

Donegal Strategic Plan
for
Housing People with a Disability

2022 - 2026

Article 19 of the UN convention on the Rights of people with Disabilities addresses the right of people with disabilities to live in the community with a choice equal to others of where and with whom to live.

September 2021

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- Health Services Executive.
- Tuath Housing.
- Donegal Parents & Friends.
- Cluid Housing.
- Donegal Centre for Independent Living.
- Irish Wheelchair Association.
- Voice of the Lived Experience.
- Donegal County Council.

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**COUNTY DONEGAL
PARENTS & FRIENDS OF
PEOPLE WITH
INTELLECTUAL DISABILITY**



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1. Introduction & Background

The National Housing Strategy for People with a Disability is currently being reviewed and will cover the period 2022-2027. The new Strategy will set out the government's broad framework for the delivery of housing for people with disabilities through mainstream housing options. The process involves local Strategic Plans for Housing People with a Disability being developed in order to feed into and help develop the National Strategy 2022 - 2027. In this regard, the Donegal Housing & Disability Steering Group has coordinated the development of the local Strategic Plan.

The Donegal Strategic Plan aims to facilitate access, for people with disabilities, to the appropriate range of housing and related support services. This will be delivered in an integrated and sustainable manner, and promote equality of opportunity, individual choice and independent living.

The core goal of the Strategic Plan is to meet the identified housing needs of people with disabilities in Donegal whether they are currently living in the community and or in a congregated setting. The four categories of disability are (a) Physical, (b) Sensory, (c) Mental Health, and (d) Intellectual and/or Autism.

The Strategy will provide the local authority and other housing providers with a framework that will help to inform and guide housing provision and supports for people with a disability over the next number of years. It will form an integral part of the Annual Housing Services Plans, and will promote and support the delivery of accommodation for people with disabilities using all appropriate housing supply mechanisms. The Strategy will also support longer term strategic planning.

The goals of the plan coincide with Donegal County Councils Age Friendly Strategy and Social Inclusion Strategy. A strategic objective of Donegal County Council is to empower, support and promote sustainable, inclusive and prosperous communities. The Council aims in conjunction with other stakeholders to support people with disabilities by ensuring accessible environments and facilities, fostering disability-friendly communities, and in ensuring housing for people with disabilities is an integral part of our mainstream housing efforts.

The concept of Independent Living is fundamental, i.e. the ability of a person to decide and to choose what they want, where to live and so forth in managing their everyday life and affairs. While the key focus of this Strategy is on the delivery of appropriate Housing as a basis from which people with disabilities can participate in society, it is clear that housing alone will be insufficient to improve the lives of people with a disability. The wider environment need to be addressed and appropriate services and supports developed in order to facilitate independent living, hence the need for a collaborative approach between a range of stakeholders.

As per Census 2016, 14% of the population of Donegal, or 22,955 people, were recorded as having at least one disability. Only 11% of people with a disability were in education compared to 17% of the general population. 18% of people with a disability were at work compared to 47% of the general population. 22% of people with a disability did not have access to a car or van compared to 10% of the general population. 13% of people with a disability lived in social housing compared to 9% of the general population

2. Stakeholder Engagement and Consultation.

Consultation

Many of the challenges facing people with a disability in need of social housing services are multi-dimensional and therefore require inputs and solutions from various organs of the state and other institutions working together in unison. Effective interagency co-operation is an essential mechanism in meeting the housing needs and other supports needed for people with disabilities. Developing a partnership such as the Housing and Disability Steering Group is the first necessary step that includes these relevant stakeholders.

Membership of the Housing & Disability Steering Group includes representatives from the following:

- Health Services Executive.
- Tuath Housing.
- Donegal Parents & Friends.
- Cluid Housing.
- Donegal Centre for Independent Living.
- Irish Wheelchair Association.
- Voice of the Lived Experience.
- Donegal County Council.

This formalised structure of collaboration facilitated the channelling of existing resources for a more strategic approach to meeting need. All members provided different and important insights into the discussions that helped the development and preparation of this Plan.

The structure also enabled broader consultation and creation of awareness of the development of the Strategy internally, within member organisations and externally via key stakeholder networks. This enabled further contributions for consideration by the Group. In addition, awareness of the development of the Strategy was communicated via social media.

Roles and Responsibilities of key stakeholders

The following section outlines a brief description of the principal stakeholders and their role and responsibility within the area. The group involves local representatives from key statutory agencies and relevant disability stakeholders. The terms of reference for the Housing and Disability Steering Group are set at national level and it is stated that all representatives should be at a senior level and should be competent at representing the needs of the various disability groups. It is important to note that a robust interagency framework at national level is a pre-requisite for local action. The Department of Health and the Department of Housing, Local Government & Heritage are the two core National stakeholders.

People with Disabilities

People with disabilities should have the opportunity to choose their place of residence and where and with whom they live on an equal basis with others.

(Article 19 of the UN Convention of the Rights of Persons with Disabilities).

Independent Living is about having the freedom to have the same choices that everyone else has in housing, transportation, education and employment. Independent living is about choosing what aspects of social, economic and political life people want to participate in. Independent living is about having control over your life, to have a family, to get a job, to participate socially and to realise your goals and dreams

Key considerations include:

- Location in the person's preferred community.
- Connection to families and friends.
- Close to local amenities.
- Access to public transport safe and secure.
- Accessible housing with suitable adaptations.

An individualised approach to housing and suitable supports promotes the inclusion and participation of a person with a disability in everyday life and communities. Access to housing adds value and status to the lives of all citizens. People with disabilities have the same rights as other citizens to access housing, to create homes that enhance their lives and support their inclusion in, and contribution to, society.

The self expressed needs of the person with a disability underpins the entire delivery of services to meet the needs of that person to ensure that solutions which are being considered are appropriate and tailored to meet the needs of the individual. This places a degree of responsibility on the individual to work with service providers, both in terms of the planning and subsequent use of services, which are made available to meet their accommodation and care support needs to be met.

Department of Housing, Local Government & Heritage (DOHLGH)

The DOHLGH are the main funders for the provision of accommodation both through the Local Authority and the Approved Housing Body Sector. In addition to the provision of funding, they also play a key role in the development of policies and practices including appropriate design guidelines for the Local Authority Sector. They also collate and maintain a national oversight in relation to the emerging need in respect of all forms of housing, including the needs of persons with a disability, and this feeds into the development of national policy and provision of funding generally.

Local Authorities

Local Authorities have a key role in the provision of social housing supports for all eligible persons with a disability. A clear requirement for the local authority is therefore to ensure that it has an accurate and up to date list of all persons in need of social housing support including those with a disability.

In many cases, the solution for the individual will also require the support of the Health Service Executive (HSE). This will be evident from the person centered plan which will be completed by the HSE/service provider as part of the individual being placed on the waiting list.

Department of Health

In a significant number of cases, while the provision of accommodation for persons with a disability is key, provision of accommodation on its own will be insufficient without the provision of care support. As much of this is provided through the Health Service Executive, the making available of adequate resources for the provision of such care supports by the Department of Health is essential to enable the needs of persons with a disability to be in a position to reside in their own homes, in so far as is practical.

Health Service Executive (HSE)

In some cases, the HSE is the direct service provider to an individual. In addition, the HSE is the

current funding agency of support services by third parties. The HSE is also one of the main drivers of the transition of residents from congregated settings.

In addition, the HSE must also identify individual support costs and continue to provide funding for residents in their new housing environments. The HSE has the overall statutory responsibility for the management and delivery of health care and personal social services. In respect of disability services, the HSE's responsibility is fulfilled by the provision of services directly by the organisation and also, to every significant extent by the funding of non- statutory organisations to provide such services on its behalf.

The HSE aims to support each individual with a disability in living as normal a life as possible, in an environment that provides opportunities for choice, personal development, fulfilling relationships and protection from exploitation and abuse. With regard to individuals currently residing in a congregated type setting, the HSE strongly supports their transition to more socially inclusive community integrated services. It is fully committed to ensuring that people with disabilities will be actively and effectively supported to live full inclusive lives at the heart of their family, community and society.

The Transforming Lives Programme managed by the HSE is a national collaborative effort to build better services for people with disabilities. It is part of the wider national effort for Building a Better Health Service. The vision of the Programme is to contribute to the realisation of a society where people with disabilities are supported to;

- participate to their full potential in economic and social life, and
- have access to a range of quality personal social support and services that enhance their quality of life and well-being.

The objective is to ensure full inclusion and self determination for people with disabilities.

TUSLA - Child & Family Agency

Young people leaving state care are particularly vulnerable and require appropriate forward planning for their future accommodation and support needs. TUSLA play a key role in firstly ensuring that there is a clear picture in terms of emerging need, but also in the context of providing assistance to ensure that need is met. TUSLA is also responsible for the provision of after care to young people leaving care up to the age of 21, or up to the age of 23 where in full time education or training and the provision of this support is a critical element of ensuring that any accommodation solution is successful.

Approved Housing Bodies

The Approved Housing Bodies are key housing providers under the initiatives set out in the Housing Strategy for People with a Disability.

Donegal has a vibrant Approved Housing Body Sector with over 1,000 units of accommodation across the County. A significant portion of the accommodation provided by the Approved Housing Body Sector has been funded under the Capital Assistance Scheme which is primarily directed at meeting the accommodation needs of persons with a disability.

Service Providers

While the HSE is the primary provider, either directly or through service level agreements, there area significant number of other Agencies providing care in the County both in a professional and

voluntary capacity.

Families

The care and support of families is intrinsically linked in many cases to enabling individuals to reside either in their own individual accommodation or within the family home. It is widely acknowledged without this support, many persons with a disability could not continue to reside in their own homes or locality.



Extension and adaptation works.

3. Challenges, Opportunities, Aims & Objectives

There are a number of challenges that will have to be addressed in order to achieve the vision of the National Housing Strategy for People with a Disability but there are also opportunities if a collaborative approach is taken. A key focus of this Strategy is on the delivery of appropriate Housing as a basis from which people with disabilities can participate in society. However, accommodation alone will be insufficient without addressing the wider environment, services and supports required to facilitate independent living, hence the need for collaboration between sectors.

The **supply of housing** is a common challenge that is faced by all individuals, young and old, trying to source appropriate accommodation whether it is through social housing support, the private rental market or private homeownership. However, for some people with a disability where their income is limited or there is a requirement to have the property adapted, the challenge is even bigger.

Design issues have been specifically highlighted as both a challenge and an opportunity going forward. The incorporation of assistive technology, accommodation for personal assistants, wheelchair accessibility, and so forth remain issue that require progression. The use of good design as an approach to achieve long term cost savings through avoidance of retrofit and adaptation costs needs further consideration. While acknowledging that a universal approach has significant cost implications due to the increase in the floor areas and an additional level access shower facility at ground floor, it is believed a percentage of all new stock should have facilities on the ground floor to accommodate a person with a disability to avoid adaptation to dwellings in the future. Local authority accommodation is designed in accordance with the Departmental Guidelines which provides details of accommodation for the various house types. In the case of accommodation being provided specifically for persons with special needs, these are designed in conjunction with the Health Service Executive who primarily provide the care supports necessary to enable the occupants to reside in the accommodation.

The lack of PA **supports** is also a major barrier to people with disabilities accessing housing in order to live independently. A further key challenge for a rural area like Donegal, where there is a high percentage of deprivation, is the significant cost implications related to the provision of support services. While national guidelines indicate that there should be no clusters of accommodation for persons with a similar disability, this may not always be practical in a rural area, which can often necessitating a number of community group homes to be located in reasonably close proximity. There are significant costs associated not only with the direct provision of the accommodation but also in terms of the provision of care support and transfer costs today centers if a number of smaller clusters are dispersed across a wide rural area. The **coordination of funding** for actual housing accommodation (e.g. the Capital Assistance Scheme via the Dep. Of Housing / Local Authorities), and the ongoing necessary support funding (via the Dept. of Health / HSE) requires examination in order to ensure that when funding is in place for the construction costs of accommodation that the supports services are in place to enable speedy occupation of the accommodation.

The **rising cost of housing adaptations** works versus housing grant limits is a challenge, as well as the current means test income eligibility limits for these grants. It is suggested that these threshold limits be re-examined and updated to reflect current building costs and affordability. A review and updating of these limits would be an opportunity to enable more people with disabilities to avail of necessary adaptation works to their own homes.

The consultation process highlighted the potential for **increasing awareness** for People with Disabilities on what opportunities existing to apply for assistance either via Housing adaptation Grants, Social Housing, and other Personal Supports. It is important the people are aware of such opportunities and obtain the necessary assistance to avail of same. Indeed it is also important that personnel within key stakeholders such as the HSE, Local Authority, Approved Housing Body Sector and Disability Sector Agencies become more aware of each other roles and to share what contribution each of us can bring to the table in this regard.

There is a need for greater clarity in relation to **sensory or autism related housing needs**, i.e. special adaptations /rooms / facilities, and how these needs can be determined for both private and social houses. A process needs to be agreed in relation to multidisciplinary assessment of such cases to ensure that any housing needs implemented are appropriate.

As a follow on from the above, **the following key objectives** are outlined as a focus for the new Strategic Plan.

Independent Living

- People with disabilities will be supported to live an independent life in a home of their choosing in their community.
- The specific housing needs of people with a mental health disability, with low and medium support needs, be addressed via housing in the community, in line with good practice.
- The specific housing needs of people with an intellectual and / or physical disability, including those moving from congregated settings, be addressed via housing in the community, in line with good practice.

Design & Building Regulations

- Innovative housing design models should be developed, e.g. to incorporate the provision of a shared overnight ensuite bed/living room for personal assistants / carers.
- The use of Assistive Technology should be promoted with design teams in order to support independence and efficiencies in terms of requirements for personal assistants and informal supports.
- A review of Part M of the Building Regulations to be carried out in order to provide for liveable wheelchair accessible housing.
- The Local Housing & Disability Steering Group will raise these issues for progression at national level.

Awareness of options in respect of housing, supports etc

- People with disabilities to be encouraged and supported by all stakeholders to apply to the local authority to secure their future housing needs, either via social housing, housing adaptation grants to private homes, etc.
- People with disabilities to be encouraged and supported by all stakeholders to apply to the HSE or other relevant agencies for the personal supports to meet their housing needs to live independently.
- Key stakeholders to collaboratively share their own experience, and clarify what roles they can fulfil to ensure a more 'joined up' approach locally.

Housing Grant Schemes for People with a Disability

- Request a review of the Housing Grant limits to reflect rising building prices.
- Request a review of the household income criteria for Housing Grant Schemes.
- The Local Housing & Disability Steering Group will raise these issues for progression at national level.

Coordination of the funding of accommodation and funding of ongoing supports

- Improved protocols to be put in place to coordinate funding for accommodation and funding for supports is necessary to ensure prompt occupation of accommodation provided via the Capital Assistance Scheme. The Local Housing & Disability Steering Group will raise these issues for progression at national level.

Strategy Implementation

- The implementation of the Strategy will be reviewed on an annual basis.

4. Existing & Emerging Need

General

In relation to people with a disability living in congregated settings, deinstitutionalisation refers to the move away from housing people with disabilities in residential institutions to community based settings. Large residential settings, while maximising the pooling of support services, segregate residents from the community and from normal social life. Research has demonstrated that such institutions are not able to deliver the same quality of life for their residents as community based alternatives.

The assessment of social housing need is the gateway for households into the broad range of social housing supports available from Housing Authorities. The annual assessment process allows Housing Authorities to determine the most appropriate housing support for an applicant at a broader level, providing indicators to the Authority as to how its Housing Supply Programme should be planned. Providing Housing Authorities with a more holistic mechanism, particularly in the context of special housing need, directly connects a household's needs to the supports required to meet that need and allows important links to be made with other social services to assist the person or household in improving their own life opportunities.

Primarily, the assessment of housing needs is required to understand the accommodation requirements of an individual. Housing Authorities may in special circumstances, consider future circumstances even if current accommodation is suitable to meet the needs of an applicant. This allows a certain level of discretion, on a case by case basis. An example of this would be where a person with an intellectual disability is residing with elderly parents and, while their accommodation is suitable at present, it will not remain so should the parents pass on, or become unable to care for the person with the disability.

It is therefore critical that there is a clear picture emerging in terms of the need for accommodation for persons with a disability and the type of accommodation required. This must also take into account the supports identified in person centred plans as being essential to enable clients to live in the accommodation provided.

Donegal County Council and the Health Service Executive have been striving to meet the needs of people with a disability over the years including the identification and delivery of a number of Schemes to meet that need with person centred plans already in place across the services. Notwithstanding this, a more formalised process is essential through which the social housing waiting list becomes the composite record of all persons, including those with a disability who have an immediate need.

An objective of both the Council and the Health Service is therefore to ensure that all persons with a disability are on the social housing waiting list which in turn feeds into the development of a plan to meet their needs.

The lead in time to any housing procurement can be significant and it is critical that all procurement plans can take account of both current and projected housing demand. The approach taken to providing suitable and appropriate housing to people with disabilities will ensure that agreed disability specific general requirements and known individual requirements are met in all design and procurement briefs to meet both current and projected need of present and anticipated applicants. A proportion of any projected housing procurement may be forward planned and reserved to meet the demand from people with disabilities on local Housing Lists. An accessibility brief will be agreed and set out to inform the requirements that should be part of any brief from the outset i.e.

what is this project brief required to deliver in terms of accessibility for people with disabilities, general design, numbers of units, design of units, and how will this be achieved.

Local Authority Housing Waiting List

The current need will be determined from various sources from which a comprehensive breakdown of need can be compiled. The breakdown of need will include details on unit size, location, design and any other specific requirements. An element of estimation and forecast is also required to address emerging need which probably can be quantified based on previous annual averages but not specific to location.

The National Guidelines for the Assessment and Allocation process for housing provision for people with a disability as published in 2017 underpins the process for ensuring that all persons with a disability are included on the social housing waiting list.

Traditionally in Donegal, through a combination of the housing waiting list and meetings with the HSE, a picture of the need for accommodation by people with a disability was developed. Applicants were not however always required to make a formal application and go through the full assessment process. This was particularly the case in respect of individuals in congregated settings and the process was being “driven” to facilitate applicants and avoid them undue stress and the filling of forms/attending interviews/submission of documentation etc. While this represented a “balanced” approach in terms of carrying out the assessment of need with regard being had to the specific needs of some people with a disability, it is nonetheless essential to ensure that all clients housing needs are fully identified. It is therefore believed that the only robust mechanism of ensuring that there is one composite database of need is through the full social housing assessment process and the inclusion on the social housing waiting list as appropriate.

People with a disability currently on the social housing waiting list together with an estimate of persons with a need who may not be on the list are tabled below:

<u>Housing List by Basis of Need - Disability</u>			
	On Waiting list	On Transfer List	Total
Physical	31	40	71
Sensory	5	4	9
Mental Health	15	20	35
Intellectual	17	6	23
Unspecified	1	3	4
TOTALS:	69	73	142

Local Authority Housing Transfer Lists

Donegal County Council has an existing housing stock of around 5,000units. Annually a number of tenants, through new disability or injury, require alternative accommodation due to the inadequate nature of their existing living accommodation. This can be addressed through a transfer arrangement if appropriate accommodation is available.

The decision to transfer may be made as a less costly alternative to adaptation works or were necessary adaptation works are not feasible due to the nature of the property. The table below reflects the list.

Breakdown of Transfer List				
	Current Accommodation			Total
	Council	AHB	HAP/RAS	
Physical	12	5	23	40
Sensory	2	1	1	4
Mental Health	4	6	10	20
Intellectual	1	1	4	6
Unspecified	2	0	1	3
TOTALS:	21	13	39	73

HSE Lists

An analysis of clients of HSE with a housing need has also been examined. The needs vary depending on individual circumstances. Some are currently residing at home with parents, others are in residential care, units, homes, and so forth that require alternative accommodation.

HSE Current Estimate of Housing Need for People with a Disability.		
Physical & Sensory	Intellectual Disability	Mental Health
31	76	44

HSE Congregated Settings

There are 6 Congregated Settings in the county with approximately 76 people currently residing in these facilities. The table below identifies the number of people per Service Provider that remain in each facility.

Location	No. of individuals
Piermount, Dungloe.	12
James Connolly Hospital, Carndonagh.	12
ArdGreine, Stranorlar.	35
Inbhear Na Mara, Bundoran.	9
Ballytrim House, Raphoe.	5
Donegal Cheshire Apartments, Letterkenny	10
Total	83

This following table identifies the number of people that will be prioritised for transition by year, based on current projects in pipeline. It is envisaged that services will be reconfigured in some instances thereby resulting in no requirement to provide alternative accommodation. Assumptions made here are documented later in this Section.

YEAR	Details
2021	4 - Carndonagh (for JCH) - APEX
2022	5 - Drumkeen (for Ballytrim) - APEX
2021	8 Donegal Town - OAKLEE
2022	12 - Dungloe (for Piermont) - PARENTS & FRIENDS
2023	8 - Castlefin (for Ard Greine) - HABINTEG



Donegal Parents & Friends – Group Home Project Dungloe – Under Construction.

While not designated as congregated settings, there are four supervised residential units for persons with mental health disability with approximately 55 occupants as follows:-

Location	No. of
Radharc na Sleibhte, Carndonagh. *	13
Park House, Dungloe	11
Cois Locha, Dungloe	5
Rowanfield House, Donegal Town.	10
Cleary House, Letterkenny.	16

Approved Housing Bodies (AHBs)

AHBs operating in Donegal have an existing housing stock of just over 1,000 units. The normal allocation path for housing with AHBs is through the Local Authority Housing Waiting List. This is particularly the case in respect of general needs accommodation or instances where despite an individual having a disability, they are capable of independent living.

In the case of community group homes or sheltered accommodation, Approved Housing Bodies often tend to liaise more with the Health Service Executive in terms of identification of clients before

reaching agreement with the local authority in respect of the proposed occupant.

While Approved Housing Bodies do not generally maintain formal waiting lists, they may on occasion retain details of potential occupants on an informal basis.

Homeless Persons

A number of individuals that are engaged with Homeless Services have a disability. Often persons presenting as homeless have dual diagnosis particularly mental health and alcohol related difficulties and intellectual disabilities. This is particularly the case with Mental Health. Clients with a disability currently working with homeless services are included in the overall housing waiting list.

Emerging Disability Need

The Local Authorities can only deal with Housing Applicants and households already identified to them through the Social Housing Support Application Process. However, it is accepted that there will always be emerging need in this area. This is forecast based on past evidence presentations and projections from those currently in receipt of care and under 18. The needs of individuals will vary and as a result the housing needs will vary.

In the absence of a rigorous assessment process with the total need clearly identified, it is difficult to put specific numbers in terms of emerging need. It is nonetheless accepted that in terms of accommodation requirements, one of the key such requirements will be the provision of additional community group homes.

<u>Estimating Emerging / Future Housing Need for People with a Disability.</u>			
<i>(Estimate the annual need per year for next 5 years)</i>			
	Likely Disability	Total per annum	Examples
People in Residential Units that may be deemed inappropriate or unsuitable.	Primarily Intellectual / Mental Health	3	<i>(e.g. Hostels / Group Homes / Nursing Homes / Wards etc.)</i>
People in Care / Foster Care with a future need?	Primarily Intellectual / Mental health	2	
Other People requiring housing.	All Services	3	<i>(e.g. New people presenting, emergency presentations, people residing with parents, etc.)</i>
Estimate of annual emerging need		8	

Owner Occupied Stock

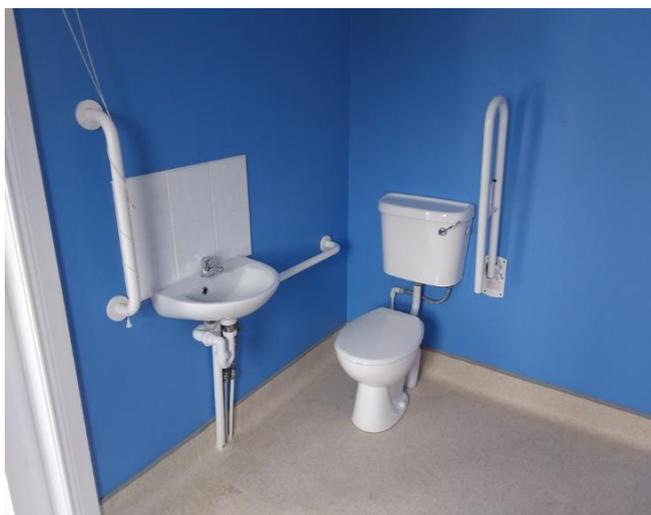
Requirement for adaptation or alternative accommodation due to disability arise in Owner Occupier properties. From a housing authority perspective, this can be gauged by the number of applications made annually for either Housing Adaptation Grants or Mobility Aids Grants. The table below outlines the number of applications made annually under these schemes for the last three years from which

the assumptions for the number of predicted applications over the coming years contained in the second table.

ACTUAL 2018 - 2020	2018	2019	2020
Housing Adaptation Grants	102	124	131
Mobility Aids Grants	23	50	88
Total Disability Grants	125	174	219

PROJECTED 2021-2023	2021	2022	2023
Housing Adaptation Grants	160	180	200
Mobility Aids Grants	100	125	150
Total Disability Grants	260	305	350

While the above tables are based on the total number of applications received, a number of such applications maybe based arising from functional difficulties associated with old age or infirmity or as a result of an accident or stroke and may not always fall within the physical, sensory, mental health or intellectual disability category.



Housing Adaptation Grant works.

Assumptions

The data gathering exercise that has been carried out to complete this Plan has not been to the level of a full Social Housing Needs Assessment. Furthermore, not all persons who have a disability and a housing need which they cannot meet from within their own resources are presently included on the social housing waiting list. The use of the knowledge of the people that are party to the completion of the plan and their wider networks have been used to supplement the compilation of the data.

In compiling the total disability need in the County, a number of assumptions have been made. These include:

- All persons with a physical and sensory disability are included on the waiting list.
- An estimate of the number of persons with a mental or intellectual disability who are not on the waiting list has been completed.
- The emerging need takes into account persons on waiting lists and availing of day services plus other limited information.
- The trend in the case of applications for adaptations to owner occupied property is simply based on trends.
- The number of people who can live in their own home with adaptations.
- Home support will be available to enable people to live in their own home.

5. Housing Delivery and Supply Mechanisms

Local Authority Stock

Local Authorities are the largest landlord in the county with over 5,000 housing units. An individual must apply to the Local Authority for Social Housing Support in order to be considered for housing and there are a number of criteria that needs to be met including income eligibility limits, being unable to provide housing from their own means and being considered as being inadequately housed in their current accommodation. A tenant of a Local Authority will pay an income related differential rent.



Adapted Local Authority House in Lifford.

Approved Housing Body Stock

Approved Housing Bodies are key players in the provision of Social Housing Support. Some AHB's deal primarily with general housing provision while others provide accommodation for people with disabilities or for older people. There are over 1,000 units owned/ run by Approved Housing Bodies in the County, with a mixture of roughly two thirds of the units for special needs clients and one third for general needs type accommodation.

To avail of Approved Housing Body owned accommodation an individual/household must in most cases apply and qualify for Social Housing Support with the Local Authority. Approved Housing Bodies provide accommodation via (a) New build (b) Acquisitions, and (c) Leasing.

While Approved Housing Bodies access private finance to fund some of housing developments, they also receive funding from the State through the Local Authorities (i.e. via Schemes such as the Capital Assistance Scheme, Capital Advance Leasing Facility and Payment and Availability Agreements).

Social Leasing Initiative

The Social Housing Leasing Initiative was introduced a number of years ago to provide an alternative

supply mechanism for local authorities to the traditional build and buy route. Under this Scheme, the local authority enters into a long term lease with the owners of the property and allocates them to persons in need of social housing support. A tenant of a Local Authority leased property will pay an income related differential rent similar to a tenant of a local authority owned property. Donegal County Council presently has over 160 units leased under this Initiative.

Rental Accommodation Scheme (RAS)

The Rental Accommodation Scheme is again an alternative method of meeting the needs of persons qualified for social housing support including those with a disability. Under this Scheme, the property is owned and maintained by a private landlord, with whom the local authority and the tenant enter into a three-way agreement. The local authority pays the rent for the accommodation direct to the landlord and the tenant pays an income related differential rent to the local authority. In these instances, the individual primarily sources the accommodation initially. There are presently over 200 households accommodated in the County under the Rental Accommodation Scheme.

Housing Assistance Payment (HAP)

This is a relatively new form of social housing support which has replaced support via rent supplement for households with long term social housing need. The Housing Authority will be responsible for all households where a housing need has been determined. Under this Scheme, the household, when approved for social housing support, sources their own accommodation following which the landlord is paid directly by the State and the tenant pays an income based differential rent to the State. There are over 1,800 households presently in receipt of social housing support in the form of HAP.

Potential Supply

Donegal County Council has set itself ambitious delivery targets under the broad range of delivery and supply mechanisms as outlined.

A summary of social housing assessments was completed in November 2020 and this indicated that there were 926 households qualified for social housing support, with a further 1,658 households seeking transfers either from Council accommodation or HAP.

While some of the accommodation to be provided, particularly under the Capital Assistance Scheme is specifically for persons with a disability, it will only be possible to allocate a proportion of the remainder to persons with a disability when regard is had to the total social housing waiting list.

Notwithstanding this, the Council will continue its existing policy of seeking to acquire dwellings where the traditional accommodation does not meet the special needs of households or individuals with a disability and to carry out adaptations to its existing accommodation to meet emerging need. It will also operate the Housing Adaptation Grants Scheme in a manner to ensure that the grant is targeted at meeting the needs of persons with the greatest level/most complex clinical/functional care needs. Furthermore, it will continue to prioritise the provision of accommodation for persons with a disability either through its own programme or through accommodation provided by the Approved Housing Body Sector.

The Council continues to pursue housing supply via a range of mechanisms as follows:

- New Construction.
- Acquisitions.
- Turnkey method.

- Leasing Initiative.
- Housing Assistance Payment.

The Council pursues specially adapted units in locations where demand is identified, and adapt houses where required to meet the needs of individuals with disability.



Upgrade works ongoing at Local Authority bungalow.

Local Initiatives/Projects

There are a number of initiatives ongoing within the County which will continue to contribute to the well-being of persons with a disability. Many of these are cross-service embracing statutory and voluntary organisations.

For example, North West Simon Community provide a tenancy support and other services, with many clients coming within the intellectual and mental health disability categories in particular. Furthermore, the extensive outreach service provided from St.Colmcille Hostel reaches out in many instances to clients with a disability. All of these agencies are brought together under the Homeless Action Team which strives to support persons in existing accommodation and render solutions where persons find themselves homeless.

The local authority provides the full range of housing services from five different Public Service Centres making the availing of services more accessible to persons with a disability. In conjunction with this, Citizen Information Services are also available in the Public Service Centres and provide an invaluable resource to all persons.

A number of collaborative projects are also ongoing and involve Approved Housing Bodies, the HSE

and Local Authority. Examples include Group Homes in Dungloe in conjunction with the Donegal Parents and Friends, in Donegal Town in conjunction with Oaklee Housing, and plans in other locations including Castlefin in conjunction with Habinteg Housing Association, and Drumkeen in conjunction with Apex Housing. These initiatives will build upon the network of Group, Sheltered and Social Housing Units that have been developed collaboratively over the last number of years throughout the county.



Social and Affordable Housing Development in Donegal Town incorporating Group Homes.

6 Housing Supports

The Health Services Executive (HSE), is committed to supporting people with disabilities in their own home. The HSE support people in their own home by direct provision or through non HSE agencies in the area of disability. Individuals must apply to the HSE for consideration for such supports. The supports for people in their homes are Personal Assistances and Home Support. Other services such as Day Care, Respite Services and full or part time Residential Services are also provided but must also be applied for and applicants will be assessed for suitability for the applied service.

Personal Assistance

Personal Assistance Services provides people with the opportunity to exercise control and choice in their lives. In so doing it enables disabled people to be active participants within their families, communities and society. Personal assistance supports the disabled person by the provision of direct individual one to one support.

The provision of personal assistance is based on needs assessment and approval for funding by the supporting voluntary agency or the HSE. Applications for personal assistance can be made through the persons supporting disability organisation or directly to the local HSE.

Home Support

The Home Support scheme is direct support scheme, operated by the HSE. It aims to help people who need medium to high caring support to continue to live at home independently. Home support works by the provision of number of hours of direct care per day to help the disabled person in their daily tasks of living.

The provision of home support is based on a care needs assessment and approval for funding by the supporting voluntary agency or the HSE. Services may be provided by the HSE directly, or by non-HSE providers. Applications for home support can be made through the persons supporting disability organisation, public health nursings service or directly to the local HSE.

Day Services

Day Services provide a range of social and rehabilitative services for disabled people by offering an opportunity to have a meaningful day, develop personal, work and independent living skills and offering occasions to interact with the local community. Day Services include centres that provide day activation, such as recreational, sport and leisure facilities, supported work placements and specialised clinic facilities that provide a combination of medical and rehabilitation services.

The provision of day services are based on an individual needs assessment and approval for funding by the supporting voluntary agency or the HSE. Applications for day services can be made through the persons supporting disability organisation or directly to the local HSE.

Respite Service

Respite services offers support to disabled people by providing temporary supervised accommodation. This supervised accommodation offers support to families and to the disabled person. Such support helps to maintain the independence for a person with a disability by encouraging interaction with their peers and offering a transition to independent living.

The provision respite service is based on a needs assessment and approval for funding by the supporting voluntary agency or the HSE. Applications for respite services can be made through the persons supporting disability organisation or directly to the local HSE.

Residential Services

Residential Services both full and part time are provided by direct provision of the HSE or through non HSE agencies in the area of disability. The provision residential service is based on a needs assessment and approval for funding by the supporting voluntary agency or the HSE. Applications for residential services can be made through the persons supporting disability organisation or directly to the local HSE.

The full suite of both day and respite programmes/ services are contained in the tables below.

DAY PROGRAMMES

Home support Assistance provided to the family in terms of assisting with care, facilitating attendance at social activities etc. Assistance can be provided outside of normal day service hours. This is a funded service.
Mainstream pre-school Local/community pre-school or playgroup.
Special pre-school for intellectual disability Specialist pre-school specifically designed to meet the needs of young children with developmental delay.
Mainstream school
Special class - primary level Education provided for children with intellectual disability by the Department of Education and Science in a special class, comprising solely of children with intellectual disability, within a mainstream primary school.
Special class - secondary level Education provided for children with intellectual disability by the Department of Education and Science in a special class, comprising solely of children with intellectual disability, within a mainstream secondary school.
Special school Education provided for children with an intellectual disability by the Department of Education and Science in a special school which is run solely for children with intellectual disability.
Child Education and Development Centre (Programme for Children with Severe or Profound Intellectual Disability) CEDCs are operated by the health services and provide day programmes for children with severe or profound intellectual disability. Care, training and education is provided with individual programme planning for each child. Front-line staff may include teachers, nurses, care assistants and household personnel.
Vocational training Training in a specific employable skill to a predetermined and certified level of competency. The training can be specialised or mainstream.
Rehabilitative Training Focuses on the development of an individual's personal core competencies, life skills, social skills, and basic work skills to a level consistent with that individual's capacities.
Activation Centre/Adult Day Centre Day centres for adults who need ongoing care, training, and development in a wide range of skills. Because of the nature of their disabilities, many of these people may not be capable of participating in open or sheltered employment or in special vocational training programmes.
Programme for the Older Person

A specialized programme designed to meet the needs of individuals who present with definitive signs of ageing, for example, dementia, Alzheimer's Disease.

Special high support day service (e.g. relating to challenging behaviour) less than 1:1 staff ratio

A specially designed day programme for persons who require a higher than usual staff ratio to address specific needs such as challenging behaviour, dual diagnosis or multiple disability. Where the staff ratio is greater than one to one, the service would be more appropriately described as an intensive service (code 17).

Special intensive day service (e.g. relating to challenging behaviour) 1:1 staff ratio contact or greater

A specially designed day programme for persons who require a very high level of staff support to address specific needs such as challenging behaviour, dual diagnosis or multiple disabilities.

Sheltered work centre - may include long-term training schemes

Sheltered work centres are designed for persons who due to health, physical stamina, or level of intellectual disability are unable to take up open, supported, or sheltered employment. It may include long-term training schemes. The individual does not receive pay or pay PRSI, but may receive nominal payment for work done. The person is allowed to work at his or her own pace, and productivity may be low. Sheltered work may be conducive to improving the person's social, emotional and development all abilities and may form only part of their day services.

Sheltered employment centre (receives pay and pays PRSI)

Individual receives wages and pays PRSI. These centres continue the work experience for those graduating from the vocational training units. The majority of individuals will continue their employment in these centres with a small number finding work elsewhere, sometimes in open employment.

Enclave within open employment

An open employment situation where a group of persons with an intellectual disability work for a mainstream employer and receive normal market rates for the job.

Supported employment

Employment in the same work environment as the general population. The support may be of a financial nature, and/or through the provision of a support person (co-worker or health agency staff member).

Open employment

Employment opportunities, under the same terms and conditions which are available to the general population.

OTHER DAY PROGRAMMES

Resource Teacher/Visiting Teacher.

Resource Teachers have an agreed quota of schools and/or children. Visiting Teachers are assigned to a geographical area. The Department of Education and Science funds both Resource Teachers and Visiting Teachers.

Early Intervention Services

Multidisciplinary intervention with infants and young children up to and including the age of six years by a team of professionals who work together to provide an integrated service to the child and its family. The team may include a pediatrician, psychologist, social worker, speech and language therapist, physiotherapist, occupational therapist, teacher, and nurse. Other health care professionals may be involved in the team as and when required. This service can be delivered in a centre or in the child's home.

Generic Day Services

Person attends a social, psychiatric or similar centre away from their residence on a regular basis. Activities will vary according to the needs and facilities of the people who attend the services and may include training in personal care and domestic tasks, work skills, social skills, communication skills, leisure and recreational activities.

Home Help

Person is paid to go into the home to assist people with normal household tasks and they may also help with personal care.

Annual Review

Individuals who are not in receipt of any services and have no future service needs in the next five years should have their circumstances reviewed on an annual basis. Rather than being described as 'No day service' they should be coded 28'Annual Review'. The consideration of contingency service plans for such individuals is advisable.

Multidisciplinary support services

Multi-disciplinary services are provided by a team of professionals who work together to provide an integrated service to a person with intellectual disability. The team will usually consist of a social worker, physiotherapist, speech and language therapist, nurse, psychologist and outreach teacher (who supports the classroom teacher and provides a link between the service provider and the family). Other health care professionals may be involved in the team as and when required.

Community Nursing: service includes the provision of basic nursing care as well as advice and assistance. Act as a point of access to other community services. Generally covers a geographical area. Including public health nurses and intellectual disability nurses working in the community.

Nutritionist: service includes intervention and counselling of individuals on appropriate nutrition intake.

Medical Services: service includes the provision of specialist medical services provided to the individual because of their disability e.g. paediatric services.

Occupational Therapy: service includes the assessment of an individual's ability to care for themselves in relation to the normal requirements of daily living – dressing, eating, bathing, home management, work preparation etc. and to engage in work and recreational pursuits. Home arrangements are also assessed and a decision is made as to what assistance is needed by way of appliances.

Physiotherapy: service includes the use of mainly physical means such as exercise, manipulation, massage, and electrical methods of therapy to treat pain, injury and disability. **Psychiatry:** service includes the provision of medical care and counselling to people with mental health problems. Service includes assessment, diagnosis and treatment.

Psychology: service includes the provision of assessment (including intellectual functioning and personality assessment), diagnostic, preventive and therapeutic services directly to individuals. Assists individuals to examine the effects their illness or disability is having on their lives and developing methods of coping with those effects.

Social Work: service includes working with individuals, families and groups experiencing social and emotional difficulties. Helps people achieve change and make decisions which will improve their quality of life including help with accommodation, rehabilitation and training programmes, and social and community skills. Provides information about social welfare benefits.

Speech and Language Therapy: Service includes the assessment, diagnosis, and treatment of people with communication difficulties. Provides assistance to people with speech, language, fluency, voice and swallowing difficulties.

Other Multidisciplinary Support Service:

If 'other multidisciplinary service' is ticked, a brief description of the service must be included in the space provided. Other multidisciplinary service should be used to record disciplines not specific job descriptions such as "Employment Facilitator" or "Resource Worker". Generic services (e.g. dentistry, chiropody) should not be recorded.

Full-time resident with no formal day programme

Day programmes are usually provided away from the person's place of residence, either family home or residential unit, and are provided by staff other than family members or residential care staff. Home help, home support, and early intervention services are obvious exceptions. If the individual's daytime activities do not meet these criteria then they are not considered to be in receipt of a formal day programme. of residence because of mobility problems are acceptable. However, day programmes delivered at the person's place

Centre-based Day Respite Service

Respite service provided on a day basis only within an intellectual disability service and includes extended day services, after-school care, day summer projects, day summer camps and people who attend day services during holiday times from their main service.

Day respite in the home

Respite service provided in the person's home during the daytime hours to enable the carer to take a short break.

RESPITE SERVICES

At home, with both parents

At home, with one parent

At home with sibling

At home with relative

Lives with non-relative (e.g. neighbour or family friend)

Adoption

Foster Care (includes 'boarding-out' arrangements)

Living independently

Living semi-independently - maximum 2 hours supervision daily

Vagrant or homeless

5-day community group home - goes home for weekends/holidays

7-day x 48-week community group home - goes home for holidays

7-day x 52-week community group home

A community group home is a standard domestic-style house in a residential neighbourhood where a small number of people with an intellectual disability live together, with appropriate staff supervision.

5-day village-type/residential centre - goes home for weekends/holidays

7-day x 48-week village-type/residential centre - goes home for holidays

7-day x 52-week village-type/residential centre

A residential centre is usually based on a campus: the aim is to provide accommodation which is domestic in scale and as home-like as possible. Accommodation may be in the form of a village-type complex or in smaller clusters of 3 to 4 houses at one location.

Nursing Home

Psychiatric Hospital

Other intensive placement with special requirements due to challenging behaviour

Intensive residential service for people with challenging behaviour which usually involves a higher level of service (e.g. 7-day as opposed to 5-day service) and/or a higher staff ratio.

Other intensive placement with special requirements due to profound or multiple disability

Intensive residential service for people with profound or multiple disabilities which usually involves a higher level of service (e.g. 7-day as opposed to 5-day service) and/or a higher staff ratio.

Holiday residential placement

Holiday residential placement which is provided within a residential service.

Crisis or Planned respite

Temporary planned or crisis/emergency care which is provided in a residential centre or community group home in order to enable the carer to take a short break from caring duties.

Occasional respite care with a host family in a scheme such as Home Sharing or Share- a-Break

Shared care or guardianship (usually 5 or 7 days per week)

Regular part-time care - 2-3 days per week

Regular part-time care - every weekend

Regular part-time care - alternate weeks

Other

Overnight respite in the home

Temporary planned or crisis/emergency care which is provided in the person's home overnight in order to enable the carer to take a short break from caring duties. **Involves an overnight stay.**

7. Targets, Deliverables & Review / Reporting.

<u>ACTION</u>	<u>RESPONSIBILITY</u>		
	<i>Lead Agency</i>	<i>Supported by</i>	<i>Timeline</i>

HOUSING GRANTS FOR PEOPLE WITH A DISABILITY.

Provide at least 200 Housing Grants per annum during the course of the Plan, in respect of adaptations to privately owned houses, for People with a Disability. <u>This represents a target budget and spend in excess of €2m per annum.</u>	<i>Local Authority</i>	<i>HSE</i>	<i>Annually</i>
Seek a review of the maximum allowable grant limits and the household income criteria, for Housing Grants for People with a Disability to reflect rising building prices.	<i>Local Authority</i>	<i>All (i.e. HSE, AHB's & Disability Sector)</i>	<i>by Q1 2022</i>
Seek the development of a clear process and protocol to ensure that multidisciplinary assessments are prepared for the housing needs for people with autism / sensory needs, that include clear recommendations on what housing adaptations are required for Housing Grant applicants.	<i>HSE</i>	<i>Local Authority</i>	<i>by Q1 2022</i>

ADAPTATIONS TO LOCAL AUTHORITY HOUSES.

Carry out adaptation works to at least 40 Local Authority houses per annum during the course of the Plan, for tenants with disability / mobility issues. <u>This represents a target budget and spend in excess of €0.5m per annum.</u>	<i>Local Authority</i>	<i>HSE</i>	<i>Annually</i>
Seek the development of a clear process and protocol to ensure that multidisciplinary assessments are prepared for the housing needs for people with autism / sensory needs, that include clear recommendations on what housing adaptations are required, for social housing applicants / tenants.	<i>HSE</i>	<i>Local Authority</i>	<i>by Q1 2022</i>

HOUSING DELIVERY AND ALLOCATIONS.

Prioritise People with a Disability when allocating new and vacant social housing stock and monitor same annually to ensure equity of distribution. <u>Estimated spend of at least €2m per annum on new construction for people with a Disability.</u>	<i>Local Authority</i>		<i>Annually</i>
Complete at least 1 Group Home / Sheltered Housing Project per annum during the course of the Plan. <u>This represents a target budget and spend in excess of €0.35m per annum, on construction costs (excluding support costs).</u>	<i>Relevant AHB</i>	<i>Local Authority, HSE.</i>	<i>Annually</i>

DESIGN AND BUILDING REGULATIONS.

Seek to have Universal Design concepts and accessible housing incorporated into all new social housing construction projects.	<i>Local Authority on behalf of the Steering Group</i>		<i>by Q1 2022</i>
Seek the completion of the review of Part M of the Building Regulations in order to provide for liveable wheelchair accessible housing.	<i>Local Authority on behalf of the Steering Group</i>		<i>by Q1 2022</i>

Seek the development of innovative housing design models, e.g. to incorporate the provision of a shared overnight ensuite bed/living room for personal assistants / carers.	<i>Local Authority on behalf of the Steering Group</i>		<i>by Q1 2022</i>
Seek the promotion of Assistive Technology with design teams in order to support independence and efficiencies in terms of requirements for personal assistants and informal supports.	<i>Local Authority on behalf of the Steering Group</i>		<i>by Q1 2022</i>

IMPROVE AWARENESS AND COLLABORATION.

Create awareness of social housing and personal support options that People with a Disability can apply for and / or avail of to assist them in living independently.	<i>All (i.e. Local Authority, HSE, AHB's & Disability Sector)</i>		<i>by Q1 2022</i>
Develop Local Action Teams within each Municipal District, and designate key staff within each organisation who will liaise directly with People with Disabilities applying for Social Housing, and / or their advocates.	<i>All (i.e. Local Authority, HSE, AHB's & Disability Sector)</i>		<i>by Q2 2022</i>
Work collaboratively via the Homeless Action Team structures to assist People with a Disability who are homeless or at risk of homelessness.	<i>Local Authority</i>	<i>HSE and Relevant AHB</i>	<i>Annually</i>

COORDINATE THE FUNDING OF SUPPORTS WITH THE FUNDING OF ACCOMMODATION (Capital Assistance Scheme).

Seek improved protocols to be put in place to coordinate funding for accommodation and for supports to ensure prompt occupation of accommodation provided via the Capital Assistance Scheme.	<i>HSE</i>	<i>Local Authority</i>	<i>by Q3 2022</i>
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REVIEW AND REPORTING.

Review the rollout and implementation of the Strategy on an annual basis through the Housing & Disability Steering Group, and identify any barriers to its delivery.	<i>All (i.e. Local Authority, HSE, AHB's & Disability Sector)</i>		<i>Annually</i>
Review and Report on progress versus targets and deliverables at the end of the first quarter of each year in respect of the previous calendar year.	<i>Local Authority</i>	<i>HSE and Relevant AHB</i>	<i>Annually</i>

End.