactive in employing people with disabilities
- restricting the use of information from genetic testing for employment and insurance purposes
- inter-agency cooperation between key services
- a Centre of Excellence in Universal Design.

The Disability Act 2005 contains specific provisions requiring DEHLG to outline its plans for housing and accommodation and for co-operation by housing authorities with the HSE.

## Housing Forum

The Housing Forum is the vehicle for participation in housing policy development and evaluation by the social partners. It is chaired by the Minister of State for Housing with key government departments represented by senior officials. The Disability Federation of Ireland and the Irish Council for Social Housing are among the members. *Towards 2016* promises the establishment of a National Group under the Forum to progress development of the National Housing Strategy for People with Disabilities. The Group will be led by the Department of the Environment, Heritage and Local Government and involve the Department of Health and Children, the HSE and other stakeholders. The strategy, which will support the provision of tailored housing and housing support to people with disabilities, is to be implemented by the end of 2009.

## Rental Accommodation Scheme

The Rental Accommodation Scheme (RAS) has been developed as an alternative long-term social housing option for people in receipt of Rent Supplement, usually for more than 18 months, and who need long-term housing. The scheme is run by Local Authorities and is seen as providing additional, good quality rented accommodation and, thereby, assisting local authorities to provide long-term housing for people who need it. Under RAS the Local Authority finds suitable accommodation and pays the rent to the landlord directly. The person still contributes to the rent but pays it to the Local Authority. Over time it is envisaged that contributions may be based on the relevant Local Authority's differential rent scheme.

## Sectoral Plans

The Disability Act 2005 provides for the development of sectoral plans by six government departments in order to ensure that access for people with disabilities will be an integral part of service planning and provision. These sectoral plans were published in July 2006.

## Sheltered/supported housing

The term sheltered/supported housing is used broadly here to refer to a clustered arrangement of housing where the residents have their own homes and where some level of support is implied. The support may range from the basic supports deriving from the clustered arrangement to high levels of care. There are a number of different variants of the sheltered/supported housing theme to be found across the international scene.

## Special Needs Housing

Special needs housing means housing provided for people who have a particular need in addition to a housing need and includes older people, people with disabilities, homeless people and people who are victims of domestic violence.

# Research Instruments

## The Housing and Accommodation Needs of People with Disabilities

### QUESTIONNAIRE

Comhairle (now the Citizens Information Board) and DFI are carrying out a study of the accommodation needs of people with disabilities. A need for the study was identified because of ongoing and emerging difficulties experienced by people with disabilities seeking appropriate accommodation. These difficulties have been highlighted by DFI member organisations, CICs and other NGOs. It is hoped that the study will inform the development of the proposed Government Housing Strategy for People with Disabilities. The study will focus on the actual experiences of people with disabilities, their families and representative organisations in relation to accessing appropriate accommodation and community supports necessary for independent living.

The purpose of this Questionnaire is to capture the experience of NGOs working with people with disabilities in relation to different categories of people with disabilities – people with mental health difficulties, people with intellectual disabilities, people with physical/sensory disabilities and people with an acquired brain injury.

1. Name of organisation

2. Main purpose(s) of organisation

3. Number of members in your organisation

4. Does your organisation provide housing or accommodation for people with disabilities and/or manage a project for this purpose?

If Yes, please give details:

5. Does your organisation support members to secure appropriate accommodation and related supports?

If Yes, please give details:

6. Which of the following groups is involved in / represented by / targeted by your organisation / project? Please tick all that apply:

People with sensory disabilities

People with physical disabilities

People with mental health difficulties

People with intellectual disabilities

People with an acquired brain injury

People with multiple disabilities

Other (Please specify):

7. Has your organisation been involved, or is it currently involved, in setting up a voluntary housing association to provide accommodation for people with disabilities?

If Yes, how would you describe the experience?

Very satisfactory

Satisfactory

Unsatisfactory

Very unsatisfactory

Please give reasons for your answer:

8. Please indicate whether any of your members has required but has been unable to access any of the following accommodation options/ supports. Please Tick ALL that apply and, where possible, elaborate and provide details of difficulties encountered.

#### HOUSING OPTIONS

Loans/mortgages

Local Authority housing

Social Housing provided by NGOs

Affordable housing

Community Group Home

Sheltered/supported accommodation

Private rented accommodation

Rent assistance / rent supplement

Mortgage interest supplement

Emergency / temporary accommodation

Moving from residential / hospital setting to community

#### SUPPORTS FOR INDEPENDENT LIVING

Personal assistants

Supplements for Special Heating

Home care/home help

Socially Monitored Alarm

#### ADAPTATIONS/REPAIRS

Disabled Persons Grant

Special Housing Aid

Essential Repair Schemes

#### INFORMATION ABOUT HOUSING OPTIONS

OTHER (Please specify)

9. Have any of your members encountered difficulties with finding suitable physically accessible accommodation?

If Yes, please elaborate:

10. Based on the experience of your organisation, please list in order of priority the main accommodation difficulties experienced by people with disabilities.

11. Has your organisation come across any instances where a person with a disability wishing to move from a residential facility or hospital to community living cannot find appropriate accommodation?

If Yes, please elaborate

12. Has your organisation come across any instances where a person with a disability has to remain in hospital because of the unsuitability of his/her accommodation at home?

If Yes, please elaborate

13. Has your organisation come across any instances where a person with a disability wishing to move from his/her parental home cannot do so?

If Yes, please elaborate

14. Has your organisation come across any instances where parents or siblings of a person with a disability have sought alternative accommodation for that person but have been unsuccessful?

If Yes, please elaborate

15. Please list in order of priority what you think are the interventions by the State required to deal more effectively with the accommodation difficulties encountered by your members.

At national level:

At local level:

16. If your organisation would be willing to provide case examples to illustrate the accommodation difficulties experienced by your members and to be interviewed in relation to these, please provide contact details for the person who could supply this information:

17. Please note here any additional comments you wish to make:

## Social Policy Alert to Citizens Information Services

The study is a joint venture between Comhairle (now Citizens Information Board) and DFI. Its focus is on the housing and accommodation needs of people with disabilities. The need for the study arises because of ongoing and emerging difficulties experienced by people with disabilities seeking appropriate accommodation, which have been identified by CISs, DFI member organisations and other NGOs.

The study is focusing on the actual experiences of people with disabilities (including children and young people) – people with mental health difficulties, people with intellectual disabilities, people with physical/sensory disabilities, people with an acquired brain injury - in relation to accessing appropriate accommodation and community supports necessary for independent living.

It is envisaged that the following areas will be covered in the study:

- Information on housing options and supports for people with different types of disabilities
- Availability of local authority, social and affordable housing to people with disabilities
- Availability of sheltered and supported accommodation
- Access to home ownership
- Physical access to accommodation
- Emergency/temporary accommodation
- Access to grants (including Disabled Persons Grant, Essential Repairs Grant, Special Housing Aid and socially monitored alarms)
- Access to private rented sector (including rent assistance)
- Moving from residential/institutional/sheltered settings to independent living
- Supports for independent living (including personal assistants, supplements and home care).

CISs are being asked to pay particular attention to the above areas during a two month period and to complete social policy records accordingly.

Please bring this notice to the attention of all information officers in your Centre.

## Focus Group Themes/Questions

1. What are the specific accommodation difficulties experienced by particular categories of people with disabilities?
  - People with mental health difficulties
  - People with physical/sensory disabilities
  - People with an intellectual disability
  - People with an acquired brain injury.
2. How do people with disabilities view their position in relation to housing /accommodation as compared with the general population?
3. Are there examples of good policy and practice in accommodation provision for people with disabilities?
4. Could these examples of good practice be replicated in other places and for other groups?
5. What are the difficulties encountered when seeking supports for independent living?
6. What are the difficulties encountered by voluntary housing organisations in the provision of housing for people with disabilities?
7. Where would people with disabilities usually go to get information and support in relation to finding suitable accommodation?
  - Is accurate and useful information usually available?
  - Is there a need for additional support/advocacy in accessing accommodation and related supports?
8. What policy changes are required to address the issues identified?
  - By Central Government
  - By Local Authorities
  - By HSE
  - By Department of Social and Family Affairs
  - By voluntary/community organisations.
9. Other comments/observations/suggestions

## Appendix 3

# Protocol for Co-operation between the HSE and Local Authorities

*Protocol to govern arrangements for co-operation by the Health Service Executive with housing authorities in relation to the development and coordination of the services provided by housing authorities for persons with disabilities, aged under 5 years, who have been identified by the Health Service Executive under the Assessment of Need process consistent with Section 8 of the Disability Act 2005, and made known to the housing authorities under the provisions of Section 12 of the Disability Act, 2005.*

- Where a person (aged under 5 years of age) has been assessed under Section 8 of the Disability Act 2005, which commenced on 1 June 2007, and has been identified as likely to require housing support, a Liaison Officer<sup>28</sup>, established under Section 11 of the Disability Act 2005, shall refer the person to the Director of Services of the Housing Section of the relevant Housing Authority, for the purpose of facilitating the determination of any housing service that the Housing Authority considers the person to be entitled to.
- An Assessment Officer, established under Section 8 of the Disability Act 2005, may refer a person with a disability to the Director of Services of the Housing Section of the relevant Housing Authority, if she or he deems it appropriate that the person, who has been identified as likely to require housing support, is made known to the housing authority as early as possible following the completion of the assessment under Section 8 of the Disability Act 2005. In such instances, the Assessment Officer shall notify the appropriate Liaison Officer that a referral to the Housing Authority has taken place.
- The Director of Services of the Housing Section may designate an appropriate official for the purpose of engaging / liaising with an Assessment Officer or a Liaison Officer.
- Under Section 12 of the Disability Act 2005, the Health Service Executive shall, with the consent of the individual or, if appropriate, a specified person<sup>29</sup>, provide all relevant information in relation to the housing element of the assessment report, produced under Section 9 of the Disability Act 2005, to the relevant Housing Authority for the purpose of assisting the person with a disability in accessing the appropriate housing services provided by the Housing Authority.
- The Director of Services of the Housing Section, or an official designated by the Director for such purpose, shall engage with the person with a disability who has been identified as likely to require housing support under Part 2 of the Disability Act 2005, or, if appropriate, with the Liaison Officer responsible for the arrangement of the service provision, or with a specified person, for the purpose of facilitating or coordinating the provision of any services that the Housing Authority considers the individual to be entitled to.

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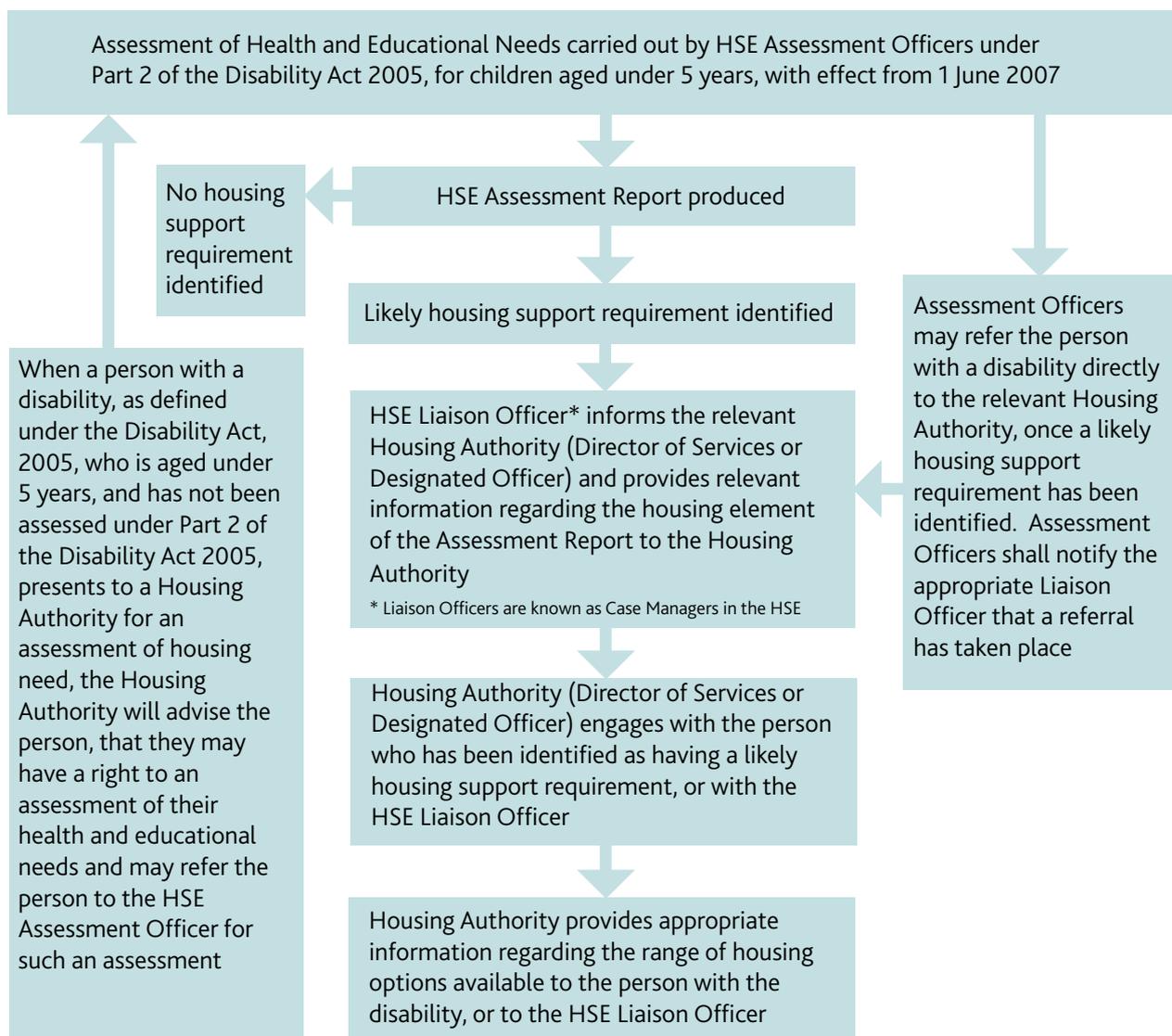
<sup>28</sup> Liaison Officers are known as Case Managers in the HSE

<sup>29</sup> A specified person means

- A spouse, parent or relative of the person with a disability;
- A guardian or a person acting in loco parentis to the person with a disability;
- A legal representative of the person with a disability; or
- A personal advocate assigned by the Citizens Information Board [formerly Comhairle] to represent the person with the disability.

- The relevant Housing Authority shall provide all appropriate information regarding the full range of housing support options<sup>30</sup> available to the person with the disability who has been assessed under Part 2 of the Disability Act 2005, or if appropriate, to a specified person, or to the Liaison Officer responsible for the arrangement of the service provision.
- Where a person with a disability (under 5 years of age), as defined under Section 2 of the Disability Act 2005, presents to a Housing Authority for an assessment of housing need and that person has not been assessed for a health or educational need under Part 2 of the Disability Act 2005, the Housing Authority will advise the person, or if appropriate, a specified person, that they may have a right to assessment in accordance with the provisions of the Act, and will, where requested, refer the person to the appropriate Assessment Officer in the Health Service Executive.
- This protocol shall be subject to periodic review in tandem with the extension of the statutory requirements of Part 2 of the Disability Act, 2005 to all age groups.

### FLOW CHART



30 The broad categories of housing support are:

- Emergency Support
- Social Housing Accommodation Options
- Purchase Options
- Modification Options
- Advice only [including advice on income support options available from Community Welfare Service (CWS) and/or Department of Social and Family Affairs (DSFA)].

### Agencies<sup>31</sup> that Participated in Study

Alzheimer Society of Ireland  
Arthritis Ireland - Kildare Branch  
Aspire  
Banner Housing Association  
BIH Housing Association  
Blanchardstown Centre for Independent Living  
Brothers of Charity  
Carlow Centre for Independent Living  
Centre for Independent Living (Dublin 7)  
Centre for Independent Living Limerick  
Cheeverstown House  
Cheshire Ireland  
Circle Voluntary Housing Association  
Clare CIS  
Cluid Housing Association  
Cope Foundation  
Disabled People of Clare  
Dóchas  
Donegal CIS  
Doorway to Life (Abode)  
Enable Ireland  
Enable Ireland - Meath Adult Service  
Focus Ireland  
Friedreichs Ataxia Society of Ireland  
HAIL (Housing Association for Integrated Living)  
Headway (National Association for Acquired Brain Injury)  
HSE (Limerick)  
Irish Advocacy Network  
Irish Council for Social Housing  
Irish Motor Neurone Disease Association  
Irish Society for Autism  
Irish Wheelchair Association (Dublin Area)  
Irish Wheelchair Association (Galway)  
Irish Wheelchair Association (Leitrim)  
Kerry CIS  
Kerry Deaf Resource Centre  
Kerry People with Disabilities Ireland  
Leitrim Association of People with Disabilities  
Longford CIS  
Mayo Advocacy Service for People with Disabilities  
Meath CIS  
Mental Health Ireland  
MS Ireland  
MS Ireland North East Advocacy Project  
National Council for the Blind of Ireland  
National Learning Network

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<sup>31</sup> This list is based on agencies that completed survey questionnaires and/or attended focus group discussions or consultation meetings and/or are members of DFI Housing Sub-Group and/or provided case material.

National Rehabilitation Hospital (Social Work Unit)  
Neurofibromatosis Association of Ireland  
Newgrove Housing Association  
North-West Parents and Friends Association  
People with Disabilities Ireland (PWDI)  
Peter Bradley Foundation  
Post Polio Support Group  
Respond  
Roscommon Advocacy Network  
Schizophrenia Ireland  
Sligo County Council  
Sligo Inter-agency Advocacy Project  
Sophia Housing Association  
South Dublin County Council (Disability Liaison/Access Section)  
Spinal Injuries Ireland  
S.T.E.E.R. Ireland  
St John of Gods  
St Michael's House  
Sunbeam House  
Walkinstown Association for People with an Intellectual Disability  
Walkinstown Housing Association  
Waterford Centre for Independent Living  
Western Care

The Citizens Information Board is the statutory body which supports the provision of information, advice and advocacy on the broad range of social and civil services to the public. It provides the Citizens Information website and supports the voluntary network of Citizens Information Services and the Citizens Information Phone Service.

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