

**Pre-Budget Submission – Budget 2008**

## **Contents**

<i>Section</i>	<i>Page</i>
<b>Introduction</b>	3
<b>Executive Summary</b>	5
<b>The Department of Enterprise, Trade and Employment</b>	
<i>Employment Measures</i>	8
<i>Training Measures</i>	10
<b>Department of Social and Family Affairs</b>	13
<b>Department of Health and Children</b>	16
<b>Department of Education and Science</b>	23
<b>Department of Finance</b>	26
<b>Department of the Environment, Heritage and Local Government</b>	27
References	29

## Introduction

Budget 2008 is an extremely important opportunity for the Government to consolidate its ongoing commitment to funding disability services. The implementation of the National Disability Strategy requires investment to meet the existing needs of people with disabilities, to provide additional funding to meet currently unmet needs and to facilitate continued development and innovation in the provision of services.

2007 has been a good year for the development of disability services and services to older people. Public, private and non-governmental organisations alike have been working hard to implement the National Disability Strategy in a way that will bring real change and improvements to the lives of people with disabilities.

It must be acknowledged that services that are provided to people with disabilities and older people have come a long way, both in terms of the investment that they receive and in the way that they are delivered. People now receive services that cater specifically for their needs and, with the implementation of the Independent Assessment of Need process under the Disability Act 2005, this will become more evident as time goes on.

However, central to these developments is the need to appropriately resource the services that are provided to people with disabilities. The Independent Assessment of Need process, which began in 2007 for those under five years of age and which will be rolled out to all people with disabilities by 2011, offers an unprecedented opportunity to identify the gaps in service provision between that which people require and that which it is practicable to provide. The data recorded must be used as a planning tool for future budget planning in order to fill these gaps to provide comprehensive services to the people who need them.

The implementation of the Sectoral Plans is now well underway. Prior to the review of the Plans in 2009, it is important that every possible benefit is brought to the lives of people with disabilities and their families. It is incumbent on the six Departments, required to prepare Sectoral Plans, to consider carefully how they will maintain momentum and deliver on the objectives outlined.

The current HSE National Working Group established to review its Funded-Adult-Day-Services must come to its conclusions without delay. The Rehab Group calls for budgetary provision to be made to implement the *Draft Code of Practice* for those who use Sheltered Occupational Services to ensure that their rights and needs are provided for. The *Draft Code* was originally published five years ago and the situation now requires urgent action.

The Rehab Group has, for several years, urged Government to enhance rehabilitation services to ensure that they are available to those who need them, at the earliest possible opportunity and in close proximity to their homes. The *Agreed Programme for Government's* commitment to undertake this work is welcome. 2008 offers an opportunity to move this commitment forward and we sincerely hope that this will be progressed as a matter of priority.

In a number of sectors, the issues are not strictly budgetary but operational, where processes and systems unnecessarily exclude or make life difficult for people with disabilities. The cross-departmental approach under the Sectoral Plans offers an opportunity to address these inconsistencies to improve the way that services are provided.

It is absolutely essential that a cross-departmental approach is taken to consider how to meet the needs of people with disabilities in coming years. All funding allocated to disability services must reward commitments to cross-departmental links ensuring the best possible outcome for the individual and value for money for the Exchequer. The lives of people with disabilities do not fall neatly into the remit of one government department and this should be recognised in the devising of funding policies.

The points outlined in this submission represent priorities for investment in Budget 2008. Rehab Group calls for their urgent consideration.

## **Executive summary of the key points made in this submission:**

### **The Department of Enterprise, Trade and Employment**

#### *Employment Measures*

- The Wage Subsidy Scheme (WSS) must be carefully considered in terms of its effectiveness and steps should be taken to increase take-up.
- Funding should be provided to support people who acquire disabilities to remain at work.
- Resources must be invested to encourage employers to take on people with disabilities.
- Provision should be made for the development of bridging supports for those who have completed training and taken up employment in the open market.
- Funding streams should be introduced to encourage innovation in the development of supports for employment.

#### *Training Measures*

- Sign language interpretation services should be available in all FÁS-funded services.
- Capital funding allocation is required to upgrade and maintain training facilities.
- The training bonus received by some in FÁS-funded training should be extended to all in training.
- Significant investment should be allocated for training services for people with mental health difficulties.

### **Department of Social and Family Affairs**

- A commitment should be made to maintain Disability Allowance at 30% of the Average Industrial Wage.
- A Cost of Disability Payment should be introduced as soon as possible.
- Greater access to Carer's Allowance must be provided.
- The implementation of a National Carers' Strategy must be adequately resourced.
- The limits for earned income for those on Disability Allowance should be increased.
- Adequate resources must be provided for the advocacy services provided by the Citizens Information Board.
- The barriers to employment created by the restrictions imposed on Disability Benefit should be removed.

### **Department of Health and Children**

- The Draft Code of Practice for Sheltered Occupational Services should be resourced and implemented without delay.
- Rehabilitation services need to be urgently developed close to people's homes to ensure early intervention.
- Provision should be made for increased home support services for older people, people with disabilities and children with disabilities.
- A mechanism to monitor the gaps identified by the Assessment of Need process and a plan to meet unmet need must be provided.
- The need for additional staff posts identified by the Harmon/Bruton review should be funded without delay.
- The introduction of an individual budget system should be introduced to give people with disabilities greater choice and control of their support arrangements.
- Medical card eligibility for people with disabilities should not be means tested.
- People with disabilities should be allowed to work without losing key essential medical card cover.

- Rehabilitative Training should be extended and the allowances provided increased.
- An increase in the Rehabilitative Training (RT) Fee paid to providers should be agreed and provided for in Budget 2008.
- A capital allocation of more than €2.6m is required to fulfil National Learning Network's capital requirements in 2008.
- Funding is required to provide supports to bridge the transition between Rehabilitative Training (RT) and further training or employment.
- Investment is required to pilot Post-Rehabilitative Training Employment Supports.
- Provision must be made for Suicide Prevention programmes to reduce the rate of suicide by 20% by 2012.
- Appropriate support services to cater for the needs of children with rare disabilities should be provided.
- Increased funding should be provided for autism services nationwide.
- Funding is required for a national strategy to provide for specialist provision to people with a brain injury.
- Provision must be made to commence a five-year plan to bring about the plans for mental health services envisaged in *A Vision for Change* and the *Agreed Programme for Government*.
- The National Standards for Disability Services should be implemented.

#### **Department of Education and Science**

- A defined revenue-funding scheme to provide support to individuals wishing to live in supported accommodation is required.
- Appropriate funding must be provided for the implementation of the requirements of the Education for Persons with Special Educational Needs Act 2004.
- Provision should be made to ensure early intervention for all children during the implementation of the functions of the National Council for Special Education (NCSE).
- Where assessments of need are required to apply for educational supports, these should be funded by the allocating body.
- The Minister's Fund for Students with Disabilities should be increased significantly, to provide for the cost of assessment, the extension of the fund to students returning to second level, and in accessing courses both full and part-time, with ownership of technology remaining with the student.
- A system of allocation of assistive technology which is adequately resourced and which meets the real needs of individuals is required.
- A clear funding stream should be created to provide transport facilities for students with disabilities.
- An inclusive education and training funding stream is required across the third level sector.
- Funding for educational support workers must include resources to cover recruitment, training and management costs.

#### **Department of Finance**

- The value of the Charitable Lotteries Scheme should be increased to €12 million in 2008.
- The proposed Charities Regulatory Authority should be wholly-funded by the Exchequer.

#### **Department of the Environment, Heritage and Local Government**

- The development of a National Housing Strategy must be supported by adequate funding.
- The Capital Assistance Scheme should be increased to €150 million.
- Funding should be provided for the establishment of a Waste Regulator.

- Capital equipment grants should be provided to enhance recycling infrastructure nationally.
- Clear budget provision should be made available to local authorities to fund improvements to the accessibility of public buildings.
- A significant increase in the allocation for the Disabled Persons' Grant Scheme is required.

## **The Department of Enterprise, Trade and Employment**

Rehab Group welcomes the Department of Enterprise, Trade and Employment's commitment to developing a strategy to increase employment among people with disabilities in line with the *National Action Plan for Social Inclusion's* objective to place an additional 7,000 people with disabilities, who do not have a difficulty in retaining a job, in employment by 2010. This is an ambitious target and one that will require the concerted energies of all stakeholders to ensure that it is realised.

It is important that efforts to place people with disabilities in employment are undertaken in a way that assures them of long-term jobs which have real opportunities for progression. The strategy must look at the development of schemes to encourage employers to employ people with disabilities, to encourage people to enter employment, and to ensure that training programmes, which meet each individual's needs, are well-resourced and delivered in a strategic, co-operative way.

### **EMPLOYMENT MEASURES**

- **The Wage Subsidy Scheme (WSS) must be carefully considered in terms of its effectiveness and steps should be taken to increase take-up.**

Rehab Group would like to welcome the commitment to increase funding to the Wage Subsidy Scheme (WSS) announced in the *Agreed Programme for Government*. However, although it is used to great effect by Rehab Enterprises which is the largest non-governmental employer of people with disabilities, the WSS has not been as successful as originally conceived among employers who employ small numbers of people with disabilities. It is now time to make changes to the scheme to ensure that it meets both the needs of people with disabilities, as employees, and the needs of employers. There are a number of critical challenges that need to be overcome by the Department to increase take-up by employers and employees alike:

- **Participants in the Wage Subsidy Scheme must retain their secondary benefits for as long as they need them.**

Funding must be provided to allow the person with a disability to maintain their secondary benefits on an ongoing basis while participating in the WSS. For many people with disabilities, medical, travel and other expenses which are covered by the State are essential to their lives. Fear of losing these benefits can be one of the main obstacles to participation in the workforce. By extending medical and other secondary benefits to all WSS participants indefinitely, these fears could be minimised, leading to a greater take-up of employment by people with disabilities.

- **Employment must bring added financial benefit to people with disabilities.**

In addition, steps must be taken to ensure that there is a financial incentive to the individual to participate in the WSS. Entry into the scheme should not unduly affect a person's income. When a person enters the scheme, they transfer from their disability payment to the Back to Work scheme which decreases over a period of three years. However, the person's ability to work an increased number of hours does not necessarily increase over this period and after three years they could be earning the equivalent of just 20 hours at minimum wage per week which is considerably less than disability allowance. Any scheme to encourage people with disabilities into employment should

provide a long-term employment opportunity and guarantee them a level of income which allows them to participate in an equitable way in community life.

- **The WSS should be extended to those who wish to take up part-time work.**

The key to encouraging people with disabilities to enter the workforce is ensuring that flexible options are available to them. The WSS applies only to those who are in a position to take up employment of more than 20 hours per week. For many people with disabilities, working for 20 hours or more per week would be a considerable challenge. By permitting access to the Scheme by those in a position to work less than 20 hours a week, a greater number of people with disabilities could benefit. In particular, it should be recognised that for people with disabilities who may not have worked before, or who may have been out of work for a long period of time, it will be necessary to build up hours per day/week over time.

- **The limits of the subsidy available under the WSS create a ceiling to career progression for people with disabilities.**

The WSS must not be the end of the road for people with disabilities in terms of employment opportunities. The limits of the subsidy that an employer can receive for an employee, in some respects, places a ceiling on the amount a person can earn. It is essential that people with disabilities, like people without disabilities, have the opportunity to increase their income over time. Therefore, it is important that those on the WSS have the opportunity to participate in continuous professional development which supports them to progress and/or to take up new positions in other organisations.

- **Funding should be provided to support people who acquire disabilities to remain at work.**

Injuries or illness can occur at any time. Employers are becoming increasingly aware of the importance of people as a resource and of the overall cost of losing a trained and experienced member of staff in the event of an acquired disability. Early intervention is essential to ensuring that people who acquire disabilities while in employment receive the supports necessary to return to work. Statistics clearly show that the longer a person is out of work due to illness or acquired disability, the higher the potential they will not return to work. Funding should be provided to develop a multi-agency approach to developing and implementing measures to support employers and employees in minimising the negative effects of acquired disabilities in employment.

- **Resources must be invested to encourage employers to take on people with disabilities.**

It is often the case that employers will be anxious about employing people with disabilities because they fear it will have resource implications. Consequently, resources must be allocated to promote the benefits of employing people with disabilities among employers. This promotion work should be undertaken through advertising schemes and in partnership with disability organisations in order to raise awareness of all of the schemes available to employers to support them.

The Workplace Equipment Adaptation Grant is a great resource to employers in making adaptations to their workplaces in order to accommodate the needs of people with disabilities. The additional funding for this scheme outlined in the

*Agreed Programme for Government* must be accompanied by a specific awareness campaign to raise awareness of the scheme.

- **Provision should be made for the development of bridging supports for those who have completed training and taken up employment in the open market.**

The support needs of many people with disabilities and others who are marginalised do not diminish on completion of training. The FÁS *Strategy for Vocational Training* has identified the need for supports to bridge transition points to assist people in progressing to further education or employment. All National Learning Network learners receive work orientation supports while in training, and while these supports are currently being extended beyond the duration of the training, there is no formal system in place that allows them to access bridging supports to enable them to successfully pursue employment. Specific funding to bridge the gaps in service provision between training and employment by enabling the individual to continue to link in with a service when in employment would improve outcomes for a person with a disability and support them in continuing to progress in their career.

An innovative approach to providing this support on an ongoing basis is also required. Well-developed employment supports to help people to stay in employment can minimise the negative effects of difficult life events which can impact on a worker's employment.

- **Funding streams should be introduced to encourage innovation in the development of supports for employment.**

The targets for increasing employment among people with disabilities are ambitious. In order to achieve them, new programmes will have to be piloted to identify new possibilities for service provision. Currently, funding favours existing models and there is little flexibility for innovation. As a good example, Rehab Enterprises has developed a programme called Workpath to support its workers, both with and without disabilities, in their employment. Budget 2008 provides an opportunity to create a fund to stimulate new initiatives to promote employment among people with disabilities with an emphasis on positive outcomes for the individual.

## **TRAINING MEASURES**

National Learning Network provides specialist training to 4,500 people with disabilities, including 1,000 people with mental health difficulties, every year. National Learning Network training courses have high rates of progression to further education and employment and have proved to have had very positive impacts on the lives of learners.

The provision of such specialist training services requires a greater investment of resources, than mainstream training services, in terms of staffing levels and technological and physical supports,. National Learning Network endeavours to provide world-class services to those who access its services, but is finding this increasingly difficult within the existing resource restrictions.

- **Sign language interpretation services should be available in all FÁS-funded services.**

National Learning Network endeavours to provide training services which are accessible to the broad range of people who access them. However, in recent

years a significant problem has arisen with respect to the provision of sign language interpretation services. A person who is deaf taking a FÁS-run programme has access to defined funding for sign language interpretation, while those accessing FÁS-funded programmes such as those provided by National Learning Network do not receive funding for this service. Sign language services are costly and cannot be delivered within the existing agreed fees. Rehab Group therefore calls for the development of a defined-funding stream to provide sign language interpretation services for those in training or further education, regardless of the service provider.

There are currently only a small number of Irish Sign Language interpreters (ISL) working in Ireland and so consideration should be given to funding the development of sign language interpretation services in Ireland. Investment in training and infrastructure would help to increase the numbers and, therefore, access to the service over time.

- **Capital funding allocation is required to upgrade and maintain training facilities.**

National Learning Network operates 50 centres throughout the country which have been in operation for many years. In the context of the new requirements under the Disability Act 2005 and the need to ensure that all public buildings are accessible, National Learning Network now urgently needs to address the physical fabric of its buildings to ensure that its training facilities are of a standard appropriate to modern training delivery for people with disabilities.

National Learning Network has received no capital funding since 1999, causing serious physical deterioration of the buildings throughout the country.

In addition, National Learning Network requires capital funding to support the upgrade of computer equipment to ensure that VT programmes delivery is technologically up-to-date.

Budget 2008 offers an opportunity to support the training of people who are marginalised by developing a capital assistance fund which would provide funding for specific building projects and other necessary capital upgrade work.

- **The training bonus received by some in FÁS-funded training should be extended to all in training.**

Over the course of 2007, National Learning Network learners have raised some issues in respect of the allowances that they receive while attending training. These are supported by Rehab Group and require attention in Budget 2008.

It is important that people who are accessing training receive financial incentives to participate in training and to cover the increases in cost of living that they experience as a result of taking up a course.

Payments made to learners are determined by the allowances they were receiving prior to taking up training. This results in wide differences in the payments received by individual learners. Firstly, it is important that the training bonus is made available to all those in FÁS-funded training regardless of the allowance they were in receipt of prior to entering training. Currently, only those receiving Disability Allowance or Blind Person's Allowance on entry to training, receive this

payment, and, in these cases, the disability payment becomes a Training Allowance supplemented by a Training Bonus.

In addition, the current level of the Training Bonus needs urgent consideration. Despite repeated calls, the Training Bonus has not increased from €31.80 since 1999, when it represented 26% of the total income (Training Allowance + Training Bonus) a person in FÁS training received. Today, the Training Allowance is €185.80 and the Training Bonus represents just 14.6% of total income. This training bonus must increase to €65.28 in order to maintain its 1999 value in today's terms.

	€	Training allowance + training bonus (€)	As a % of total training allowance
1999	31.80	121.34	26%
Current level	31.80	217.60	14.6%
Suggested increase Budget 2008	65.28*	251.08	26%

\*This figure represents 26% of training allowance and training bonus at current levels and should, therefore, be adjusted to reflect any increase in Disability Allowance, allocated in Budget 2008.

- **Other allowances should be considered in terms of their value and relevance to those who receive them.**

Meal allowances and travel allowances are payable to some who attend National Learning Network courses. These allowances differ depending on local conditions such as the existence of a subsidised canteen or a good local public transport system. The meal allowance stands at just €4 per week. Rehab Group and representatives of National Learning Network learners have made representations calling for a reconsideration, in consultation with all relevant parties, of the level of these allowances and the way that they are paid.

• **Significant investment should be allocated for training services for people with mental health difficulties.**

People with mental health difficulties have different training needs to people with physical or sensory or intellectual disabilities. National Learning Network has already engaged in a large amount of work to ensure that its services to people with mental health difficulties are founded in the Recovery Model for Mental Health Services and bring positive change to the lives of its learners. However, this has led to the identification of a significant need for innovation and development within mental health services which is restricted due to lack of funding. Resources to develop new service models in a co-ordinated way between all stakeholder agencies is now required.

## Department of Social and Family Affairs

Rehab Group would like to commend the Department of Social and Family Affairs for the work planned in its Sectoral Plan to improve the services that it delivers to its customers. This must lead to a greater consideration of how the individual accesses social welfare payments and how this process can ensure the promotion of participation in employment and community activities. In this regard, the Department's Activation Model is encouraging, however, there are changes which would greatly enhance the work of the Department and these are as follows:

- **A commitment should be made to maintain Disability Allowance at 30% of the Average Industrial Wage.**

It is important that social welfare payments provide adequate levels of income for people with disabilities to maintain a good quality of life. People with disabilities are two-and-a-half-times more likely to be unemployed than a person without a disability (NDA, 2005) and it is, therefore, incumbent on the State to ensure a level of income from social welfare that allows people to participate in community life and yet continues to encourage entrance into employment.

In recent years, the Government has demonstrated its commitment to ensuring that the Disability Allowance maintains its value in economic terms. This work must continue throughout the life of this Government and that of the *National Action Plan for Social Inclusion 2007 to 2016* in tandem with efforts to increase employment levels.

- **A Cost of Disability Payment should be introduced as soon as possible.**

The *Agreed Programme for Government* commits to the undertaking of a review of the Cost of Disability Payment. In line with calls made by other disability organisations, the Rehab Group calls for the urgent introduction of a €40 weekly payment without delay to go some way towards meeting the well-documented extra cost of living with a disability and to ensure income adequacy for people with disabilities.

- **Greater access to Carer's Allowance must be provided.**

The moves towards providing a greater level of care to people in their own homes rather than moving them to residential care requires a re-consideration of the way that family carers are supported. A great deal of progress has been made in recent months, including the introduction of a half-rate allowance.

However, it must be recognised that by leaving employment to care for someone full-time a considerable financial strain could be placed on a family. According to the Carers Association, just one in six carers qualifies for a carer's allowance. Moreover, it is estimated that 150,000 family carers also save the State up to €2.1 billion every year.

The means test should, therefore, be reconsidered. Savings and investments should not be included in the means for assessment for carer's allowance. The current income limit of €640 per week for a couple, just over Average Industrial Earnings, suggests that where one spouse gives up work to look after a family member, the family may not qualify for carer's allowance despite a significant reduction in the family's income. The income disregards for child dependents do not sufficiently address the many financial demands on a family. These limits

must be increased to ensure that family carers are able to continue to provide these invaluable supports.

- **The implementation of a National Carers' Strategy must be adequately resourced.**

Rehab Group welcomes the Government's commitment to developing a National Carers' Strategy by the end of 2007 and its commitments to introducing a needs assessment protocol for family carers. In particular, the *Agreed Programme for Government's* commitment to introduce and fund a needs assessment for family carers should be included in this Strategy.

The actions identified by this process must be accompanied by the resources to make a real difference to the lives of people who are caring for family members. The *Strategy* should include investment in training programmes for carers, respite care allowances and the development of respite care provision. The *Strategy* should be developed in consultation with those involved in the provision of supports to carers and to people with disabilities and older people. Moreover, the preparation of the *Strategy* should be undertaken in collaboration with all relevant departments.

- **The limits for earned income for those on Disability Allowance should be increased.**

The recently introduced Disability Allowance Plus scheme, which sees recipients lose just 50c from their Disability Allowance for every euro that they earn over €120 up to €350 when undertaking rehabilitative work, is most welcome. It encourages people with disabilities to enter employment while still guaranteeing their income and also recognises that people with disabilities in employment work for different hourly rates and different periods of time.

However, for many people with disabilities earning over €120 per week could jeopardise other benefits that they are receiving or which are being received within the household that they are living in.

Many employers now want to employ people with disabilities at the minimum wage for an experienced adult. This is difficult as with every rise in minimum wage the number of hours a person with a disability can work without affecting their benefits reduces. The current limit of €120 represents just over 13 hours a week at current minimum wage levels. An increase in the limit to allow people to work up to 20 hours at minimum wage without risking their secondary benefits would encourage more people to take up and be offered employment.

- **Adequate resources must be provided for the advocacy services provided by the Citizens Information Board.**

A great deal of progress has been made in the provision of targeted advocacy services in recent years. The development of community-based advocacy projects is welcome and should be increased to ensure widespread representation. Building capacity among the most vulnerable members of our society to participate in decisions that affect their lives has great benefits in terms of independent living skills and personal development. Adequate resources must be provided to the Citizens Information Board to continue this essential work.

In addition, the enactment of the Citizens Information Act 2007 provides a statutory right to a Personal Advocate to access social services for people with disabilities who are most at risk in our society. This service has enormous potential to make a difference in the lives of very vulnerable people. It must build confidence among the people it can benefit and must therefore be well-resourced from the beginning. Rehab Group calls for the provision of funding to implement this service countrywide in 2008.

- **The barriers to employment created by the restrictions imposed on Disability Benefit should be removed.**

A person is entitled to Disability Benefit if they have been making PRSI contributions and acquire a disability which prevents them from working. However, while this disability may prevent them undertaking the work that they have done in the past, following re-training they may be able to take up alternative employment.

Unfortunately, on completion of training, those in receipt of Disability Benefit are not allowed to take up part-time employment and retain their benefits unless exempted to do so. Where these are granted, they are valid only for a maximum of twelve months and a person may be required to present their case at a Medical Board.

This payment is of great benefit to those who may be unable to earn a living as a result of an illness or disability. However, it should also function as a flexible support to facilitate people to re-enter the labour market and should help them through this transition. Allowing those on Disability Benefit to retain their social welfare payments and the accompanying secondary benefits in a similar way to those on Disability Allowance, would provide a greater opportunity to re-enter the workplace.

Many people who could return to work do not even participate in retraining to pursue alternative work paths because re-entry to the workforce is not encouraged by the way Disability Benefit is administered. This must be addressed in Budget 2008.

## Department of Health and Children

- **The Draft Code of Practice for Sheltered Occupational Services should be resourced and implemented without delay.**

The HSE National Working Group reviewing its Funded Adult Day Services must come to its conclusions without delay. The implementation of the Code of Practice for Sheltered Occupational Services is now long overdue.

This Code provides for standards for the operation of sheltered occupational services, including rights and entitlements, the provision of allowances, personal development activities, complaints procedures, and diversity and equality. The code does not need to be reviewed but should be implemented in consultation with relevant stakeholders including disability organisations and in cooperation with the Department of Enterprise, Trade and Employment and the Department of Social and Family Affairs. Funding for this implementation must be provided in Budget 2008.

An increased emphasis on progression, greater independence and community integration has been shown to bring significant improvements in the lives of people with disabilities.

- **Rehabilitation services need to be urgently developed close to people's homes to ensure early intervention.**

It is widely recognised among all relevant stakeholders that there is an urgent need to provide locally-accessible regional rehabilitation services to complement the services of the National Rehabilitation Hospital (NRH), based in Dublin.

For the last ten years, the Rehab Group has been in discussions with Government to develop comprehensive rehabilitation facilities. The concept of a comprehensive integrated rehabilitation service which combines intense, short and long-term care, allied to care in the community, is supported by senior politicians and is also supported in social partnership agreements and in the *Agreed Programme for Government*.

Furthermore, the need for more rehabilitation beds is clear. Rehab estimates that there is a requirement for 400 rehabilitative beds nationally to complement the existing NRH facilities. On this basis, we believe that there is a need for at least four similar units across the country serving the South-West, West/North-West and Midlands. Rehab Group calls for the introduction of funding to develop these services in Budget 2008.

The current reality is that people have to travel to the NRH at Dun Laoghaire for treatment, or in many cases, are not able to access dedicated and integrated rehabilitation services at all. A fully comprehensive rehabilitation service, which combines both the social and medical models provided, would greatly improve patient outcomes. It would provide high-quality care, in a patient-centred, non-institutionalised community setting. It would help release much needed acute hospital beds but, most importantly, maximise individuals' independence so that the long-term costs of supporting and/or caring for individuals would be decreased significantly.

In order to bring Ireland's rehabilitation services closer to international standards, capacity needs to be expanded. This is already happening at NRH but, in addition, Rehab has developed a comprehensive plan for a new network of rehabilitation services across the South and West of Ireland, where the population has most

difficulty accessing NRH services at present. This network will complement the services of NRH, which will continue to serve Dublin and its immediate catchment area.

An acute neurological rehabilitation centre in Cork providing specialised in-patient and out-patient ABI rehabilitation, working closely with the neurosciences services of Cork University Hospital would also act as the hub for:

- Satellite rehabilitation facilities in major centres of population outside Dublin such as Carlow, Waterford, Limerick, Galway and Sligo, providing both in-patient and out-patient rehabilitation.
- Community services in ensuring patients are back home as soon as possible, and that throughput is maintained in our new hospitals to ensure all patients in need of the service can access it without waiting unnecessarily.

- **Provision should be made for increased home support services for older people, people with disabilities and children with disabilities.**

Rehab currently provides home care services to more than 700 older people and adults and children with disabilities across Ireland through its brand CareLink. It welcomes the *Agreed Programme for Government's* commitment to extend the Slán Ábhaile Programme to enhance hospital discharge services to enable older people to return to their homes. However, there is still a great deal of work to be done to ensure a standardised approach nationally to home care services in enabling people to live independently with adequate supports. Currently, access to services is unequal across the country.

It is important that the number of hours of home support services that a person receives are sufficient to not only attend to their personal and home care needs but also to ensure that they have companionship and feel safe in their own homes. Adequate hours can support a family to keep a family member with a disability at home, rather than having to resort to residential care. Budget 2008 should put in place multi-annual funding to ensure that it is rolled out comprehensively and effectively throughout the country.

- **A mechanism to monitor the gaps identified by the Assessment of Need process and a plan to meet unmet need must be provided.**

The Independent Assessment of Need Process provided for under the Disability Act 2005 is a great opportunity to deliver services to people in a way that meets their specific needs. The development of a service statement which lays out the services which a person will actually receive must have adequate resources to ensure that as many requirements as possible identified under the Independent Assessment of Need process are actually delivered to the individual.

The gap between what is practicable and those identified needs that are excluded from a person's service statement must be recorded. Over time, these unmet needs should be measured and provision made to fill these gaps. A mechanism to ensure this takes place should be developed by the Department of Health and Children and provided for in Budget 2008.

- **The need for additional staff posts identified by the Harmon/Bruton review should be funded without delay.**

In 2000-2001, a Harmon/Bruton review of Rehab Group's services was conducted by consultants to the Department of Health and Children. The review identified the urgent need for over 150 additional staff posts in Rehab. Subsequently, Rehab submitted a list of urgent posts to the Department, in an effort to resolve

the issue. No further progress has been made. This matter is vital, from a service delivery and a health and safety perspective.

Person-centred services require adequate staff to provide services which allow for one-to-one interaction. This is particularly the case when working with someone to help them to enter employment or external training. Low staff ratios do not permit adequate one-to-one support and this should be addressed in Budget 2008.

- **The introduction of an individual budget system should be introduced to give people with disabilities greater choice and control of their support arrangements.**

With the Independent Assessment of Need process, comes the opportunity to give greater control to individuals for their support arrangements. An individual budget enables people needing health and social care and associated services to choose the service that they will access to meet their needs.

With such a scheme, individuals could access a clear cash or notional sum to spend on their care or support packages. A system of individual budgets could be introduced over time, extended in the first instance to those most capable of benefiting while time is spent building capacity among those who might have difficulty managing their own services. Support from a broker or an advocate, family or friends, and the provision of information, will be required to ensure that people get the greatest possible benefit from this system by accessing the most appropriate services.

- **Medical card eligibility for people with disabilities should not be means tested.**

The regulation of medical cards should consider not only financial means but also the nature of the medical need. For people with disabilities, the cost of their medical needs in financial terms would significantly deplete their resources if a medical card is not applied.

Where a person with significant healthcare requirements fails to secure a medical card, the resulting medical expenses can significantly increase their risk of poverty and could represent an insurmountable obstacle to employment. For some specific chronic illnesses, medical cards are provided without reference to means in recognition of the additional costs the individual will incur. These illnesses are by no means exhaustive and a reconsideration of them would highlight similar illnesses that incur high cost interventions.

The medical card must be applied in a way that gives the individual the greatest possible opportunity to participate in their communities. This includes a common-sense approach to upgrading existing devices/assistive technologies which does not require a re-assessment where no change has occurred in the person's condition.

- **People with disabilities should be allowed to work without losing key essential medical card cover.**

The *Agreed Programme for Government* makes a commitment to allowing people with disabilities to work without losing their essential medical card cover after three years. This is a huge step because often it is a fear of losing medical cards that inhibits an individual taking up employment. The Department of Health and

Children must work with the Department of Enterprise, Trade and Employment to identify ways in which people with disabilities that require a medical card do not lose its benefits simply because they have been working for three years.

- **Rehabilitative Training should be extended and the allowances provided increased.**

RT (RT) has immense benefits for those who have not participated in training before and who have significant support needs. It is also essential to those who have acquired a disability and who wish to re-train in order to continue to participate in employment. The number of RT places must be extended in 2008 to meet the existing need.

In addition, participants in RT retain their social welfare payments, usually Disability Allowance, and receive a supplementary training allowance to cover the additional costs incurred through participation in a course. This payment has not increased from €31.80 since 1999 despite considerable increases in social welfare payments and an increase is now long overdue. Moreover, payments such as meal allowances and travel allowances should be extended to those in RT in order to cover the additional costs incurred.

In 1999, the training allowance represented 26% of the total income (training allowance + training bonus) of a person participating in a FÁS course. Today, the training bonus, as percentage of current levels of income, is just 14.6%, a significant decrease in its real value. In line with the FÁS Training Bonus, the RT Allowance must increase in proportion to the increases in the Disability Allowance and to realistically reflect the costs that those accessing training courses must meet.

This payment should rise to €65.28 in order to maintain its 1999 value in today's terms where the Disability Allowance is €185.80.

- **An increase in the Rehabilitative Training (RT) Fee paid to providers should be agreed and provided for in Budget 2008.**

Rehab Group, through National Learning Network, provides RT to 812 people per annum, and is funded for this activity by the Health Service Executive. RT requires more intensive staff/learner ratios to ensure the best possible outcomes for the learner. This higher cost has been recognised independently in the Indecon report recently commissioned by the Department of Health and Children and the Department of Enterprise, Trade and Employment. In early 2007, the fee rates paid to Rehab Group were agreed in respect of RT giving parity with fees agreed with FÁS in respect of the years 2006 and 2007. However, these fees have not yet been implemented and Rehab Group calls for the allocation of adequate funding to the Health Service Executive to enable it to fund these agreed fee increases, a matter which is now urgent.

- **A capital allocation of more than €2.6m is required to fulfil National Learning Network's capital requirements in 2008.**

National Learning Network has an annual capital requirement of €350,000 for the replacement of computer equipment for RT. The capital requirement for buildings next year will be €2.3m. With the exception of funding from the HSE Southern Area, National Learning Network has received almost no capital funding since the year 2000. With the increased demand for community based programme delivery, there has been a major growth in the number of locations in which RT is

delivered. In the absence of capital allocations, National Learning Network has to pay high market rents, which add significantly to the loss-making referred to above.

- **Funding is required to provide supports to bridge the transition between Rehabilitative Training (RT) and further training or employment.**

As identified above, there is a need for funding to assist individuals to make the transition to further education or employment. For those in RT, many of whom have intellectual disabilities, the transition to further training can be difficult. Bridging supports are required to support individuals to make the transition from HSE-funded RT to FÁS-funded Vocational Training and along the continuum of services to employment. Without these supports, some who have completed RT may not take up further training.

- **Investment is required to pilot Post-Rehabilitative Training Employment Supports.**

Funding is required to provide people who exit RT programmes with the opportunities and supports necessary to secure and successfully engage in employment/supported employment and to continue to sustain the health and social gains achieved on their RT programme. Each participant would have an individualised Employment Action Plan which would dovetail with day care/sheltered occupational services and which would continue to identify emerging education, vocational and social supports, as necessary. The service would be primarily aimed at people with a learning disability who exit RT and who need long term supports which include a strong employment focus.

The current Supported Employment funding strand excludes many who exit from RT programmes due to its stringent criteria (e.g. many RT participations would be unable to sustain 19 hours employment per week). Dependency on costly day care services and sheltered occupational services would be reduced, and increased community integration, leading to high quality of life levels, would be achieved in a cost-effective manner.

- **Provision must be made for Suicide Prevention programmes to reduce the rate of suicide by 20% by 2012.**

409 people died by suicide in 2006, of which 187 were young people aged 15-34. The impact of suicide is difficult to measure. It is estimated that for every suicide, six people are directly affected by the death. Another source estimates that a minimum of fifty people are affected by feelings of grief, anger and frustration following a death by suicide. Figures for 2001 place the direct and indirect cost of suicide in Ireland at €900 million.

This is a serious crisis situation and one that requires a targeted and co-ordinated response from all those working in the sector to reduce these figures by 20% by 2012. The range of work needs to span from the promotion and protection of mental health and well-being, the development of prevention strategies, early intervention and treatment of high-risk groups and postvention strategies. The National Suicide Prevention Strategy *Reach Out* must be adequately resourced and rolled out as quickly as possible.

The Rehab Headsup Suicide Prevention project which focuses on promoting good mental health among young people, to preventing problems becoming crises, has seen significant success in its early stages. Funding must be made available to support organisations involved in suicide prevention programmes to work together in a strategic way to reach and improve upon outcomes for the widest possible group.

- **Appropriate support services to cater for the needs of children with rare disabilities should be provided.**

In recent years, research undertaken by RehabCare has identified an unmet need in the provision of support services to children with rare disabilities and their families. Rehab has developed a concept for an appropriate service to meet this need, in consultation with relevant stakeholders. The aim of the service would be to provide information, education and training to all stakeholders, to achieve the long-term social, community, economic and family integration of people with rare disabilities on the island of Ireland.

In 2008, the significant needs of this group should be addressed with a funding commitment to allow Rehab to further research and develop a model of services to meet the unique needs of individuals with rare disorders and their families, in a multi-disciplinary setting. This is a unique and innovative project which must be developed on a cross-departmental basis to meet complex needs which are currently unaddressed in the Irish health, social care, education and family support systems. Rehab believes this project would have significant medical, educational, social and economic benefits for the families and other stakeholders involved.

- **Increased funding should be provided for autism services nationwide.**

It is estimated that between 1,800 and 2,000 adults and children have Autism in Ireland. Its effects on the lives of those with the condition and their families can be significant.

While the level of services for people with Autism has increased in recent years, there is still a dire need for early intervention services to minimise the negative effects of the condition on the individual. Increased resources must also be allocated to the provision of appropriate day, residential, respite and educational services for both adults and children with autism. It is essential that a strategic approach is taken to the development of a full continuum of Autism care to ensure the best possible outcomes for individuals.

- **Funding is required for a national strategy to provide for specialist provision to people with a brain injury.**

A comprehensive national strategy to provide for brain injury services to include realistic funding provision should be developed to ensure adequate service provision to people who have acquired brain injuries. In particular, funding and support should be given to post-discharge services which are currently often inadequate, inappropriate or unavailable, resulting in people regressing in terms of gains made at the acute stage. The overall impact on health service provision is one of increasing costs associated with the aftermath of acquired brain injury.

By funding and implementing a full continuum of care for people with acquired brain injury from primary to secondary to tertiary care, there is greater potential for positive outcomes for the individual and for the health services in general.

This strategy should commence with research to identify the level of acquired brain injury in Ireland and the gaps in services that currently exist.

- **Provision must be made to commence a five-year plan to bring about the plans for mental health services envisaged in *A Vision for Change* and the *Agreed Programme for Government*.**

Resources must be allocated to provide for appropriate, quality and accessible mental health services to address long unmet need which has worsened over time as a result of inadequate resourcing.

Budget 2008 must provide adequate funding to implement, in full, *A Vision for Change, the Report of the Expert Group on Mental Health*, which laid out ambitious plans for mental health services in Ireland. The implementation of this plan has thus far been slow and the need for investment in mental health services is now pressing.

Specifically, Rehab Group calls for provision to be made to implement the commitments made in the *Agreed Programme for Government* including support for the Recovery Model of Mental Health Service Provision, the development of services for those with dual diagnosis – mental health difficulty and intellectual disability – we refer particularly to the development of community alternatives to psychiatric in-patient care for young people with special needs services, the ring-fencing of approximately €800 million to be raised from sale of mental hospitals for the development of community-based services, and the running of a media campaign to help combat the stigma associated with mental illness.

- **The National Standards for Disability Services should be implemented.**

In light of the formal establishment of the Health Information and Quality Authority (HIQA) in 2007 and its remit in relation to ensuring high standards and quality in the provision of health and social care services, Rehab Group would like to renew its calls for the implementation of the National Standards for Disability Services, developed by the National Disability Authority in consultation with the voluntary sector. Appropriate investment is required to ensure that all services provided to people with disabilities meet these standards.

- **A defined revenue-funding scheme to provide support to individuals wishing to live in supported accommodation is required.**

A defined revenue-funding scheme is required to provide for the supports in supported accommodation, rather than the current system of seeking support on a case-by-case basis. Supported accommodation has proven to be very successful in bringing more independence to the lives of people with disabilities.

In addition to availability of funding, work should be undertaken to ensure that the scheme meets the needs of the individual. The scheme must support people to live in the kind of accommodation and a location, with other people of their choosing, according to their wishes. Both a dedicated scheme and greater joint working between health and housing authorities are required to facilitate this option for people with disabilities.

## Department of Education and Science

Under the National Disability Strategy, the Department of Education and Science is not required to develop a Sectoral Plan in relation to its services for people with disabilities. While the National Council for Special Education does fill this gap to some extent, there is no comprehensive plan to deliver inclusive education services to adult learners over the age of eighteen. The Department has shown its commitment to providing education services to third level learners, however, there is still a need for the Department to lay out long-term objectives to meet the needs of learners with disabilities over the age of eighteen.

- **Appropriate funding must be provided for the implementation of the requirements of the Education for Persons with Special Educational Needs Act 2004.**

A great deal of progress has been made in the provision of education services to people with disabilities, in particular, children with disabilities. The National Council for Special Education's *Implementation Plan* lays out ambitious targets for the improvement of these services and these must be supported in Budget 2008.

- **Provision should be made to ensure early intervention for all children during the implementation of the functions of the National Council for Special Education (NCSE).**

While each child with a disability will be entitled to an assessment of his or her needs in coming years, the system is, at present, overstretched leading many parents to turn to private sources to get assessments for their children. It is important that the implementation of the National Disability Strategy does not unduly affect any child through a lack of early intervention. A fund similar to the National Treatment Purchase Fund, which would allow parents to purchase educational assessments for their child, would minimise these negative effects in the interim period.

- **Where assessments of need are required to apply for educational supports, these should be funded by the allocating body.**

Where an application to a fund to get educational supports requires a psychological assessment, it is essential that provision is made to fund such assessments. In many cases, individuals applying for supports from educational funds must pay for their own assessments which can cost a significant amount. Although some students have previously had a diagnosis, the nature of disability, and specific learning disabilities, in particular, is that the need for supports and technology can arise at any time, especially where an important educational or vocational transition or milestone arises.

Often, a psychological assessment paid for by the individual is inadequate to identify the supports required. A standardised, multi-disciplinary approach would improve the positive outcomes and reduce the number of inappropriate measures which are currently being implemented.

It is also essential that assessments are carried out on an ongoing basis to ensure that people achieve their potential given the advancements in supports available to them. For example, many people with specific learning disabilities do reasonably well with supports that don't quite meet their needs, but they could reach their true potential if the supports they received were more appropriate.

- **The Minister's Fund for Students with Disabilities should be increased significantly, to provide for the cost of assessment, the extension of the fund to students returning to second level, and in accessing courses both full and part-time, with ownership of technology remaining with the student.**

The Minister's Fund for Students with Disabilities provides transport, personal supports and assistive technology (AT) for students with disabilities in third level education. The future administration and allocation of resources to this fund needs to consider the following:

- Adult students returning to second level education do not have access to this fund and the requirements relating to educational supports of students in further and higher education are very different. Funding needs to be allocated to research the needs of students within the further education sector, particularly students who return to study Junior or Leaving Certificate courses. At present, these students are not eligible for funding although students who are studying post-Leaving Certificate courses in the same colleges are eligible for funding.
- Many people with disabilities have not had the opportunity to reach their full educational potential and, as a result, may choose to study an access or foundation course as a means of progression on to Higher Education. However, the fund still does not make provision for the students who have not yet reached Leaving Certificate standard (or FETAC level 5) and who require supports to access these courses. This needs to be addressed.
- Similarly, the fund does not fund supports for part-time students. This situation should be remedied because, in some cases, part-time study is the most suitable option for people with disabilities to pursue further education.

- **A system of allocation of assistive technology which is adequately resourced and which meets the real needs of individuals is required.**

There is no clear strategy for the allocation of AT to students. Often the technology solutions do not meet the needs of the individual and are abandoned with considerable cost to the State. The development of guidelines for AT requirements, a system of sampling for AT users, and the introduction of training would ensure that the technologies implemented meet real need. A system and strategy that is well-resourced here will ultimately lead to more effective deployment of funds and prevent waste.

Under the current system, AT and capital equipment purchased remain the property of the institution making the application. As equipment and assistive technology are allocated based on an individualised assessment, it is unlikely that this equipment can transfer directly to another student in the same college in the following year. By attaching ownership of equipment to the institution, an individual has to re-apply for equipment when they transfer to another educational establishment. This might discourage progression as individuals come to depend on the equipment that they have access to.

- **A clear funding stream should be created to provide transport facilities for students with disabilities.**

Often one of the greatest challenges for a person with a disability to access educational services is getting there each day. For some, public transport is unsuitable or unavailable and they have to rely on taxi services to get them to classes each day. It is essential that students who require specific transport services receive adequate funding to pay for a comprehensive service and also to allow them to purchase a reliable taxi service. Where funding is inadequate, individuals have difficulty negotiating a regular service with taxi operators in the competitive market.

With the establishment of the Taxi Regulator and the work currently being undertaken to improve taxi services for people with disabilities, comes a good opportunity to solve many of the difficulties that people face in using taxi services to access education.

- **An inclusive education and training funding stream is required across the third level sector.**

It is no longer appropriate for further and higher education teachers and lecturers to deliver courses without any training on teaching delivery and methodologies around inclusive education. All staff should also be required to attend appropriate accredited training (such as Rehab Group's inclusive education award) on the wide spectrum of learning diversity that the lecturer will encounter.

- **Funding for educational support workers must include resources to cover recruitment, training and management costs.**

Where funding for educational support workers is granted, it ordinarily only covers the hourly rates of the staff member and makes no contribution to the administrative, recruitment, training, management, holiday pay or other costs which attach to employing that person. For smaller institutions, covering these additional costs can be a burden and can lead to some students having to wait longer for support provision to be put in place or having to accept a support which does not really meet their needs.

## Department of Finance

- **The value of the Charitable Lotteries Scheme should be increased to €12 million in 2008.**

The decision to increase the value of the Charitable Lotteries Fund (CLF) by €1m to €8.618m in the Budget and Estimates 2006 was warmly welcomed by Rehab Group as it indicated a recognition by the Government of the importance of the CLF to the charities sector and the requirement to increase the payment on an ongoing basis. However, Rehab Group was very disappointed that the value of the Fund was not increased further in 2007.

As the success of the National Lottery continues to increase, so too does the level of damage which the National Lottery inflicts on the charitable lottery sector and this dynamic needs to be reflected in the value of the CLF. Charitable lotteries are restricted by statute in relation to the prizes that they can offer and, therefore, cannot compete with the National Lottery which saw sales of €679m in 2006 – an increase of €63m on 2005. Rises in the National Lottery Beneficiary Fund reflected this increase in National Lottery revenues but a corresponding increase was not experienced in the CLF.

In 2000, the CLF accounted for 4.6% of the National Lottery Beneficiary Fund down from the 5% it occupied when the CLF was initiated in 1997. In 2006, the CLF share of the National Lottery Beneficiary Fund, even with the €1m increase in the value of the Fund, had fallen further to 3.9%. By increasing the CLF to €12 million, Budget 2008 would ensure that the charitable lotteries were compensated at 1997 levels. This is essential to ensure the continued viability of charitable lotteries in Ireland.

Rehab Group strongly urges an increase of the fund to €12 million in Budget 2008 and an ongoing commitment to increase the fund in coming years to keep up with increases in the National Lottery's revenues.

- **The proposed Charities Regulatory Authority should be wholly-funded by the Exchequer.**

The Charities Bill 2007 is currently proceeding through the Houses of the Oireachtas. On enactment, this legislation will establish a Charities Regulatory Authority. This Authority will maintain a register of all charitable organisations, and the legislation provides for the Authority to charge charities a fee for inclusion on the register. This fee will place an undue financial burden on many charities, as well as diminishing the public's confidence that the donations they are making are going directly to the people/causes for which they were intended. Rehab Group believes that the Charities Regulator should be wholly funded by the Exchequer and should be provided for explicitly in Budget 2008.

## **Department of the Environment, Heritage and Local Government**

- **The development of a National Housing Strategy must be supported by adequate funding.**

A national group to develop a National Housing Strategy for people with disabilities has been established to plan for the provision of tailored housing and supports to people with a disability, with particular consideration of the needs of adults with significant disabilities and those with mental health difficulties. It is important that this Strategy delivers comprehensive housing options to people with disabilities and that its implementation is supported through adequate funding.

- **The Capital Assistance Scheme should be increased to €150 million.**

Particular attention should be given to the Capital Assistance Scheme (CAS) in the National Housing Strategy given its proven benefits to people with disabilities. The Scheme run by the Department of the Environment, Heritage and Local Government, provides a positive solution to the housing needs of people with disabilities and others in the community. Growth in the voluntary housing sector and the increasing recognition of the sector by local authorities as a viable alternative to traditional local authority housing, as well as the move towards providing independent housing for people with disabilities, means that the Scheme now needs urgent expansion.

Newgrove Housing Association has thus far provided accommodation to 175 people with disabilities under the scheme. The CAS is of particular benefit to the more vulnerable groups in our society because it allows the construction or purchase of homes that meet the particular needs of those who will live in them.

Rehab Group, therefore, suggests a budget of €150 million in 2008 to meet the growing demand and to ensure that this Scheme continues to improve the lives of people with disabilities.

- **Funding should be provided for the establishment of a Waste Regulator.**

There are great differences in the way that the waste management sector is managed throughout Ireland. For example, currently, much of the regulation of the industry lies with the local authorities who, in turn, are often players in the market. This can lead to challenges for waste operators in conducting their business. Rehab Recycle is one of the largest recycling companies in Ireland, collecting and reprocessing more than 75% of Ireland's glass each year. The establishment of a waste regulator to co-ordinate the regulation of the waste sector would significantly assist the day-to-day business of the company.

- **Capital equipment grants should be provided to enhance recycling infrastructure nationally.**

Ireland has made great strides in the development of its recycling services and the achievement of its recycling targets. Further growth in recycling services requires a co-ordinated approach by all players in the market. By investing in grants to improve the recycling infrastructure throughout the country in Budget 2008, the achievements thus far can be consolidated. Capital investment will ensure that Ireland's recycling sector remains at the vanguard of developments in this area and that both public and private operators can build their services to meet the needs that are present in the market.

- **Clear budget provision should be made available to local authorities to fund improvements to the accessibility of public buildings.**

Under the Department of the Environment, Heritage and Local Government's Sectoral Plan, all local authorities must implement a plan to improve the accessibility of its public buildings for completion by 2015. It is essential that adequate funding is available to local authorities to carry out this work in the shortest possible time. Inaccessible buildings are one of the principal obstacles that people with disabilities face when trying to access employment and services. Every effort must be made to invest in improving accessibility as early as possible.

- **A significant increase in the allocation for the Disabled Persons' Grant Scheme is required.**

The Disabled Persons Grant is an invaluable contribution to enabling people with disabilities and older people to remain living independently in their own homes. Rehab Group echoes the calls of other groups in the sector to significantly increase funding under this scheme so that all eligible cases receive funding. Where restrictions of funding do exist, priority should be given to those in greatest need in terms of medical or financial factors. In addition, the limit on grants of €20,000 can place a significant burden on individuals to make up the shortfall. Where the necessary housing adaptation is estimated to cost more than the grant limit a flexible approach to ensuring that a person's house is accessible to them should be taken by the local authority granting the funding.

The allocation of funding under this grant scheme differs around the country and this has led to a complex and inequitable system. In many areas significant waiting lists exist. A standardised approach to allocating this funding in every local authority would enable people with disabilities to be aware of what to expect when accessing this scheme.

## References

- FÁS (2006) *Strategy for Vocational Training*: Dublin.
- Government of Ireland (2007) *Agreed Programme for Government*, Dublin.
- Government of Ireland (2007) *National Action Plan for Social Inclusion 2007-2016*: Dublin.
- Government of Ireland (2006) *Towards 2016, A Ten Year Framework for Social Partnership Agreement 2006 – 2015*: Dublin.
- Government of Ireland (2006) *A Vision for Change, the Report of the Expert Group on Mental Health*: Dublin.
- National Council for Special Education (2006) *Implementation Report*: Dublin.