









National Housing Strategy for People with a Disability 2011 - 2016

National Implementation Framework





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Glossary of Terms

1. Introduction

The Government's National Housing Strategy for People with a Disability was published in October 2011 by the Department of the Environment, Community & Local Government and the Department of Health. The strategy covers the period to 2016 and outlines the broad proposals and strategic objectives involved in effectively addressing the housing and related support needs of people with disabilities. The Implementation Framework develops the key actions from the Strategy and assigns responsibilities to stakeholders, within relevant timelines, and provides key performance indicators, as appropriate.

The Implementation Framework has been developed by a high level Implementation Planning Group (IPG), chaired by the Department of the Environment, Community & Local Government and involving the Department of Health, HSE, the County & City Managers' Association (CCMA), the Housing & Sustainable Communities Agency (Housing Agency), and the Department of Public Expenditure & Reform¹. The terms of reference of the IPG are attached at Appendix 2.

The Implementation Framework will be an evolving document and will be developed and amended to reflect key issues, themes and considerations arising within the monitoring and reporting framework and in the course of the development of annual progress reports.

2. Vision

The vision set out in the National Housing Strategy for People with a Disability 2011 - 2016 is to: facilitate access, for people with disabilities, to the appropriate range of housing and related support services, delivered in an integrated and sustainable manner, which promotes equality of opportunity, individual choice and independent living².

This vision is supported by the promotion of access by people with disabilities to independent living across the full range of housing options; the provision of frameworks and protocols for effective interagency cooperation; good practice in design, coordination and delivery of housing and related supports; improved collection and use of data for evidenced based implementation; research and development of universal design standards; access to appropriate advice and information in respect of housing need; and a framework to support the delivery, monitoring and review of agreed actions.

Full membership of the IPG is set out in Appendix 1.

This Vision is in line with Article 19 of the United Nations Convention on the Rights of Persons with Disabilities to live independently and be included in the community. It is the Government's intention to ratify the UN Convention as quickly as possible, taking into account the need to ensure that all necessary legislative and policy requirements are met.

3. Strategic Aims

The strategic aims underpinning the implementation framework are:

- 1. To promote and mainstream equality of access for people with a disability to the full range of housing options available suited to individual and household need;
- 2. To develop national protocols and frameworks for effective interagency cooperation, which will facilitate person-centred delivery of housing and relevant support services;
- 3. To support people with a disability to live independently in their own homes and communities, where appropriate;
- 4. To address the specific housing needs of people with an intellectual and/or physical disability, moving from congregated settings in line with good practice, including through the development of frameworks to facilitate housing in the community;
- 5. To address the specific housing needs of people with a mental health disability, including through the development of frameworks to facilitate housing in the community, for people with low and medium support needs moving from mental health facilities, in line with good practice;
- 6. To consider good practice in the design, coordination and delivery of housing and related supports;
- 7. To facilitate people with a disability to access appropriate advice and information in respect of their housing needs;
- 8. To improve the collection and use of data/information regarding the nature and extent of the housing needs of people with a disability;
- 9. To provide a framework to support the delivery, monitoring and review of agreed actions.

4. Approaches

The Housing Strategy for People with a Disability 2011 - 2016 will be implemented through the following approaches:

- Establishment of a Housing Subgroup led by the Housing Agency. This Subgroup will
 develop and provide guidance and advice to local authorities in the implementation of
 priority actions and will ensure uniformity of approach to implementation at local
 level. The Housing Subgroup will involve representatives of key statutory agencies
 and relevant disability stakeholder groups;
- Facilitation of appropriate and effective partnership approaches at national level, including through engagement and linkages between the Housing Agency Housing Subgroup, the HSE National Consultative Forum on Disabilities and the HSE Congregated Settings National Implementation Group;
- Effective interagency approaches at local level, supported by a robust interagency framework and relevant protocols;
- Ensuring the effective use of existing resources to maximise value for money;
- Monitoring at national level through the Implementation Monitoring Group (IMG).
 The IMG will also assist the Housing Subgroup in the provision of guidance and advice, as required;
- Effective reporting framework to ensure the best outcomes for people with disabilities.

5. National Housing Policy

The Implementation Framework has been developed as an integral element of the Housing Policy Framework, which confirms the Government's focus on meeting the most acute needs, i.e. the housing support needs of those unable to provide for their accommodation from their own resources. Financial considerations for the future rule out a return to very large capital funded construction programmes by local authorities. Therefore, the commitment is to respond more quickly and on a larger scale to social housing support needs through a variety of mechanisms, including through increased provision of social housing. The available funding in 2012 will continue to facilitate the ongoing restructuring of the social housing investment programme towards revenue funded delivery mechanisms, such as long term leasing and the Rental Accommodation Scheme (RAS) and the continued prioritisation of capital supports to the most vulnerable and disadvantaged households. The

overall strategic objective remains to enable all households access good quality housing appropriate to household circumstances and in their particular community of choice.

In addition to flexible funding models such as RAS and leasing, the Government is also committed to developing other funding mechanisms that will increase the supply of permanent new social housing. Such mechanisms will include options to purchase, build to lease and the sourcing of loan finance by approved housing bodies for construction and acquisition. There is also potential, across a range of housing programmes, for the Government's objective of sourcing and providing suitable residential units for use as social housing to be aligned with the commercial objectives of the National Asset Management Agency (NAMA). Where properties are being acquired or leased from NAMA or NAMA debtors, measures should be put in place to facilitate a percentage of these properties to be allocated for people with disabilities.

Furthermore, the Government announced its decision, in principle, to transfer responsibility for households in receipt of rent supplement, but with an established long term social housing need, from the Department of Social Protection to the housing authorities. Housing authorities will provide this service using a new Housing Assistance Payment (HAP). This was one of the key reforms announced in the Government's Housing Policy Statement and it is hoped that the proposals will accrue a number of benefits for households and also presents an opportunity to address relevant issues in relation to rent supplement and people with disabilities.

6. Funding Considerations to Support Effective Implementation

A key function of the IPG was to identify sustainable funding mechanisms to support the successful implementation of the Housing Strategy for People with a Disability from within the resources currently available, and likely to be available, over the period to 2016. Many of the proposals outlined in the Strategy were developed on the basis of ensuring the efficiency and effectiveness of the resources, systems and procedures currently allocated to meet the housing and related support needs of people with disabilities. However, significant financial implications arise for the local government sector in respect of Government proposals regarding the deinstitutionalisation of people with disabilities from HSE mental health facilities and from congregated settings³.

Congregated Settings are defined as living arrangements (whose primary purpose is the provision of services to people with intellectual, physical or sensory disabilities) where 10 or more people share a single living unit or where the living arrangements are campus-based. Under the principles of mainstreaming and citizenship people with disabilities living in the community, including those living in a congregated setting are entitled to the same services provided by public bodies as every other citizen and should not be disadvantaged because of where they live.

Within the current economic climate, and in light of existing pressures on local authority housing lists, it will not be possible to meet the needs of some 2,300⁴ people, who are estimated to require new social housing provision over the next 7 years, from within the capital and revenue resources currently deployed to deliver social housing supports. While the resources currently available within the disability sector will be used in the most appropriate and efficient manner to achieving the best possible outcomes for people with disabilities, additional and sustainable sources of funding must be identified to support delivery within the proposed timescales.

The absence of dedicated funding to support the housing needs of these individuals would give rise to a displacement effect occuring for people who are currently on local authority housing waiting lists with an assessed housing need. Therefore, progress in relation to the transitioning of people with disabilities to social housing options will be dependent on the identification of appropriate resources. It is important that a balanced approach is taken to ensuring that overall housing need is managed and met effectively for those who require social housing supports.

In this context, the main issues arising in respect of the deinstitutionalisation proposals within the disability and mental health sectors are outlined below.

6.1 Transitions from Congregated Settings

(a) Implementation Structures & Timeframe

The HSE's Report on Congregated Settings which was published in July 2011, found that over 4,000 people lived in congregated settings in 2008⁵. A HSE led Congregated Settings National Implementation Group was set up in October 2011 to oversee the implementation of the recommendations of the Congregated Settings Report and specifically to plan for the movement of the 3,600 people, living in these settings at the end of 2011, to independent living in the community over a 7 year timeframe. However, this timeframe may be extended if the challenges of implementing the different elements of the multi-dimensional transition process so require. These elements will include determination of the most appropriate choice of accommodation, location, funding and staffing needed from the health sector to continue to provide ongoing supports for those individuals transferring to new accommodation. The Strategy notes that this will pose a significant challenge for the stakeholders involved in the delivery of services and must be managed in a multi agency framework, to ensure that the needs of people transitioning from congregated settings are

⁴ A further 1,177 people residing in low and medium support community residences are likely to require tenancy support services.

The location of the Congregated Settings is set out in the map at Appendix 3.

fully taken into account during the process. The model of care for individuals will be based on a person centred plan and this may change over time in line with an individuals needs and circumstances and the model of service delivery applicable at a particular time.

Implementation of the Congregated Settings Report will be driven through regional and local structures, under the aegis of the HSE's National Consultative Forum on Disabilities, which has disability stakeholder, HSE and Department of Health representation. The Housing Agency Housing Subgroup will link with the Congregated Settings National Implementation Group to draw up a plan detailing the housing options for the congregated settings cohort of residents in line with the Housing Strategy. Protocols will be agreed between the Health and Environment/local authority sectors to ensure that there is a co-ordinated approach to implementation. Clear guidance will also be required in relation to communicating the proposals of the Congregated Settings Report to key stakeholders. The Communications Subgroup, established under the remit of the Congregated Settings National Implementation Project Team, will play a critical role in disseminating information regarding the future living arrangements of people transitioning to the community. This approach should also address the impact of the proposals on the development of future housing options such as the group housing model, developed under the Capital Assistance Scheme (CAS).

(b) Issues Arising in Estimating the Number of People Transitioning from Congregated Settings

Given the complexity of the implementation process, it would be premature to make an accurate estimate of the number of people who will transfer from congregated settings each year, or their likely accommodation requirements. The initial step in this process will involve the establishment of local implementation teams and agreement of project plans with the management of individual congregated residential settings (HSE or statutory agency). The person-centred emphasis of the process will require the HSE to draw up individual plans based on an assessment of need. In line with the principle of personal choice and mainstreaming, each individual will be entitled to be consulted on their choice of accommodation type and location, and their preferred living arrangements. A person-centred plan will set out the accompanying ongoing health and personal care supports to be provided by the HSE. It is expected that the groundwork on drawing up local project plans will be underway by mid 2013, as the various accommodation preferences become clearer and the process of identifying suitable persons to transition accelerates. It is noted that needs and changes may change over time in line with the model of service delivery applicable at a particular time.

Residents of congregated settings may choose from among a number of options for independent living in the community including social housing options, the private rental

sector, live with family or friends, and, in a small number of cases, individuals may be in a position to purchase a property from personal funds. The Housing Agency Housing Subgroup will play an important role in leading out on a framework for identifying and planning housing requirements for those transferring into more appropriate community settings.

(c) Estimated Social Housing Support Costs for People Transitioning from Congregated Settings

The difficulties in estimating the numbers of people leaving congregated settings are outlined above and it is not currently possible to provide accurate projections on transitions per annum from 2013 to 2019. Therefore, it is necessary to create a model for illustrative purposes to give an indication of the additional likely costs that may arise in the case of the provision of appropriate social housing options. The estimated costing below is based on an assumption that 500 people per annum, from the overall total of 3,600⁶ residents in congregated settings, would seek to relocate to the social housing sector over a 7 year timeframe and that housing solutions would be provided through long term leasing arrangements⁷. In this scenario the following estimated annual cost may apply if 60% of the people transitioning from congregated settings choose a social housing option⁸:

Assumption that 60% (300 people) will require social housing and live in a single unit apartment. The additional cost is approximately €1.9 million per year rising in increments of €1.9 million per annum to a total of €13.3 million per annum after 7 years.

In the case of 2 or 3 people opting to share new accommodation⁹, for example under the Rental Accommodation Scheme, rather than choosing to live individually in a single unit apartment, it is estimated that the social housing cost would be reduced by between 30% and 54% of the total annual average cost. It should also be noted that the HSE has indicated that a 7 year timeframe for the completion of transitions from congregated settings may be difficult to achieve. In addition, based on the recent experience, it will take 2-3 years for the necessary momentum to be built to move large numbers each year.

Some 100 people are in the process of relocating with the Genio Foundation. Further detail in respect of these transitions is set out in appendix 5. Accordingly, this estimate is based on 3,500 persons.

Annual Average Unit Cost for Leasing is €6,327.

The housing costs arising will be greater if more people choose a social housing option. Further estimated costings are set out in appendix 4.

On a broader level, it may be noted that the transitioning of people from congregated settings, who opt to share accommodation, may provide housing opportunities, having regard to their personal choice and preferences, for people with disabilities currently on housing waiting lists, who may have similar support needs. This potential could be explored further in the context of the development of housing strategies.

(d) Tenancy Support Services

It is anticipated that most of the people transitioning from congregated settings to community based living will also require a support service to enable them to maintain their tenancies. Tenancy sustainment services ensure that vulnerable tenants, generally with low to moderate support needs, are provided with the relevant supports, information and advice in order to assist them in maintaining their tenancies. These supports assist in facilitating the promotion of more independent living and also help to reduce the risk of tenancies breaking down and leading to homelessness. Generally, the nature, duration and intensity of supports vary according to individual need and generally operate as a flexible support service.

Specifically, in relation to the people who will be transitioning from congregated settings, it is recognised that many of the services currently being provided by the HSE or HSE service providers are already key to supporting and strengthening capacity for more independent living. In this context, the HSE has agreed, in principle, to engage with congregated settings service providers in relation to the provision of tenancy support services and has also agreed, in principle, to developing a protocol with local authorities.

(e) Short to Medium Term Funding Constraints on HSE

While the HSE is committed to progressing implementation of the Congregated Settings Report within the intended 7 year timeframe, due to pressure on the Disability Services provision, the HSE has indicated that there is no capacity, at present, to contribute from this source, towards the costs of developing or acquiring additional social housing units in the local authority sector.

The current revenue funding for congregated settings, which is within an overall declining provision for disability services, will need to be utilised to support individuals in an appropriate community setting. The health and personal care support costs of transitioning 3,600 people from congregated settings will be met by the Health sector. These supports will be based on a person-centred care plan for each individual. The objective of health policy will be to ensure that people with disabilities will continue to receive the supports required to enable them to live independently in housing options availed of under the Housing Strategy.

However, there are also likely to be both ongoing and additional costs to be met by the HSE during the phased closures of congregated settings. The HSE estimates that additional once-off transitional costs in the region of €10,000 per individual will arise (based on research by GENIO Foundation¹0) as both (a) the costs of keeping an institution open have

¹⁰ Further information on Genio is set out in Appendix 5.

to be met, and (b) the costs of moving people into the community also have to be met until the last person has moved. This could be more costly initially as it is generally cheaper to manage people in large groups.

In relation to people with physical and/or intellectual disabilities living in a Congregated Setting, the preliminary findings of the Value for Money and Policy Review (VFM) of Disability Services¹¹ on the breakdown of the component costs of residential places found that approximately 85% of the cost of a residential place in a congregated setting is accounted by pay costs with the remaining 15% allocated to non pay costs. Most pay costs relate to the provision of health and personal social services in the form of nursing and care assistant staff. In regard to non pay costs, the bulk of this funding will still be required to maintain the settings which will remain open. It may be possible to revisit this heading at a later stage to see if funding can be released. Consideration could be given to the freeing up of vacated facilities and land, however, this would also need to be considered in regard to other needs within health such as primary care. The Report of the Congregated Settings Working Group recommended that a Congregated Settings Fund be set up to fund transition costs. For this option, discussions would be required with service providers as to the level of contribution, if any, that they could offer. In the changed budgetary context this would be unlikely to involve any revenue funding. In addition, the option of transferring ownership of vacated residential buildings or lands is unlikely to arise until such settings are fully vacated and any alternative HSE needs for such settings considered.

The Value for Money and Policy Review is well advanced and it is anticipated that it will be submitted to the Minister for Health and the Minister for Disability and Mental Health and, ultimately, the Government, for approval in the first half of 2012. It is expected that it will be published within a short period following approval by Government. The Steering Group has agreed to the final report which takes into consideration the recommendations made by the Expert Review Group on Disability Policy and the results of public consultation and the analysis work carried out on the efficiency and effectiveness of the current disability services programme. It is an objective of the VFM Review of Disability Services that funding will, in time, be targeted in a more cost-efficient and effective manner which, it is hoped, will free up additional resources in the medium term. In the short-term it is unlikely that the VFM Review will be a catalyst to enable the transfer of HSE funding directly for social housing

A Value for Money and Policy Review of Disability Services has been undertaken to determine the efficiency and effectiveness of services for people with intellectual, physical or sensory disabilities. The disability services were selected for review in consideration of the significant annual expenditure on the programme, the size of the population directly affected by the services and the scope and nature of services provided. In 2011 HSE expenditure on specialist disability services was approximately €1.450 billion. The review is made up of two strands: an examination of the effectiveness and efficiency of the current disability services programme; and a review of current policy in relation to Department of Health funded disability services. The terms of reference of the Value for Money Review are set out in Appendix 6.

options. However, the option of freeing up existing revenue funding from the congregated settings implementation is not being ruled out.

6.2 Transitions from Mental Health Residential Facilities

(a) Mental Health Costs

The Housing Strategy for People with a Disability recognises 'that there are limitations in existing data in relation to the living arrangements of people with a mental health disability'. This limitation equally applies to the funding expended by the HSE at present in delivering such services. The current range of accommodation provision in mental health services has developed as an integral component of the provision of those services and does not have a separate budget line. The Value for Money Report, The Efficiency and Effectiveness of Long-Stay Care for Adults with the Mental Health Services (2009) considered the matter of the resources deployed in the provision of long stay care in mental health services and found that, in the majority of areas, individual units do not have a clear budget allocation. Where such an allocation exists it accounts for mental health care and treatment and the management of an integrated service as well as accommodation. Overall, however, the report estimates that 87.8% of long term residential spend is allocated to pay costs with 12.2% allocated to non pay costs.

Most pay costs relate to the provision of health and personal social services in the form of nursing and health care assistant staff, with a smaller proportion, between 14% and 21%, expended on household and domestic staff. The HSE will continue to provide for the health and personal social service needs of individuals who move to independent living arrangements in the community and, therefore, the costs associated with that provision will still need to be met by the HSE.

Of the non pay costs, the 3 highest cost categories identified in the Value for Money Report were maintenance, catering, and pharmacy. Catering is a good illustration of the difficulties to be anticipated in seeking to disaggregate housing from healthcare costs. For example, a medium support hostel with 10 residents may have a housekeeper who prepares and serves meals as a component of the services being provided to the residents. Within the service user cohort there may be a mix of residents who have been clinically assessed as requiring the provision of meals as an essential support at this point in their treatment and care, along with a number of residents who are now assessed as not requiring this particular service, but for whom alternative suitable accommodation with a lower level of support has not yet been identified. In the context of the implementation of the Housing Strategy, the appropriate allocation of the resource represented by such a housekeeper will pose challenges and will have to be determined on a case by case basis between the health

service and local authority as future plans for service users in any particular location are being finalised.

In this context, the next steps will be to settle on an agreed set of criteria which can be used at regional and local level to determine the exact information categories ultimately required to deliver a consistent set of figures for each accommodation setting across the country. It is only when this information is gathered that a clearer picture of existing and possible future funding for those with mental health disabilities can emerge.

(b) Mental Health Disability - Additional Housing Need

The Housing Strategy for People with a Disability identifies 3 categories of people with mental health disabilities who may, over the period to 2016 or beyond, be moved from HSE residential care to independent living in the community. These include 429 new long stay patients in congregated settings and 547 in medium support and 630 in low support community residences¹². During the implementation phase of the Housing Strategy, the current position of these 1,606 individuals will be examined in detail. This will require clinical assessment of their status and suitability, or otherwise, for transition to independent living.

- Low and medium Support Community Residences

In relation to the 1,177 people currently residing in low and medium support community residences, these people are likely to be in accommodation that can itself be transferred to the ownership and management of relevant local authorities without movement of the occupants, who will become local authority tenants. However, the final position regarding the proposed transfer of these community residences to local authorities cannot be determined until the status of the properties is known, particularly in terms of the standard of the properties and what actions, if any, are required in order to ensure they meet accessibility provisions and comply with appropriate social housing energy efficiency provisions and general standards. This information will be gathered as part of a conditions survey to be carried out by the Housing Agency and which will be commenced shortly. Furthermore, funding currently deployed in the context of general maintenance and upkeep of these properties should be identified and transferred to housing authorities, who will assume responsibility for ongoing care and maintenance works. This will be determined once the number and type of properties to be transferred to the local authority sector has been identified.

The residents involved, however, will first have to be given the opportunity to choose whether they wish to stay in their current accommodation or even in their current area of

¹² The locations of these residences is set out in map attached at Appendix 7.

residence. It may then be possible, in those cases where a service, other than a health and personal social service, is being provided by the HSE, for this responsibility to also transfer to the local authority in a community setting and if so, the HSE funding, when identified, should similarly transfer. Some of the residents may have to move to high support HSE services while others may either transfer to family or private accommodation.

New Long Stay Patients

The Value for Money report <u>The Efficiency and Effectiveness of Long-Stay Care for Adults with the Mental Health Services</u> (2009) estimated that of the 429 new long stay patients, almost 50% will move to high support HSE services and some may even require medium support for a time before they could transition fully to independent living. Some of these people may either move to family or private accommodation or public or private nursing homes. Because of the need to assess each person and accommodation provision on an individual basis and to allow for the personal choice of these individuals, the process of movement is necessarily going to be slow. However, the process should be established in a collaborative regime between the HSE, the service user and the local authorities to facilitate this movement as soon as possible. It should also be noted that as the HSE will need to provide high support services for some of these individuals, the HSE will need to assess whether enough such places will ultimately be available to them even when others currently accommodated there move to independent living in the community.

People with Intellectual Disabilities Within Mental Health Services

It should be noted that there is also an identified group of people who have a diagnosis of intellectual disability who, additionally, have mental health disabilities and who currently reside in psychiatric hospitals or units. In 2010, the estimated number of people in this regard was 238, not all of whom may need re housing. Approximately 140 of these people reside in St Joseph's Service on the mental health campus at St. Ita's in Portrane with the vast majority of the remainder residing in units around the country in concentrations of less than 4. The most recent information available from the National Intellectual Disability Database (Annual Report 2010) indicates that 147 people require transfer to alternative residential accommodation, the majority needing intensive levels of support. In line with the Programme for Government commitment to develop specific strategies for people with intellectual disabilities who remain under the care of mental health services, the most appropriate living arrangements for people in this group, who will need re housing, will be determined in the context of the development of person centred plans by the HSE. It is not possible in advance of that process to estimate how many may choose a social housing option within the community.

(c) Estimated Housing Costs for People Transitioning from Mental Health Residential Facilities

In the circumstances outlined above, it is likely that the number of people who will transfer from HSE mental health residential facilities to new social housing provided by local authorities (housing which is not transferred from the HSE) is likely to be in the region of 200 people or fewer over a 5 year period. It is expected that the majority of these people will have the potential to achieve independent living arrangements. Therefore, it is proposed that a scheme of tapered supports, based on a 'housing led' approach, be developed to assist these people transition into independent living in mainstream housing. Suitable accommodation will be sourced through the local authority leasing initiative and tenancy supports will be provided, on a reducing basis, as people progress to independent living.

It is estimated that the cost in a full year of providing suitable accommodation and tenancy supports for 200 people under this proposed scheme could amount to some €1.357 million¹³. However, the initial and ongoing annual costs will be dependent on the scale of transfers of people from mental health facilities over the 5 year period and the level of supports required. While, it is not possible at this stage to accurately identify how many people will be in a position to transition in year 1, year 2, etc, it could be assumed that some 40 people will move in year 1 and this would incur a year 1 cost of €0.35 million.

In addition, it is likely that tenancy supports will be required in respect of people currently residing in low and medium support community residences who transfer in situ to local authority tenancies at an estimated annual cost of €0.5 million¹⁴. Furthermore, additional housing and tenancy support costs may arise in respect of people who, following the transfer of these residences to local authorities, may wish to move from that accommodation to more independent living arrangements. Funding requirements in respect of the upgrading and making fit for purpose of the low and medium support community residences will become clearer in the context of the outcomes of the conditions survey to be undertaken by the Housing Agency.

Broadly, in terms of tenancy support services for people with mental health disabilities, it is anticipated that the provision of these services will be primarily provided by local authorities, however, the HSE has advised, in principle, that if there are any associated resources involved in the provision of these types of supports in current configurations, such as in some low and medium support community residences, these supports can be used to facilitate the maintenance of tenancies.

¹³ Assuming tenancy support for 12 months only.

¹⁴ Assuming one support service to each community residence.

6.3 Additional Housing and Support Costs arising for the Local Government Sector

In light of the assumptions and timelines outlined above, it is clear that there are significant additional costs arising for the local government sector in providing appropriate housing and tenancy supports for people transitioning from congregated settings and mental health facilities.

In summary, over the period 2013 to 2019, some 2,300 people with disabilities are estimated to require new social housing provision, which is expected to be primarily delivered through leasing arrangements. In addition, 200 of these people will require tenancy supports to facilitate progression to independent living and many of the 1,177 people currently residing in low and medium support mental health community residences, who will become local authority tenants, will also require tenancy support services. Therefore, the estimated additional current funding requirements for the local government sector would range from €2.8 million in year 1 to €15.1 million in year 7 and this would be a recurring annual cost thereafter. It is anticipated that year 1 costs will not be required until 2013.

In 2013, therefore, it is estimated that up to €2 million would be required in order to meet the actual housing need arising of up to 300 people who may be expected to leave institutional settings and be accommodated in social housing. Following bilateral discussions between the Department of Environment, Community & Local Government and the Department of Health, and noting that the numbers of persons transitioning from institutional care who may avail of social housing options is not yet clear, the Department of Health has agreed to assist with the additional costs involved. It is proposed that these costs will be met in 2013 through an initial funding allocation of €1 million being set aside from the disability component of the HSE's capital budget in 2013, which is separate from the main Disability Services provision. This initial amount will be ring fenced to meet the additional housing need arising and arrangements will be made, as part of the 2013 Estimates process, to transfer the funding to the Department of the Environment, Community & Local Government Vote to meet the demand for social housing during 2013. It is expected that this initial funding will enable the provision of up to 150 new social housing units in 2013. This process has been agreed, in principle, with the Department of Public Expenditure and Reform.

However, it is important to note that if the full estimated housing need arises in 2013, the Department of Health will be required to identify further funding for transfer to the Department of the Environment, Community & Local Government Vote in 2013. Furthermore, future progress on the transitioning proposals will be dependent on the

availability of continued appropriate funding to deliver on the additional social housing need arising.

Informed by the experience in 2013, the Health sector will make arrangements for further funding to be transferred in 2014 and will continue to explore the options to release funding, thereafter. Discussions will take place with the Department of Public Expenditure and Reform to give effect to these proposals.

The key funding actions to facilitate the provision of social housing supports for people transitioning from congregated settings and mental health facilities are as follows:

- In 2013, an initial allocation of €1 million will be provided from the disability
 component of the HSE's Capital Budget, separate from the main Disability Services
 provision. This will support the delivery of up to 150 new social housing units for
 people transitioning from congregated settings and mental health facilities.
 Arrangements will be put in place, as part of the 2013 Estimates process, to facilitate
 the transfer of this funding from the Health Budget to the DECLG Vote.
- Arrangements will be put in place to facilitate the transfer of further funding from within the Health Budget to the DECLG Vote to support the transitioning process in 2013, 2014 and beyond.
- The process for the identification of future funding resources will include the examination by the HSE, in the context of achieving value for money across all disability spending, of the non pay costs for disability services, including the non pay costs under congregated settings. This examination will be undertaken with a view to exploring the option of releasing medium term funding from the general disability services budget to support the costs associated with the provision of additional social housing options. This examination will have regard to overall HSE financial capacity implications and priority need to maintain health supports in the first instance.
- The HSE's National Implementation Group on the Congregated Settings Report will
 examine the scope for developing a 'Congregated Settings Fund' to identify
 additional sources or streams of funding that could assist in funding the transition of

- people from congregated settings to community based living, including the promotion of social and community inclusion, having regard to overall HSE financial capacity implications.
- Funding currently deployed for the maintenance and upkeep of low and medium support community residences, which are to be transferred to the ownership of local authorities, will be identified with a view to transfer from the Health Budget to the DECLG Vote. This information will be collected as part of the conditions survey being undertaken by the Housing Agency.

7. Priority Actions

The Implementation Framework contains 18 priority actions, supported by a range of key measures, and with responsibility assigned to key stakeholders. A range of other key actions have been outlined and will be progressed in line with priority demands and/or through the development and provision of guidance to effect implementation at local level.

Strategic Aim 1

Promote and mainstream equality of access to the full range of housing options

The Housing Strategy for People with a Disability sets out the framework to meet the needs of people through mainstream housing policy. This requires that all people with disabilities who may have a housing support need are identified and that appropriate housing supply options are positioned to meet need effectively. Newer delivery mechanisms such as leasing and the Rental Accommodation Scheme will continue to play an increasingly prominent role in meeting future social housing need.

Priority Action 1.1: Access to Social Housing: Ensure equitable access for people with disabilities to relevant social housing supports

Key Measures

- 1.1.1 A formalised engagement process will be undertaken between housing authorities, HSE and disability service providers to ensure that all people with disabilities will be informed and assisted in undergoing an individual assessment of housing need. This process will be targeted to people with disabilities who are residing in the community or in institutional care, and who may require social housing supports, currently or in the future. This process will be supported by the implementation of a national protocol governing the strategic assessment of housing needs of people with disabilities (Key Measure 2.2.1 refers).
- 1.1.2 Following each assessment of individual housing need, housing authorities will provide each person with a disability with a statement of their housing need. The statement will identify the most appropriate housing solution and provide for, insofar as is possible, individual household preferences, and also identify, in conjunction with the HSE, service providers and relevant disability organisations, the nature and extent of care and supports required. The identification of supports will be facilitated, as appropriate, through effective interagency cooperation. A statement of housing need template and guidelines for housing authorities will be developed by the Housing Agency.

- 1.1.3 Housing authorities will develop specific strategies to meet the identified housing needs of people with physical, intellectual, mental health and sensory disabilities locally. These strategies will be informed by the assessments of housing need and broader formalised consultation with relevant statutory agencies, service users groups and disability organisations. These strategies will form an integral part of local authority Housing Services Plans and will promote and support the delivery of accommodation for people with disabilities using all appropriate housing supply mechanisms.
- 1.1.4 In line with the development of specific disability housing strategies, housing authorities will consider reserving certain proportions of units to meet specific identified need within each disability strategy.

Lead Roles: DECLG, Housing Authorities, Housing Agency, HSE, Disability

Organisations

Timelines: 2012 - 2013

KPIs: Guidance re housing need statement developed by Qtr 1, 2013.

Housing strategies developed 2012/2013. Implementation of Housing Services Plans in line with phased implementation of

Housing (Miscellaneous Provisions) Act, 2009.

Priority Action 1.2: Long Term Leasing Initiative and Rental Accommodation Scheme: Promote the increased use of leasing and RAS to meet the longer term housing needs of people with disabilities.

Key Measures

- 1.2.1 Local mechanisms will be put in place by housing authorities to support RAS and leasing in effectively meeting the housing needs of people with disabilities. These mechanisms will take account of the variety of need associated with various disabilities, such as the requirement for physical adaptations or specific design and location specifications. This framework will be supported by effective liaison with the HSE and relevant disability organisations and will be reflected in relevant housing strategies.
- 1.2.2 Housing authorities will seek to optimise the use of RAS type leasing arrangements to meet longer term housing need for people with disabilities who are not in receipt of rent supplement.

1.2.3 Mechanisms to fund adaptation works to RAS and leased units to meet the housing needs of people with physical and sensory disabilities, within existing resources, will be explored and developed. Information in relation to the scale and nature of adaptation works required will be gathered through the assessment of need process.

Lead Roles: Housing Authorities, DECLG, Housing Agency, HSE, Disability

Organisations

Timelines: Ongoing from 2012

KPIs: Trends/numbers of people with disabilities accessing social

housing supports through RAS and leasing.

Priority Action 1.3: Increased Access to the Private Rental Sector: Promote the increased use of the private rental sector to meet the housing needs of people with disabilities.

Key Measures

- 1.3.1 The feasibility of providing incentives for landlords who provide accommodation suitable for the needs of people with disabilities will be explored.
- 1.3.2 Awareness raising campaigns will be undertaken amongst private landlords and letting agents regarding renting to people with disabilities.
- 1.3.3 Specific issues arising in respect of the application of the rent supplement scheme for people with disabilities to be considered in the context of proposals for the transfer of the scheme from the Department of Social Protection to the housing authorities.

Lead Roles: DECLG, DPER, DSP, Housing Agency, Housing Authorities, NDA

Timelines: Ongoing from 2012

KPIs: Number of people with disabilities accessing suitable

accommodation in the private rented sector. Number of people

with disabilities accessing rent supplement.

Other Key Actions

The following key actions will be progressed in line with the priority actions and/or through the development and provision of guidance to effect implementation at local level.

- Examine the potential to encourage longer term contracts under RAS;
- Analyse data from the forthcoming Value for Money Review of RAS to determine the impact of the scheme in meeting the needs of people with disabilities;
- Ensure the effective implementation of the new Allocations Policy to ensure appropriate prioritisation of households with disabilities in need of social housing supports;
- Ensure that the current and future needs of children with disabilities are central to the process of allocating housing to families;
- Development proposals of approved housing bodies to reflect and be aligned to relevant local housing services plans.

Strategic Aim 2

Develop national protocols and frameworks for effective interagency cooperation

The provision of person centred delivery of housing and related supports requires a robust interagency framework, supported by national inter agency protocols, which facilitate integrated delivery of services to people with disabilities.

Priority Action 2.1: Coordinated approach to service delivery:

Key Measures

2.1.1 Establish Housing and Disability Steering Groups (HDSGs) in each county/city council area to facilitate integrated and timely responses to the housing needs of people with disabilities. The HDSGs will be chaired by Directors of Housing Services and include representation from the HSE and key disability sectors. Guidance to support the establishment of the HDSGs will be developed by the Housing Agency and will address, inter alia, the most effective operation of the groups within existing structures, including

through the development of linkages and synergies with the HSE Regional and Local Consultative Fora and the Congregated Settings Regional and Local Implementation Teams. The guidance will also draw on existing models of cooperation to assist in national implementation.

Lead Roles: Housing Agency, Housing Authorities, HSE, Disability

Organisations

Timelines: 2013

KPIs: Guidance developed by Qtr 1, 2013. HDSGs established by Qtr 3,

2013.

Priority Action 2.2: Support National Inter Agency Protocol Framework

Key Measures

2.2.1 A national interagency protocol governing the strategic assessment of the nature and extent of the local housing needs of people with disabilities will be developed. The protocol will facilitate the establishment of formal mechanisms to facilitate the exchange of data and information between relevant agencies and will assist in effectively meeting the housing needs of people living in the community and those transitioning from institutional care (Key Measure 1.1.1 refers).

2.2.2 Additional national interagency protocols will be developed and existing protocols will be reviewed, as appropriate.

Lead Roles: DECLG, D/Health, CCMA, HSE, Housing Agency

Timelines: Protocols Working Group established by Qtr 4, 2012. Protocol

developed by mid 2013.

KPIs: Protocols effectively implemented.

Priority Action 2.3: Improved Coordination of Disability Funding

Key Measures

2.3.1 A formalised framework will be adopted, as part of the multi-annual estimates process, for the improved coordination of capital and revenue funding for housing and related supports. A key element of this framework will be the identification of funding to support the additional social housing need arising in the context of the transitioning of people from congregated settings and mental health facilities.

Lead Roles: DECLG, D/Health, D/PER

Timelines: Annually from 2012 in context of 2013 Estimates.

KPIs: Improved coordinated funding arrangements. Identification of

sustainable funding mechanisms to support transitioning

proposals.

Other Key Actions

The following key actions will be progressed in line with the priority actions and/or through the development and provision of guidance to effect implementation at local level:

- Develop arrangements, as appropriate, for further cooperation between housing authorities and the HSE in relation to the provision of housing services for people with disabilities;
- Ensure that interagency cooperation in the delivery of housing and related supports is reflected and supported at senior level within relevant organisations;
- Develop local mechanisms to underpin effective interagency cooperation;
- Ensure role and remit of Housing and Disability Steering Groups is reflected in the development of housing services plans;
- Ensure effective ongoing implementation of:
 - the Support Costs Protocol governing the coordination of capital and revenue funding for health service related support costs for projects provided by approved housing bodies for people with disabilities; and
 - the individual assessment of the housing and related support needs of people with mental health disabilities.

Strategic Aim 3 Support people with a disability to live independently

The promotion of independent living requires the implementation of a range of targeted actions, including supports to assist people with disabilities to remain at home or following the development of a disability or an age related mobility issue, the provision of equitable access to specific design options and mechanisms to support people with disabilities who wish to achieve and maintain independent living.

Priority Action 3.1: Effectively meet the long term housing accessibility needs of people with disabilities

Key Measures

- 3.1.1 An examination of 'lifetime housing policy' and universal design will be undertaken. This examination will consider, inter alia, relevant economic implications and review existing international lifetime homes standards and good practice.
- 3.1.2 As part of this approach, an examination of the specific accessibility needs of wheelchair users will be undertaken and will include, as appropriate, the development of wheelchair accessible design guidance required to meet housing need.

Lead Roles: DECLG, CCMA, NDA, IWA

Timelines: Ongoing from 2012

KPIs: Examinations commenced during 2012. Design guidance

developed in line with agreed timelines.

Priority Action 3.2: Support the accessibility needs of people with disabilities to enable them to remain in their homes and communities for as long as possible

Key Measures

- 3.2.1 Ensure continued priority is given to the provision of appropriate funding for the undertaking of adaptation works for local authority tenants with a disability and for the operation of the Housing Adaptation Grant Schemes for people with disabilities in private housing.
- 3.2.2 Put a framework in place to facilitate the adaptation and utilisation of appropriate vacant social housing units to meet the needs of disabled households on housing waiting lists, where possible.
- 3.2.3 Examine the potential for the inclusion of a standard suite of accessibility provisions, to make existing social housing visitable for people with disabilities, as part of works undertaken through social housing improvement programmes.

Lead Roles: DECLG, Housing Authorities

Timelines: Ongoing from 2012

KPIs: Trends in numbers of people with disabilities remaining at home.

Numbers of adaptation grants paid. Proportion of vacant

lettings made to people with disabilities. Number of units made

visitable under social housing improvement programmes.

Other Key Actions

The following key actions will be progressed in line with the priority actions and/or through the development and provision of guidance to effect implementation at local level.

- Ensure that sufficient resources are deployed at local level for the effective enforcement of Part M of the Building Regulations;
- Examine the feasibility of the collection of accessibility data in conjunction with the undertaking of inspections of standards in the private rental sector;
- Consider the development of a data register of accessible properties across all housing tenures;
- Consider frameworks to support people with disabilities moving to independent living within the social housing and private rented sectors.

Strategic Aim 4

Housing needs of people with intellectual disabilities, including those moving from congregated settings

The specific housing needs of people with intellectual disabilities will be addressed in the context of a multiagency framework to support more independent living arrangements within communities. For those individuals moving from congregated settings to social housing options, this framework will be supported through the development of specific assessment and allocations policies and reflect individual choice and living preferences.

Priority Action 4.1: Support the transitioning of people with intellectual and physical disabilities from congregated settings to more appropriate community based living arrangements

Key Measures

- 4.1.1 The phased movement of people with disabilities from congregated settings to more appropriate community based living arrangements will be managed and supported through an effective interagency management framework, in line with availability of suitable housing options and within agreed timescales. This will be facilitated by the HSE Congregated Settings National Implementation Project Team and the Housing Agency Housing Subgroup which will address and progress the specific housing proposals outlined in the Congregated Settings Report and ensure uniformity of approach at local level. The Congregated Settings Communication Subgroup will also have a key role to play in effectively communicating the proposals of the Congregated Settings Report to key stakeholders.
- 4.1.2 Appropriate protocols to underpin a coordinated implementation approach will be developed between the Environment and Health sectors.

- 4.1.3 National guidance will be developed by the Housing Agency Housing Subgroup in relation to managing the housing assessment and allocation processes for people with disabilities transitioning from congregated settings. The guidance will set out a framework to support housing authorities in carrying out assessments of housing need within a planned and structured approach and will detail the various housing options available for people leaving congregated settings.
- 4.1.4 The HSE will engage and consult with service providers in relation to the provision of tenancy supports for people transitioning from congregated settings. As part of this approach, the development of a protocol between housing authorities and the HSE in relation to the provision of tenancy services will be considered.
- 4.1.5 All people with intellectual and/or physical disabilities transitioning from congregated settings will be provided with individual tenancy arrangements.

Lead Roles: Congregated Settings National Implementation Project Team,

Communications Subgroup, Housing Agency, DECLG, D/Health,

HSE, Housing Authorities, HSE Service Providers

Timelines: From 2012. Transitions from Congregated Settings in line with

HSE targets.

KPIs: Housing Agency Housing Sub group established Qtr 3, 2012.

Guidance on assessment and allocation policies developed Qtr 1, 2013. Protocols developed and implemented effectively within

appropriate timelines.

Priority Action 4.2: Ensure a multiagency approach to meeting the needs of people with a disability, both living in the community and those leaving congregated settings

Key Measures

- 4.2.1 The full range of the needs of individuals with disabilities leaving congregated settings, whose support needs are capable of being met in community based settings, will be determined and taken into account in the planning process. This will be facilitated through the development of person centred plans by service providers which will identify the range of supports required to ensure the full and active participation of each individual in the community.
- 4.2.2 The transitioning process will be underpinned by a commitment from the HSE to the ongoing provision of appropriate personal, care and social supports, to be delivered through Primary Care Teams, to people moving from congregated settings to community based living, in line with identified care plans. Appropriate protocols will be developed as necessary.
- 4.2.3 Frameworks will be put in place to ensure that the needs of people with intellectual disabilities, currently living in the family home or within communities are accurately identified and planned for. These frameworks will facilitate the identification of a future housing need or where a potential future housing crisis situation may arise.

Lead Roles: HSE Congregated Settings National Implementation Project

Team, Housing Authorities, HSE Service Providers, Disability

Organisations

Timelines: From 2012. Transitioning from Congregated Settings in line

with HSE targets.

KPIs: The number of people who have left a congregated setting

during the reporting period, have moved into appropriate alternative accommodation and have a person centred plan in place. Trends in people with intellectual disabilities remaining in

their own homes and communities.

Strategic Aim 5

Housing needs of people with a Mental Health Disability

The Housing Strategy for People with a Disability gives effect to the housing commitments contained in the Government's mental health policy, A Vision for Change, in relation to meeting the housing needs of people with mental health disabilities, who have low and medium support needs, within communities. In recognition of the complex nature of a mental health disability, a range of targeted responses are required to facilitate individuals to maintain housing and support independent living.

Priority Action 5.1: Support people with mental health disabilities to access and maintain appropriate housing within communities

Key Measures

- 5.1.1 National guidance on delivering effective responses to support the housing needs of people with mental health disabilities will be developed and will support statutory and voluntary agencies in the provision of housing services.
- 5.1.2 Housing authorities will put a framework in place to ensure that applicants for social housing supports are provided with information regarding the implications of disclosure of a mental health disability, in the context of the effective assessment of housing support needs and appropriate prioritisation.

Lead Roles: NDA, DECLG, Housing Authorities

Timelines: Ongoing from 2012.

KPIs: National guidance developed by Qtr 3, 2012.

Priority Action 5.2: Support integration of people with mental health disabilities within communities

Key Measures

- 5.2.1 Engagement process will be undertaken by housing authorities, HSE and disability organisations to improve awareness within local communities regarding people with mental health disabilities and to facilitate successful integration. This is also a key issue in the context of transitioning people with mental health disabilities from institutional care;
- 5.2.2 Housing authorities will liaise with relevant mental health disability organisations in the preparation of anti social behaviour strategies.
- 5.2.3 Promote continued support for befriending services to facilitate social inclusion within communities for people with mental health disabilities.

Lead Roles: Housing Authorities, Housing Agency, HSE, Mental Health

Disability Organisations, National Service Users Executive

Timelines: Ongoing from 2012.

KPIs: Trends in people with mental health disabilities successfully

integrated within communities. Review antisocial behaviour strategies in relation to people with mental health disabilities.

Priority Action 5.3: Facilitate the effective transitioning of people with mental health disabilities from HSE mental health facilities to appropriate community settings within sustainable communities

Key Measures

- 5.3.1 The transitioning of people with low and medium support needs, from HSE mental health facilities to more appropriate community based arrangements, will be supported through an effective inter agency management structure, in line with a person centred planning approach and individual choice.
- 5.3.2 The transfer of low and medium support HSE community residences to the ownership and management of local authorities will be progressed in line with agreed structures and timelines, informed by the outcomes of a conditions survey to be undertaken by the Housing Agency.

- 5.3.3 The transitioning process will be underpinned by commitments from the HSE to the ongoing provision of relevant mental health supports, to people with low and medium supports needs, within new community arrangements. These supports will be delivered through multidisciplinary community mental health teams and appropriate protocols will be developed.
- 5.3.4 The proposals for the transitioning of people with low and medium support needs from HSE mental health facilities will be supported by all relevant agencies involved in the delivery of services to people with disabilities.
- 5.3.5 People currently residing in low and medium support community residences, which will transfer to the ownership of housing authorities, will be supported to achieve more independent living arrangements, where their support needs lessen.

Lead Roles: DECLG, D/Health, Housing Authorities, HSE, Housing Agency,

Mental Health Disability Organisations

Timelines: Ongoing. Transitioning process undertaken in line with HSE

targets.

KPIs: Conditions survey completed. Community residences

transferred to local authority ownership. Successful transfer of

individuals to more appropriate community based living

arrangements.

Priority Action 5.4: Development of a Housing Support Scheme for people transitioning from HSE mental health facilities

Key Measures

5.4.1 A targeted scheme of tapered supports, based on the 'Housing Led' approach, will be developed for individuals with low and medium support needs, transitioning from HSE mental health institutional facilities. It is estimated that some 200 people who have potential to achieve and sustain independent tenancies will be supported under this initiative.

Lead Roles: DECLG, D/Health, Housing Agency, HSE

Timelines: Scheme designed and guidance issued to local authorities Qtr 1,

2013.

KPIs: Project successfully commenced during 2013. Target of up to 40

units in 2013, dependent on HSE timeframes.

Other Key Actions

The following key actions will be progressed in line with the priority actions and/or through the development and provision of guidance to effect implementation at local level.

- Ensure effective implementation of protocol governing the individual assessment of housing needs of people with a mental health disability;
- Effective implementation of single integrated national data information system in the use of homeless services under the National Homeless Strategy;
- Implementation of effective pre discharge plans for people with mental health disabilities leaving residential or acute care or prisons;
- Examine early intervention measures to assist people with mental health disabilities where social housing tenancies are at risk.

Strategic Aim 6 Good practice in housing and related supports

Effectively meeting the housing needs of people with disabilities requires a range of approaches and responses, based on evidence based policy and practice.

Priority Action 6.1: Development and implementation of good practice models to support people with disabilities within communities

Key Measures

- 6.1.1 Existing pilot initiatives supporting the delivery of housing and related supports will be reviewed by the Housing Agency. Guidance based on good practice models will be developed and disseminated to housing authorities to facilitate further roll out, as appropriate.
- 6.1.2 As part of this approach, a pilot programme will be developed by the Housing Agency, in conjunction with key stakeholders, which will test good practice in sustainable communities for people with disabilities. This programme will include, inter alia, an examination of housing design, inter agency cooperation, effective person centred responses and the role of assistive technology and ambient assistive living technology to support independent living. Outcomes and learning from projects currently being undertaken by the Genio Foundation in relation to the reconfiguration of services for people with disabilities towards individualised services and supports and the implementation of the proposals of the Congregated Settings Report will inform the pilot programme.

Lead Roles: Housing Agency, DECLG, Housing Authorities, HSE

Timelines: 2012 - 2013

KPIs: Pilot programme developed and implemented by Qtr 2, 2013.

Existing pilot initiatives reviewed and evidence based guidance developed with a view to expanding initiatives, as appropriate

during 2013.

Strategic Aim 7

Access appropriate advice and information

The provision of information, advice and advocacy are key elements in facilitating equality of access to appropriate housing for people with disabilities and is required to be delivered in an integrated and accessible manner.

Priority Action 7.1: Integrated approach to information provision

Key Measures

7.1.1 Develop a pilot housing advice centre, within a local authority area, which will have a strong disability focus, based on existing good practice.

7.1.2 Incorporate frameworks for the coordination and provision of housing information and advice in the development of housing strategies for people with disabilities.

Lead Roles: DECLG, Housing Authorities, Housing Agency

Timelines: 2012 - 2013

KPIs: Pilot housing advice centre developed by Qtr 2, 2013. Review

information modules of local authority housing strategies.

Other Key Actions

The following key actions will be progressed in line with the priority actions and/or through the development and provision of guidance to effect implementation at local level.

- Housing authorities support strong proactive approach to information provision based on the principles of quality service delivery;
- Housing information to have specific focus on housing options for people with disabilities and provided in accessible and varied formats;
- Housing authorities to support the role of advocates for people with disabilities, including the role of families of children with disabilities and relevant advocacy agencies, including Inclusion Ireland and Citizens Information Services, as appropriate.

Strategic Aim 8

Collection and use of data regarding the needs of people with disabilities

Detailed and accurate information regarding the nature and extent of the housing needs of people with disabilities is essential to provide a basis for effective service delivery and longer term strategic planning.

Priority Action 8.1: Identify the full nature and extent of the housing and related support needs of people with disabilities in order to deliver appropriate housing solutions

Key Measures

- 8.1.1 The housing needs assessment process will be supported, through formalised engagement between housing authorities and statutory and non-statutory agencies, in relation to the identification of housing and related support needs of people with disabilities, and through effective implementation of national inter agency protocols.
- 8.1.2 Ensure continued effective implementation of the individual assessment of need protocols and develop, as appropriate, additional mechanisms to facilitate improved and extended cooperation between housing authorities and the HSE.
- 8.1.3 All households with a person with a disability to be prioritised for reassessment under the new assessment of housing need process.
- 8.1.4 All staff involved in the carrying out of assessments of housing need and related functions to receive disability specific training. The training will be developed by the Housing Agency and will draw on the expertise and local knowledge of relevant disability organisations. This training should include modules in relation to the specific housing needs of people with mental health and intellectual disabilities.

Lead Roles: DECLG, D/Health, Housing Agency, Housing Authorities, CCMA,

HSE, Disability Organisations

Timelines: Ongoing from 2012

KPIs: Protocols effectively implemented. Reassessment of housing

needs of people with disabilities undertaken during 2012.

Training delivered by mid 2013.

Strategic Aim 9 Review and Monitoring Framework

An effective monitoring framework is required to oversee and drive the successful implementation of the Strategy. This framework will be overseen by a dedicated Implementation Monitoring Group who will be charged with developing annual implementation progress reports.

Priority Action 9.1: Effective Monitoring and Implementation Framework

Key Measures

- 9.1.1 Implementation Monitoring Group established.
- 9.1.2 Annual implementation progress reports completed and presented to Cabinet Committee on Social Policy. The progress reports will also highlight and address any key issues and considerations arising, including relevant funding matters.
- 9.1.3 Implementation Monitoring Group to undertake review of specific strategy key priorities/actions, as appropriate, and assist Housing Agency Housing Subgroup in relation to the provision of advice and guidance.

Lead Roles: DECLG, IMG, Housing Agency Timelines: IMG established May 2012.

KPIs: IMG meetings held quarterly. First annual progress report

completed and submitted to Cabinet Committee on Social Policy

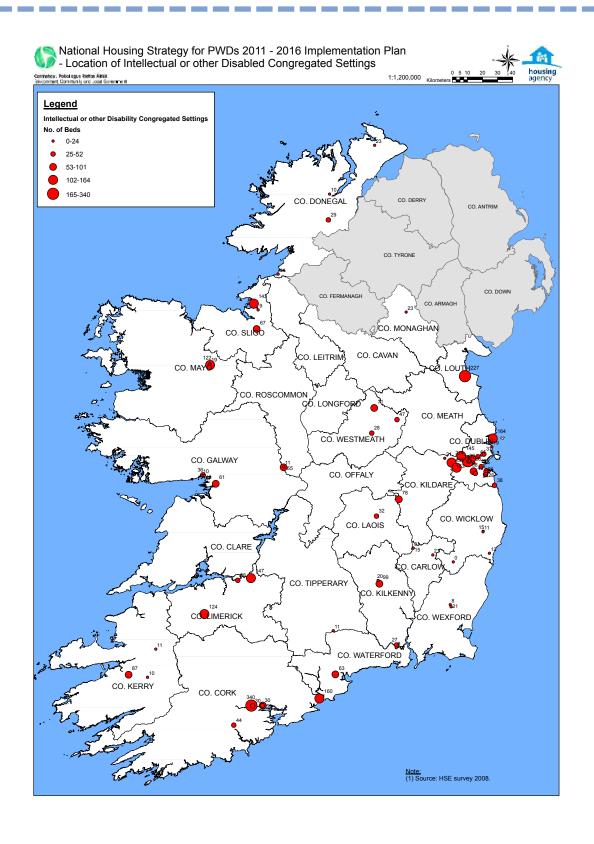
by Qtr 3, 2013.

Appendix 1 Membership of Implementation Planning Group

Organisation	Name
Department of the Environment, Community & Local Government	Michael Layde (Chair) Theresa Donohue Rob Walsh Cathal Comey
Department of Health	Colm Desmond Luke Mulligan Brian Dowling Gerry Steadman
Department of Public Expenditure & Reform	Andrew Conlon
HSE	Cate Hartigan Tony Leahy
City & County Managers' Association	Conn Murray
Housing & Sustainable Communities Agency (Housing Agency)	John O'Connor David Silke

Appendix 2 Implementation Planning Group/Terms of Reference

- To develop a detailed Implementation Framework detailing the key actions set out in the National Housing Strategy for People with a Disability, 2011-2016. The Framework will:
 - Set out the key targets within achievable timelines and set performance indicators, allied with clear functional responsibilities, as appropriate;
 - Identify sustainable funding sources to support the implementation of the strategy from resources currently available, and likely to be available over the period 2011-2016. The requirement for funding arises primarily in relation to the transitioning of people with mental health and intellectual disabilities from institutional care to community based living arrangements, where housing and tenancy sustainment costs will also arise;
 - Identify measures to maximise, insofar as is possible, the coordination of funding and shared services in relation to the delivery of housing and related supports for people with disabilities;
 - Reflect proposals, as appropriate, arising from the work of the National Disability Strategy Implementation Group and the outcomes of the Value for Money and Policy Review of Disability Services; and
 - Outline an ongoing monitoring, review and evaluation regime to be overseen by an implementation monitoring committee.
- To submit the implementation framework to the Cabinet Committee on Social Policy within 3-4 months of the establishment of the IPG.



Additional Estimated Social Housing Support Costs for People Transitioning from Congregated Settings

The costings contained in the Implementation Framework in respect of people transitioning from congregated settings are calculated on the basis that 500 people each year will transition and that 60% of them would choose a social housing option. The following additional estimated costings are based on assumptions that 500 people per year would transition and that either 70% or 80% would choose a social housing option.

- Assumption that 70% (350 people) will require social housing and live in a single unit apartment. The additional cost is approximately €2.215 million per year in year 1, rising in increments of €2.215 million per annum to a total of €15.5 million per annum after 7 years;
- Assumption that 80% (400 people) will require social housing and live in a single unit apartment. The additional cost is approximately €2.531 million per year in year 1, rising in increments of €2.531 million per annum to a total of €17.7 million per annum after 7 years.

GENIO

Atlantic Philanthrophies, in association with the Department of Health and the HSE has established the GENIO Fund to provide grants to organisations in the disability and mental health sectors for innovative initiatives in service delivery. In 2012, the Genio Foundation was allocated €3m by the HSE to further facilitate the reconfiguration of services for people with physical and sensory disabilities and people with intellectual disabilities, towards individualised services and supports. This includes, as a main priority, the advancement and funding of projects which are consistent with the objectives of the Congregated Settings Report by fostering and part-funding options for community living and community-based respite. Genio will collaborate with the HSE, in the implementation of the Congregated Settings Report, and in the wider context of the Housing Strategy for People with a Disability, with the local authorities, by providing learning from current projects to inform issues such as assessments, review of existing accommodation provision, individual choice, and future tenancy arrangements. This will assist in broadening the information available to the health and housing sectors to inform the overall strategy of delivering appropriate housing options for people with disabilities consistent with current policy and objectives.

Since 2010, the HSE, statutory agencies and the Genio Foundation have relocated the following numbers of people from congregated settings. For 2010, the latest year for which a breakdown is available, 45 persons moved by the Genio Foundation, to:

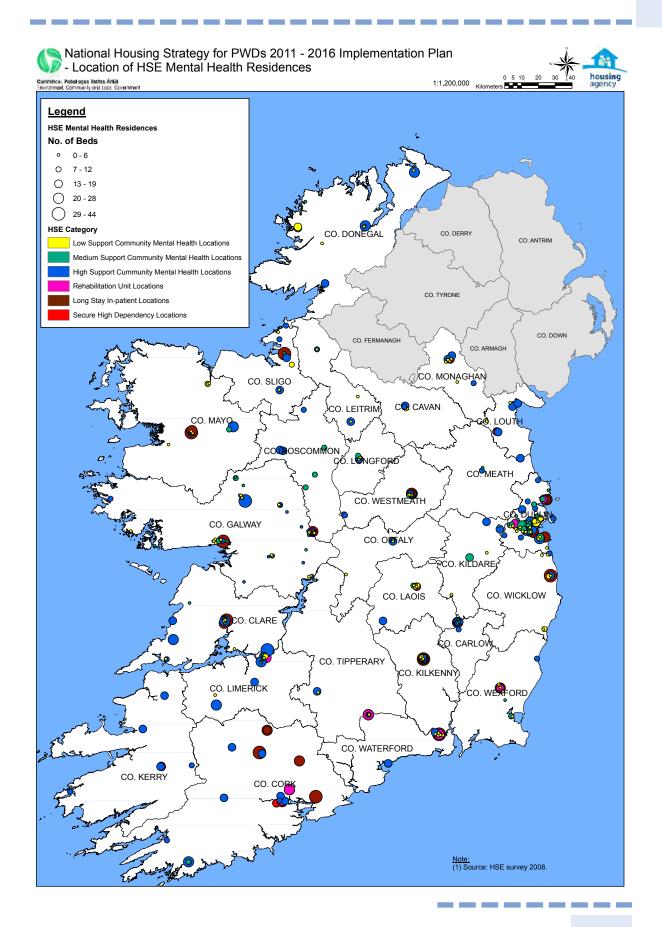
- private rental sector (24)
- private rental using Rental Accommodation Scheme (4)
- housing association (3)
- social housing (2)
- service provider accommodation (11)
- foster arrangement (1)

In 2011, it is estimated that 55 persons moved to community settings, of which 24 were in Dublin Mid-Leinster, 18 in HSE South and 13 in HSE West. In 2012, a total of 107 persons are expected to move to community settings in joint projects between HSE and Genio, 10 from HSE South; 50 from Dublin Mid-Leinster; and 47 by HSE or other service providers.

Value for Money Review of Disability Services

The Terms of Reference for the review were to:

- 1. Identify the objectives, which have pertained to date, for the disability services programme in the health sector.
- 2. Examine the current validity of those objectives and their compatibility with the overall strategy of the Department of Health, the National Disability Strategy and Towards 2016.
- 3. Define the outputs associated with the programme activity and identify the level and trend of those outputs.
- 4. Identify any issues with the availability of information regarding current outputs and outcomes.
- 5. Examine the extent to which the programme's objectives have been achieved, and comment on the effectiveness with which they have been achieved.
- 6. Identify the level and trend of costs and staffing resources associated with the disability services and thus comment on the efficiency with which it has achieved its objectives. Compare overall costs, including wage costs and non-pay costs, across the sector [both voluntary and non-voluntary].
- 7. Having regard to the range of providers of disability services, examine whether there is scope to minimise overheads, including administrative costs, management structures, research, advertising, profile-building, and infrastructure costs.
- 8. Evaluate the degree to which the objectives warrant the allocation of public funding on a current and ongoing basis and examine the scope for alternative policy or organisational approaches to achieving these objectives on a more efficient and/or effective basis.
- 9. Specify potential future performance indicators that might be used to better monitor the performance of the disability services programme.
- 10. A final robust report containing findings and recommendations in relation to TORs 1 to 9 above.



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Glossary of Terms

CAS	Capital Assistance Scheme
CCMA	County and City Managers' Association
DECLG	Department of the Environment, Community and Local Government
D/Health	Department of Health
DPER	Department of Public Expenditure & Reform
DSP	Department of Social Protection
Housing Agency	Housing & Sustainable Communities Agency
HDSGs	Housing and Disability Steering Groups
HSE	Health Service Executive
IMG	Implementation Monitoring Group
IPG	Implementation Planning Group
IWA	Irish Wheelchair Association
KPIs	Key Performance Indicators
NAMA	National Asset Management Agency
NDA	National Disability Authority
NDS	National Disability Strategy
RAS	Rental Accommodation Scheme
TORs	Terms of Reference
VFM	Value for Money and Policy Review of Disability Services



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