



INDEPENDENT LIVING & SPECIALIST PROVISION

A research paper to inform the development of
the North Ayrshire Local Housing Strategy
2017-2022

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یہ دستاویز دیگر شکلوں میں بھی دستیاب ہے، جیسے آڈیو ٹیپ، سی ڈی، بریل اور بڑے حروف کی
چھپائی میں۔ درخواست کرنے پر یہ دستاویز دیگر زبانوں میں بھی مہیا کی جا سکتی ہے۔

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Ten dokument jest do uzyskania w różnych formatach: na taśmie dźwiękowej, płycie
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wersjach językowych.

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Introduction & Background

1. North Ayrshire Council believes everyone has the right to live safely in their own homes, with as much independence as possible, for as long as possible.
2. Independent living is about freedom, choice, dignity and control for those with a disability or long-term health condition, those who have become frail as a result of ageing, those in need of support or those for whom another specialist solution is appropriate.
3. Planning and prevention are key to supporting independent living. The Local Housing Strategy will describe the policy interventions which seek to support challenges arising from known milestones in people's lives.
4. Concern over a person's safety, their ability to cope alone or the level of care and support they require, may mean that other types of accommodation, such as supported housing, may be the best solution.
5. The North Ayrshire Council Local Housing Strategy 'Independent Living and Specialist Provision' Topic Paper has been developed through a collaborative process involving officers from across Council departments, our partners and other stakeholders, and with input from local communities.
6. The key aim of this Topic Paper is to ensure suitable accommodation and support is readily available to enable independent living across North Ayrshire
7. This topic paper builds upon the work and progress made, regarding addressing local housing issues, during the implementation of the Local Housing Strategy 2005-2010 and the Local Housing Strategy 2011-2016. It also draws on the mechanisms identified through the North Ayrshire Health and Social Care Partnership Strategic Plan 2015 – 2018.

Structure

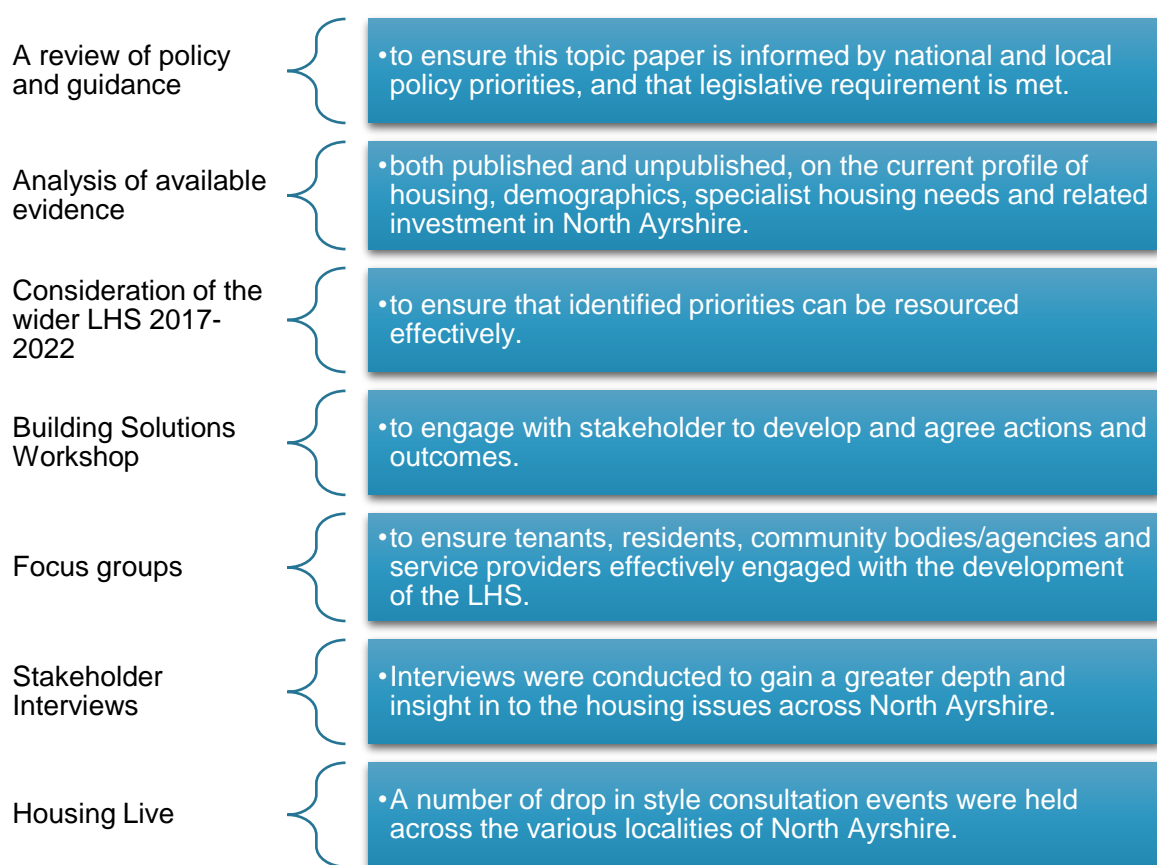
8. Independent Living and Specialist Provision is one of some topic-specific papers that together comprise the North Ayrshire Local Housing Strategy 2017-2022, and these strands are summarised in Figure 1.
9. Homelessness and housing are not covered in the Independent Living and Specialist Provision Topic Paper as it is covered in the Homelessness Paper.
10. It is envisaged that following final consultation, the strategic interventions identified through the development of this topic paper, will be subsumed into the overall North Ayrshire Local Housing Strategy 2017-2022.

11. The full consultation process is detailed within the Consultation Topic Paper. The strategic process has sought to ensure that all policy interventions identified have appropriate and effective responses.

FIGURE 1: TOPIC PAPERS OF THE LOCAL HOUSING STRATEGY 2017-2022



12. Specifically, the process of developing this topic paper has involved:



Legislation

13. The Housing (Scotland) Act 2001 is the primary legislative driver for the Local Housing Strategy. It places a statutory requirement on local authorities in Scotland to produce a Local Housing Strategy which sets out its strategy, priorities and plans for the delivery of housing and related services.

14. Other legislative influences which relate to this strand of the Local Housing Strategy include:

- [Housing Scotland Act 1987](#)
- [NHS and Community Care Act 1990](#)
- [Adults with Incapacity \(Scotland\) Act 2000](#)
- [Regulation of Care \(Scotland\) Act 2001](#)
- [Community Care and Health \(Scotland\) Act 2002](#)
- [Mental Health \(Care and Treatment\) \(Scotland\) Act 2003](#)
- [Scottish Government \(2004\) Scottish Housing Quality Standard](#)
- [Housing Scotland Act 2006](#)
- [Adults Support and Protection \(Scotland\) Act 2007](#)
- [Reshaping Care for Older People: A Programme for Change 2011-2021](#)
- [Equality Act 2010](#)
- [Social Care \(Self-directed Support\) \(Scotland\) Act 2013](#)

- [Housing Scotland Act 2014](#)
- [Public Bodies \(Joint Working\) \(Scotland\) Act 2014](#)

15. The following national policies and documents that have been considered in the development of a corporate approach to providing housing for Gypsy/Travellers.

- [Equal Opportunities Committee inquiries into the lives of Gypsy/Travellers](#)
- [The Scottish Parliament Equal Opportunities Commission, March 2013 'Where Gypsy Travellers Live.'](#)
- [Scottish Government, May 2015 'Improving Gypsy Traveller Sites'](#)
- [Scottish Government, 2009 Twice Yearly Count of Gypsies/Travellers](#)
- [Scottish Government: Gypsies/Travellers in Scotland: Summary of the Evidence Base, Summer 2013](#)

National Strategic Drivers

[Christie Commission Review of Public Services \(Scottish Government, 2011\)](#)

16. The strategic context of this paper has been influenced by the Christie Commission Review of Public Services (2011) which identified four key objectives for public service reform:

- [Public services are built around people and communities, their needs, aspirations, capacities and skills, and work to build up their autonomy and resilience;](#)
- [Public service organisations work together effectively to achieve outcomes;](#)
- [Public service organisations prioritise prevention, reducing inequalities and promoting equality; and](#)
- [All public services constantly seek to improve performance and reduce costs and are open, transparent and accountable.](#)

[Age, Home and Community: A Strategy for Housing for Scotland's Older People: 2012 – 2021 \(Scottish Government, 2011\)](#)

17. Consideration has also been given to the Scottish Governments vision for older people's housing services, as detailed in 'Age, Home and Community: A Strategy for Housing for Scotland's Older People: 2012 – 2021.

[“Older people in Scotland are valued as an asset, their voices are heard, and older people are supported to enjoy full and positive lives in their own home or a homely setting.”](#)

[Scottish Government 'Age, Home & Community: A Strategy for Housing for Scotland's Older People 2012-2021.'](#)

18. The national strategy sets out key actions for changing the approach to care for older people, recognising that supporting and caring for older people is not just a health or social work responsibility – housing has a key role to play too.

19. Scotland's Older People's Housing Strategy presents a vision for housing and housing related support for older people, the outcomes the government would like to achieve and a framework of actions.

20. The national 'Wider Planning for an Ageing Population Working Group' agreed on the following five key outcomes:

- Clear Strategic Leadership
- Information and Advice
- Better use of existing housing
- Preventative support services
- New build housing

21. The Scottish Government, local government and the 'Independent Living in Scotland Steering Group' are working together, as equal members of the Independent Living Core Reference Group. This collective commitment to supporting independent living for all disabled people in Scotland is founded on the belief that:

- It is right for the individual - to be free from prejudice and discrimination, and to participate in society as full and equal citizens;
- It is right for society as a whole - an equal society will have greater strength and social cohesion; and
- It is right for our economy - the more diverse an economy, the more innovative and high growth it is, the more successful it will be at attracting talent.

Reshaping Care for Older People: a Programme for Change 2011-2021 (Scottish Government, 2011c)

22. Reshaping Care for Older People is a Scottish Government initiative aimed at improving services for older people by shifting care towards anticipatory care and prevention.

23. The aim of Reshaping Care for Older People is to shift the balance of care from acute services to community-based support with a focus on prevention.

24. The Scottish Government sets out some key principles to achieve this:

- **Personalisation.** Service users and carers must be at the centre of what we do. We recognise that older people are a diverse group of individuals with their cultures, needs and choices.
- **Independence.** Where possible, we need to make sure older people are supported to live independently, preferably in their home. But if they do need a care home or hospital, it must meet their care needs. Introducing choice adds to a person's independence and gives them ownership of the decision. For example, the individual chooses their care provider.
- **Control.** Rather than having decisions made for them we want older people who require care services to make their decisions.

Scotland's National Dementia Strategy 2013-2016 (Scottish Government 2013c)

25. The National Dementia Strategy for 2013-2016 is the Scottish Government's second National Dementia Strategy, continuing on the work of the first strategy, which focused on improving the quality of dementia services through more timely diagnosis and on better care and treatment, particularly in hospital settings. The first strategy began the process of transforming care across all sectors in anticipation of the growing ageing population.

26. The key outcomes for the 2013-2016 strategy are:

- To make sure more people with dementia live a good quality life at home for longer;
- Develop dementia enabled and dementia friendly local communities, that contribute to greater awareness of dementia and reduce stigma;
- Timely, accurate diagnosis of dementia;
- Better post-diagnostic support for people with dementia and their families;
- More people with dementia and their family members and carers being involved as equal partners in care throughout the journey of their illness;
- Better respect and promotion of rights in all settings, together with improved compliance with the legal requirements in respect of treatment;
- People with dementia in hospitals or other institutional settings always being treated with dignity and respect.

27. The Scottish Government is currently developing the third National Dementia Strategy for 2016-2019. In March 2016, the Scottish Government published the Proposal for Scotland's National Dementia Strategy 2016-2019 (Scottish Government, 2016b).

28. One of the priority proposals for the 2016 – 2019 strategy is to work collaboratively with the Integration Joint Boards to support locality planning and re-design of dementia services.

29. This will also include:

- the further promotion of telecare and aids and adaptations for people with dementia;
- attention to the broader housing and accommodation needs of people with dementia;
- enhancing a multi-disciplinary approach to care at home;
- More work to increase access to Self-Directed Support for people with dementia; and
- Attention to supporting social inclusion including issues around transport.

The Keys to Life: Improving quality of life for people with learning disabilities (Scottish Government, 2013b)

30. The current key policy of learning disabilities is the 'Keys to Life', which embeds both national priorities and the principles and objectives of integration (NAHSCP, 2015).
31. The policy makes 52 specific recommendations for action across Scottish Government, the NHS, Local Authorities and the Voluntary Sector, focusing on health promotion and prevention of ill health amongst people with learning disabilities.
32. It also gives a renewed focus on adopting a human rights-based approach to supporting and empowering individuals to live healthy and happy lives.
33. Keys to Life stresses the important role Local Housing Strategies can play in supporting people with learning disabilities to live independently in their home.

Local Strategic Drivers

Single Outcome Agreement

34. The North Ayrshire Single Outcome Agreement between the North Ayrshire Community Planning Partnership and the Scottish Government sets the priority outcomes for North Ayrshire. The Agreement details how the Planning Partnership will work towards achieving these priorities, and how they contribute to the delivery of national priorities.
35. There are two main outcomes within the Single Outcome Agreement that are supported by this strategy:
 - Adults and older people in North Ayrshire live healthier and more active lives.
 - North Ayrshire residents feel safer, and communities are empowered.

Council Plan

36. North Ayrshire Council's Council Plan 2015-2020 is an ambitious programme of change called 'Good to Great'. It identifies five main building blocks in the drive to do this – communities, places, partnerships, processes and people.
37. The Council's mission is to improve the lives of North Ayrshire people and develop stronger communities by being a leading organisation defined by excellent and innovative services. The Council want to grow employment and regenerate towns, support all of our people to stay safe, healthy and active and to protect and enhance the environment for future generations.

38. To achieve all of this by 2020, North Ayrshire Council will deliver high quality affordable housing that meets the needs of our communities. We aim to prevent homelessness and make sure that people who have been made homeless have access to permanent housing.

Local Development Plan

39. North Ayrshire Council adopted its first Local Development Plan on 20 May 2014. It encompasses mainland North Ayrshire, the Cumbraes and the Isle of Arran.

40. The Local Development Plan is a land use document that indicates where particular types of development should and should not happen, providing certainty to investors and communities. It sets out a positive, long-term vision for growth across North Ayrshire, identifying land and infrastructure to deliver 7,500 new homes and for businesses to locate and expand.

41. Growth is guided by the policies and proposals of the Local Development Plan, which take a pro-active approach to enabling quality development as well as protecting our environment.

42. The current Local Development Plan covers a ten year period, up to 2025 and provides the policy framework for determining planning applications.

North Ayrshire Housing Register

43. The North Ayrshire Housing Register is a shared (or common) housing register. North Ayrshire Council along with Cunninghame Housing Association, Irvine Housing Association and ANCHO have a shared pool of housing applicants.

44. The North Ayrshire, Housing Allocation Policy, supports the Local Housing Strategy by describing how housing need is assessed and priority is given to applicants on the North Ayrshire Housing Register.

45. The North Ayrshire Housing Register landlords aim to address varying forms of housing need and to influence the creation of balanced and sustainable communities through the development and implementation of a fair and consistent allocation process.

46. The policy, which is based on a comprehensive assessment of local housing need and demand promotes applicant choice, and equal opportunities aim to make the best use of the housing stock and provides applicants with access to comprehensive advice and information concerning their housing options.

North Ayrshire Health and Social Care Partnership Strategic Plan 2015-2018

47. In line with Scottish Government Policy, the North Ayrshire Health and Social Care Partnership was formed to integrate health and social care into a single structure.

48. The Health and Social Care Partnership aims to improve the wellbeing of people who use health and social care services, particularly those with complex needs who require support from health and social care at the same time by:

- Creating a single system for health and social care services
- Developing more informal community resources and assets that are based on the needs of service users
- Putting the emphasis on prevention and early intervention

49. Housing Services has a role to play by working in partnership with the Health and Social Care Partnership, particularly through tertiary prevention or early intervention. This aims to lessen the impact of harm by intervening early and by improving the quality of life through, for example, reablement, recovery-oriented systems of care and housing modifications for people with disabilities and long-term conditions.

North Ayrshire Joint Commissioning Strategy for Older People 2012

50. The Joint Commissioning Strategy for Older people 2012 was developed by NHS Ayrshire and Arran in conjunction with North Ayrshire, South Ayrshire and East Ayrshire Councils.

51. The central vision outlined in the strategy was to:

‘Enable older people to remain at home for as long as it is practical and safe, give person-centred care and provide a range of services and support appropriate to meeting their needs and achieving good outcomes’.

52. Key proposals outlined in the strategy include:

- Continuing to increase the provision of equipment and adaptations to help older people remain in their homes as they age;
- Continue to provide equipment and adaptations to people where an Occupational Therapist determines they have an assessed need;
- Increase the provision of sheltered housing units to reflect and cater for the rising ageing population;
- Improve the quality of care homes throughout North Ayrshire;
- Promote the availability of Free Personal and Nursing Care, so those in need of the service are aware of it;
- Increase the use of technology, computers and the internet amongst older people;

- Promote local partnership coordination related to housing improvement measures and energy efficiency, such as insulation and double glazing to help reduce fuel poverty;
- Improve data relating to older people with learning disabilities to meet future needs;
- Work with health service and other partners to influence and promote population retention locally to plan for future demographical imbalances.

North Ayrshire Policy on Unauthorised Encampments

53. In line with Scottish Government guidelines, North Ayrshire Council considers Gypsy Travellers to be a minority ethnic community. The council recognises Gypsy Travellers rights to nomadic life and respects the fact that Gypsy Travellers may wish to maintain a travelling way of life as part of their cultural identity. It is acknowledged that there should be no discrimination against Gypsy Travellers because of their way of life and culture.

Equality Statement

54. The Council are committed to ensuring equality of opportunity for all North Ayrshire residents and to addressing any form of discrimination on the grounds of:

- Age
- Disability
- Race
- Religion or Belief
- Gender
- Gender Reassignment
- Sexual Orientation, and
- Maternity or Pregnancy

55. The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 requires that North Ayrshire Council publish a set of equality outcomes which it considers will enable it to better help eliminate discrimination, advance equality and foster good relations.

56. Our Equality Outcomes are listed here about the council's important core objectives:

- Core Objective 1: Regenerating our communities and increasing employment
 - More disabled people are in work and training.
- Core Objective 2: Protecting vulnerable people
 - The incidence of violence against women is reduced.
 - The incidence of hate crime is reduced.

Older people are more active and independent in their communities.
Vulnerable people have improved access to financial advice, services and products.

- Core Objective 3: Improving educational attainment
 - More young people are leaving schools for positive, sustained destinations.
 - Pupils feel safer in schools.
- Core Objective 4: Operating more efficiently and effectively
 - More council employees are working flexibly.
 - Employees are able to respond more confidently and appropriately to the needs of colleagues and customers

57. An Equality Impact Assessment has been prepared for this topic paper and can be found in Appendix 1.

Research Methods

58. To inform the Independent Living and Specialist Provision Topic Paper, input was sought from as diverse and broad a section of North Ayrshire society as possible by employing a wide range of research methods. A brief outline of the methods used is outlined in this chapter. For a full breakdown of the research from the consultation methods used to inform all topic papers and analysis of the findings, please refer to the Consultation Topic Paper.

Local Housing Strategy Surveys

59. Residents from across North Ayrshire were invited to share their views and opinions on housing by completing a series of surveys. There were five surveys in total: Supply and Place Making; People with Disabilities; Housing for Older People; Private Tenant; and Private Landlord.

60. To inform this topic paper findings from the Housing for Older People and People with Disabilities surveys have been analysed.

Focus Groups

61. Focus Groups were held to engage with older people and people with disabilities, to give them the opportunity to discuss the housing issues they find important. Four focus groups were held, two relating to older people housing and two relating to housing for people with disabilities.

62. A broad range of stakeholders attended the focus groups, including representation from North Ayrshire Health and Social Care Partnership, North Ayrshire Elderly Forum, Carers Centre, various housing associations, Sheltered Housing Unit tenants and Council and Registered Social Landlord tenants.

Stakeholder Interviews

63. To gain greater depth and insight into the housing issues faced by older people and people with disabilities, one-to-one Stakeholder Interviews were conducted with councillors, strategic housing organisations and service providers. These interviews afforded the opportunity to ascertain the issues experienced by front line officers in relation to delivering housing support to help achieve independent living.

Building Solutions Workshop

64. After utilising consultation methods to inform and evidence the topic paper, a workshop was held with key stakeholders in order to collectively develop and agree on the outcomes and actions needed to reflect the findings. Using characters from the Scottish sitcom 'Still Game' as a proxy, stakeholders identified the housing solutions required to meet different housing needs.

Profile of North Ayrshire

Sub Housing Market Areas

65. There are five Sub Housing Market Areas within North Ayrshire:

- Arran
- North Coast and Cumbrae
- Garnock Valley
- Three Towns
- Irvine/Kilwinning

66. Sub Market areas are where households either currently live or work and, if they wished to move, areas where they would search for alternative accommodation. Therefore, if a housing need is identified in a particular housing market area, it is reasonable to assume that the household would expect to meet that need in the same area.

Localities

67. The North Ayrshire Community Planning Partnership is committed to Locality Planning in order to develop strong local partnerships that focus on engaging with people and local communities.

68. There are six Locality Partnerships in North Ayrshire, and with the exception of Kilwinning, these mirror Sub Housing Market Areas identified in the Housing Needs & Demand Assessment, as shown in Table 1.

Table 1: North Ayrshire Sub Housing Market Areas and relationships to localities

Sub Housing Market Area	Locality
Arran	Arran
North Coast (including Cumbrae)	North Coast & Cumbraes
Garnock Valley	Garnock Valley
Three Towns	Three Towns
Irvine*/Kilwinning	Irvine*
	Kilwinning

*INCLUDING SPRINGSIDE, DREGHORN & DRYBRIDGE

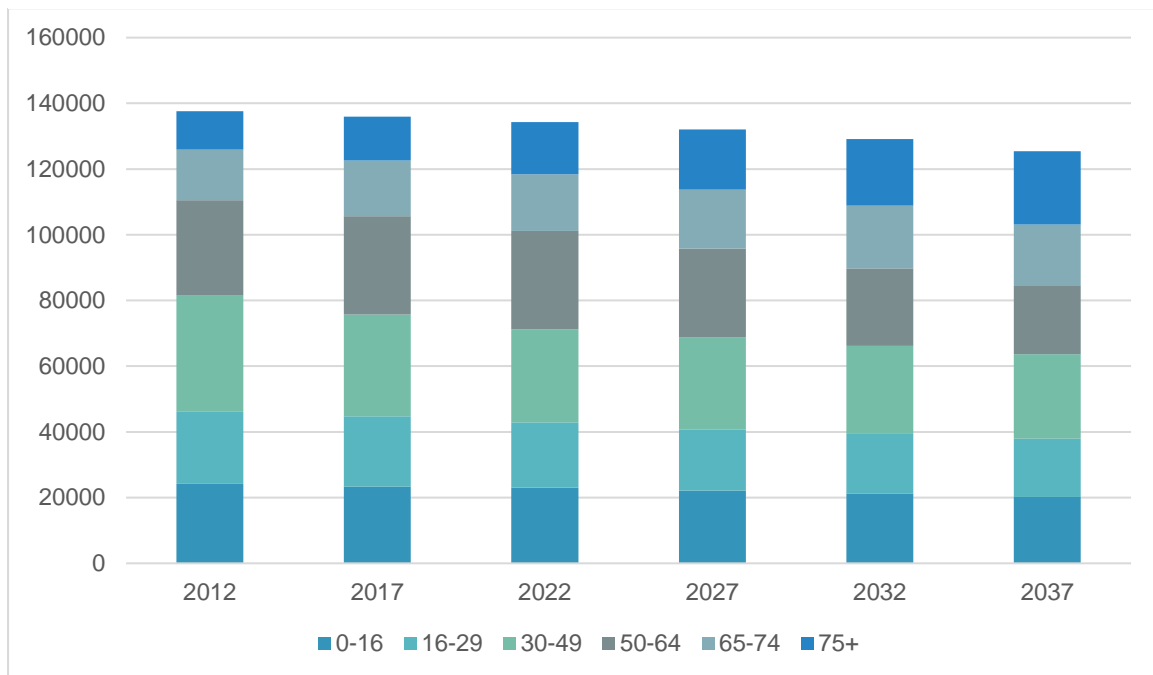
69. Locality Partnerships will identify and address local issues by working with local people, community groups and organisations.

Population

70. The National Records of Scotland projects the population of North Ayrshire in 2017 to be around 135,590 residents. This is a local population decrease of 1.4% from 2012. Since 1989, North Ayrshire's population has fallen whilst Scotland's population has risen over this period.

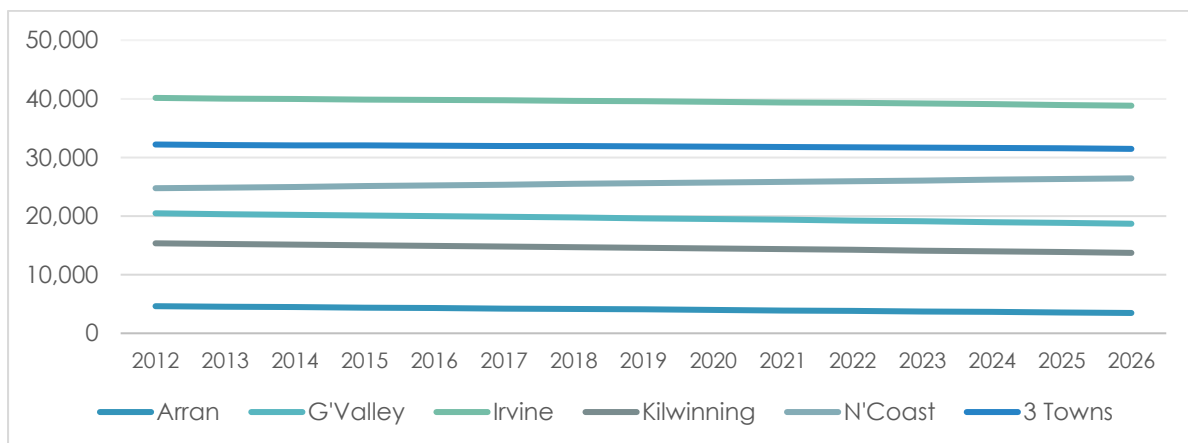
71. Figure 2 illustrates this population decline, though it is noted that both the number and proportion of residents 65 years and over is increasing.

FIGURE 2: POPULATION PROJECTIONS BY NUMBER OF RESIDENTS FOR NORTH AYRSHIRE 2012-2037 BY AGE (SOURCE: NATIONAL RECORDS OF SCOTLAND 2012 BASED PROJECTIONS)



72. The National Register of Scotland has forecast how this population change will affect each locality up to 2026, as shown in Figure 3

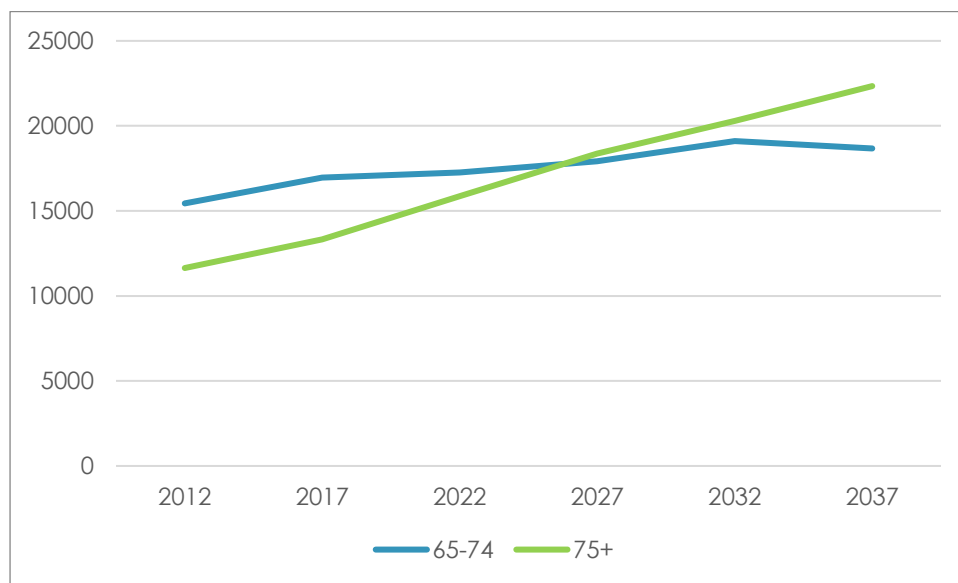
FIGURE 3: POPULATION PROJECTIONS FOR NORTH AYRSHIRE 2012-2026 BY LOCALITY (SOURCE: NATIONAL RECORDS OF SCOTLAND 2015)



73. The Garnock Valley is projected to see the biggest decrease in population numbers between 2012 and 2026, with a loss of 1784. The North Coast, however, is projected to have a population increase of 1674 and is the only locality projected to increase.

74. Population projections from the National Records of Scotland also show a significant rise in the number of people aged over 65, particularly in the over 75's where the population is projected to increase by 92%. (Figure 4).

FIGURE 4: POPULATION PROJECTIONS FOR NORTH AYRSHIRE 2012-2037 BY AGE (SOURCE: NATIONAL RECORDS OF SCOTLAND 2012)



Deprivation

75. The Scottish Government published the latest Scottish Index of Multiple Deprivation on 31 August 2016. The Scottish Index of Multiple Deprivation uses a range of socio-economic data to calculate deprivation across small areas known as data zones. There are 6,976 datazones each with an approximate population of 760. Of the 186 datazones in North Ayrshire, 70 are in the 20% most health deprived.

76. Breakdowns for the number of North Ayrshire datazones in the 5%, 10% and 20% most, and least health deprived in Scotland are shown in Table 2.

Table 2: No. of datazones in the 5%, 20% and 20% most and least health deprived

	5%	10%	20%
Most Health Deprived	12	32	70
Least Health Deprived	3	3	18

Source: Scottish Index of Multiple Deprivation 2016

77. Table 3 shows the number of datazones in the 20% most health deprived by locality area.

Table 3: No. of Datazones in the 20% Most Health Deprived, by Locality

Locality	Number of health deprived Datazones	Total number of datazones	% of datazones
Irvine	24	55	44%
Kilwinning	9	22	40%
Three Towns	24	44	54%
Garnock Valley	10	27	37%
North Coast	3	31	10%
Arran	0	7	0%
North Ayrshire	70	186	38%

Source: Scottish Index of Multiple Deprivation 2016

78. 38% of datazones in North Ayrshire are in the 20% most health deprived, which equates to around 1 in 5 datazones being health deprived. Arran is the only locality with no datazones in the 20% most health deprived.

79. Three Towns and Irvine have an equal number of health deprived datazones, however, as a percentage of a total number of datazones, Three Towns has higher levels of health deprivation, with 54% in the 20% most health deprived.

Life Expectancy

80. Figure 5 (males) and Figure 6 (females) demonstrate the differences in life expectancy between the most deprived and least deprived areas. The correlation between deprivation and life expectancy is clear – and the issue appears to be

more significant for males, with a difference of 5.6 years between the most deprived and least deprived, and compared with 3.8 years for women.

Healthy Life Expectancy

81. Healthy life expectancy is an estimate of how many years' people might live in a 'healthy' state (meaning, the number of years that a newborn baby would live in 'healthy' health if they experienced the death rates and general health of the local population at the time of their birth, throughout their life) and is therefore a key summary measure of a population's health.

82. In Scotland, healthy life expectancy is 60.3 years for men and 62.6 years for women born in 2014. In North Ayrshire, the healthy life expectancy at birth from 2009-2013 was projected as 61.2 years for men, and 63.6 years for women (ScotPHO, 2015), which puts North Ayrshire slightly higher than the national average.

FIGURE 5: MALE LIFE EXPECTANCY AT BIRTH IN COUNCIL AREAS FOR MOST DEPRIVED AND LEAST DEPRIVED 2009-2013 (SOURCE: NATIONAL RECORDS OF SCOTLAND)

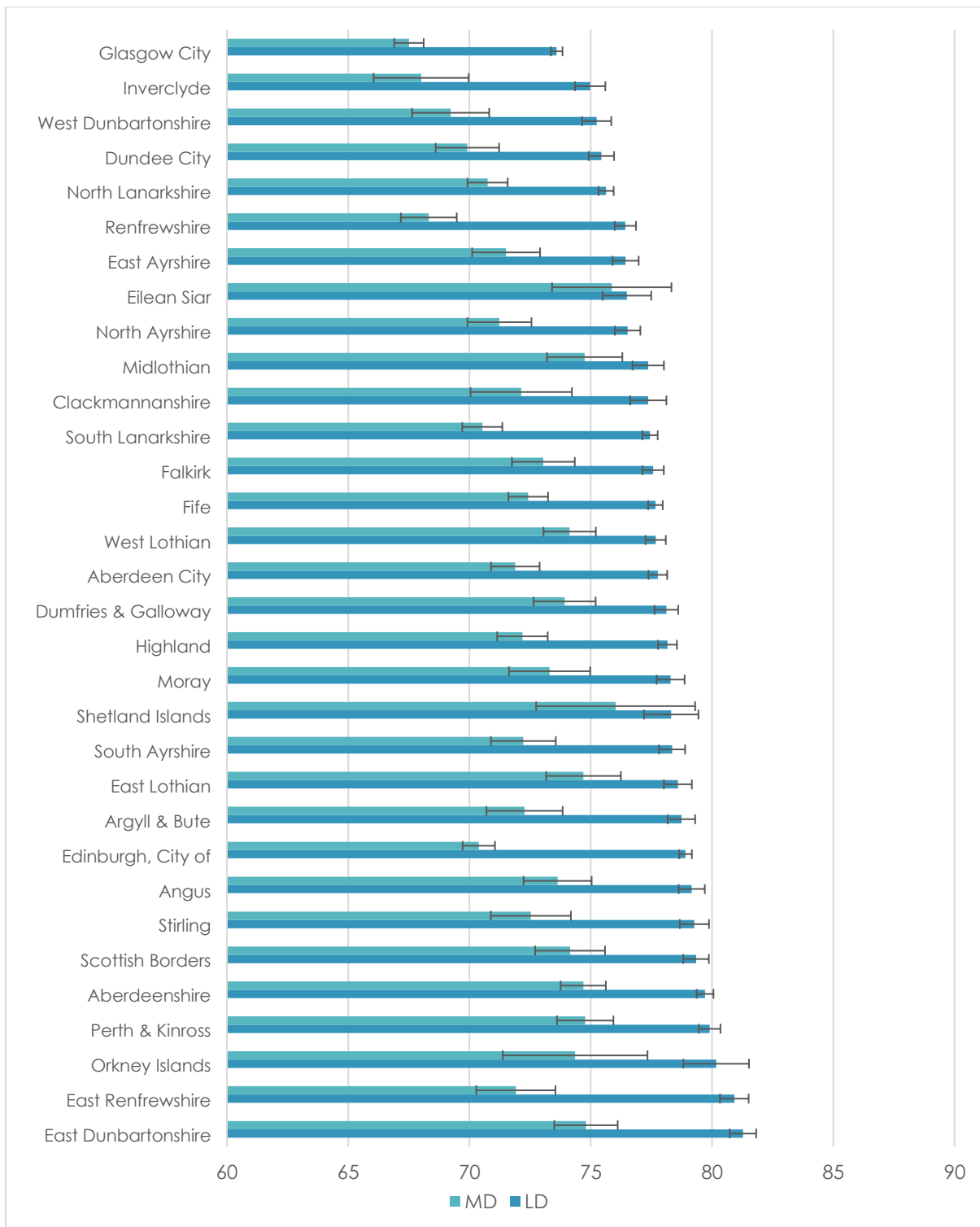
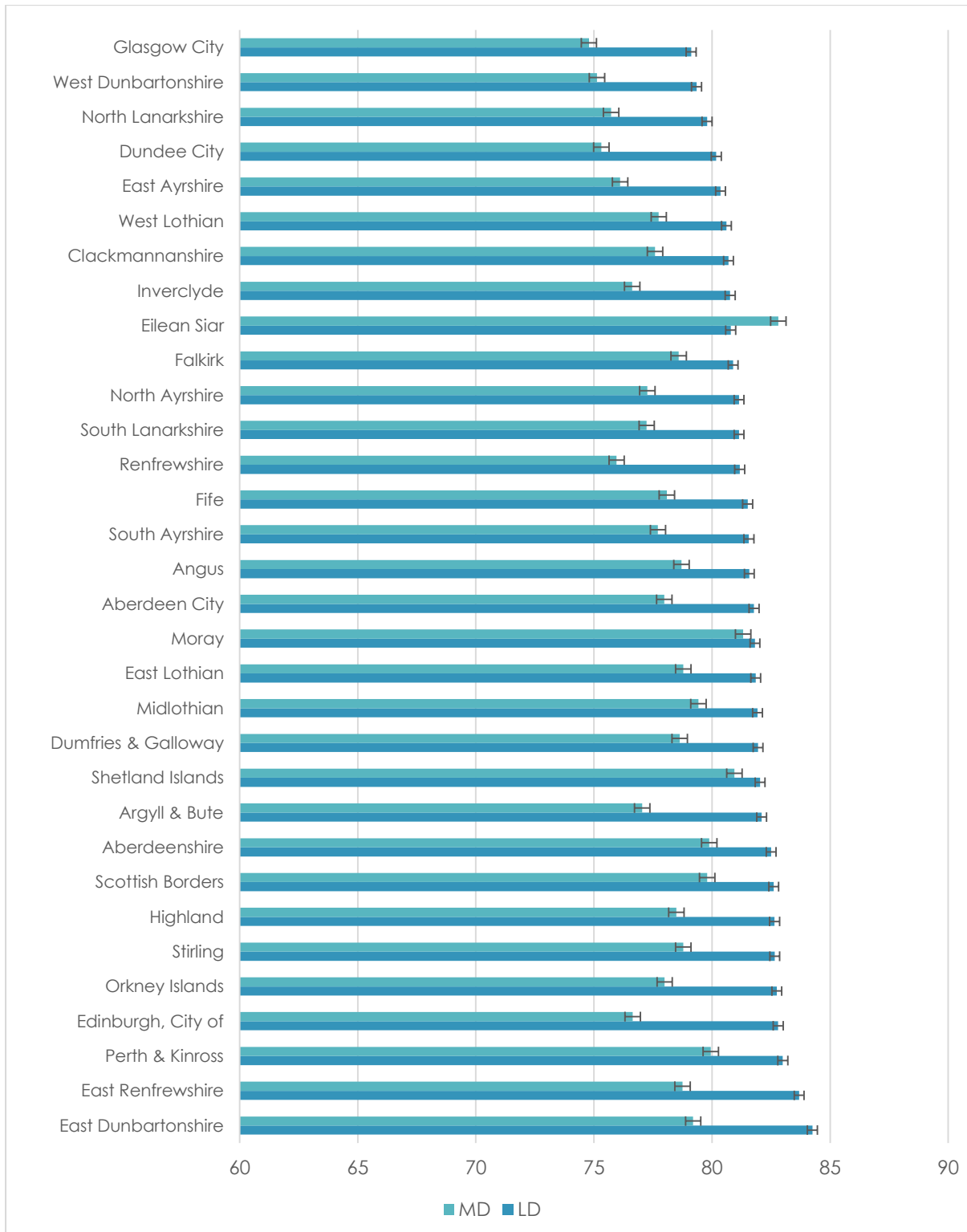


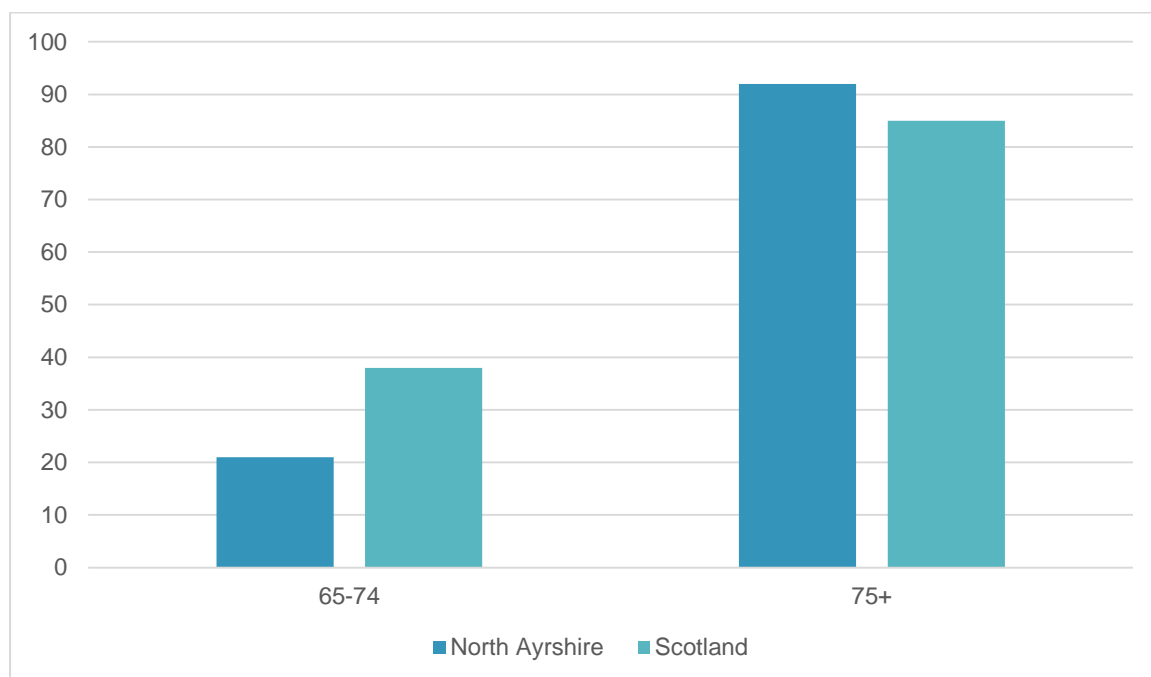
FIGURE 6: FEMALE LIFE EXPECTANCY IN COUNCIL AREAS FOR MOST DEPRIVED AND LEAST DEPRIVED 2009-2013 (SOURCE: NATIONAL RECORDS OF SCOTLAND)



Older People

83. Scotland, along with the rest of the UK, is facing a significant demographic shift within the general population over the course of the next 20+ years. The figures provided by the National Records of Scotland estimate a 38% increase of people aged 65-74 years and an 85% increase of people aged 75 years and over in the period 2012-2037. The comparative figures provided for North Ayrshire estimates a 21% increase in those aged 65-74 years and a 93% increase in those aged 75 years in the same period (Figure 7).

FIGURE 7: PERCENTAGE INCREASE IN POPULATION IN NORTH AYRSHIRE AND SCOTLAND 2012-2037 (SOURCE: NATIONAL RECORDS OF SCOTLAND 2012)



84. The rise in the number of older people will lead to an increase in frailty and diseases such as dementia, as well as long-term activity-limiting health problems or disabilities. This has consequences for the housing system in ensuring that suitable housing options and services are available to help older people live independently for as long as feasibly possible.

Adults and Children with Disabilities

85. The 2011 Census categorises a person with a physical disability as someone with a long-term activity-limiting health problem or disability.

86. According to the 2011 census, 1,040,000 adults in Scotland had a long-term activity-limiting health problem or disability which is around 1 in 5 (20%) of the population. North Ayrshire in comparison had 31,188 adults with a long-term activity limiting health problem or disability which is around 23% (almost 1 in 4) of the population, putting it slightly higher than the national average.

87. According to the 2011 census, 18,248 children aged 0-17 have a long-term illness or disability, affecting day to day activities 'a lot'. This equates to 1.75% of the total number in that age group. In comparison, North Ayrshire has 533 children aged 0-17 with a long-term illness or disability, affecting day to day activities a lot. With this number equalling 1.9% of the total population in that age group, again, North Ayrshire is higher than the national average (Scottish Census, 2011).

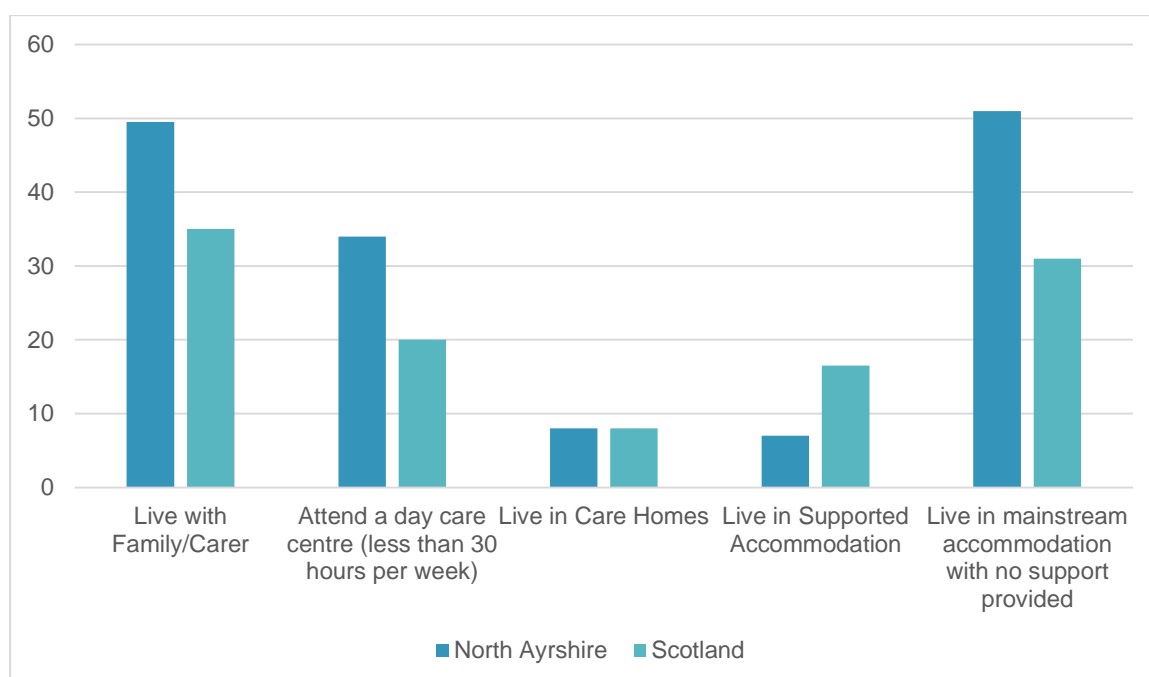
Learning Disability

88. In 2013, the population of adults with learning disabilities known to North Ayrshire Council was 551 people (NAHSCP, 2015).

89. In 2014, there were an estimated 4.7 adults in 1000 with learning disabilities, known to North Ayrshire Council. In comparison, the average number of adults with learning disabilities known to local authorities across Scotland was 6 in 1000, putting North Ayrshire Council below the national average (SCLD 2014).

90. Between 2013 and 2014, there was an increase of around 100 adults with learning disabilities known to North Ayrshire Council.

FIGURE 8: SUPPORT NEEDS OF ADULTS KNOWN TO NORTH AYRSHIRE COUNCIL WITH A LEARNING DISABILITY (SOURCE: NAHSCP 2015)



91. As Figure 8 shows, the number of adults living with a family/carer is higher in North Ayrshire than the national average.

92. North Ayrshire has a higher percentage attending a day care centre than the national average and fewer people with a learning disability living in supported accommodation than the national average.

93. More people with a learning disability live in mainstream accommodation, with no support provided in North Ayrshire than Scotland as a whole.
94. Significantly, two-thirds of the older people aged 60+ with learning disabilities also have additional mental disorders such as dementia. The ageing of the learning disability population, and the additional and focused support needs that they will require presents a future challenge.
95. In particular, it is reported that amongst adults with profound learning disabilities there is a higher incidence of epilepsy, sensory impairments, gastrointestinal, respiratory and mobility problems than in the population as a whole (NAHSCP, 2015).

Interventions

96. Overall, the population of North Ayrshire is forecast to decrease in the coming years, but the impact of this will be felt differently on each locality. Despite this falling population, there will be a significant rise in those over the age of 65.
97. 1 in 5 datazones in North Ayrshire are health deprived, which will put pressure on care and support services.
98. Although the number of people with disabilities in North Ayrshire is lower than the Scottish Average, the provision of appropriate housing and support services will need to be made.

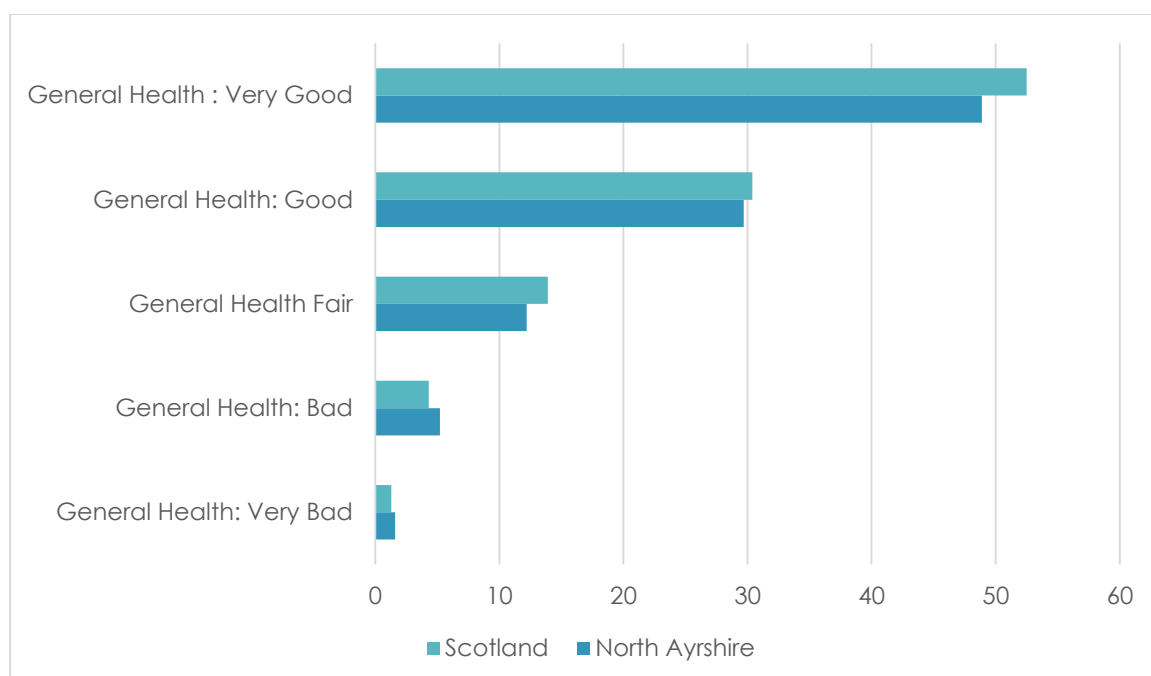
Independent Living and Specialist Provision

People with long-term health conditions

99. The Scottish Census 2011 shows that 32.7% of the population of North Ayrshire has one or more long-term health condition. This is just higher than the Scottish average of 29.9%.

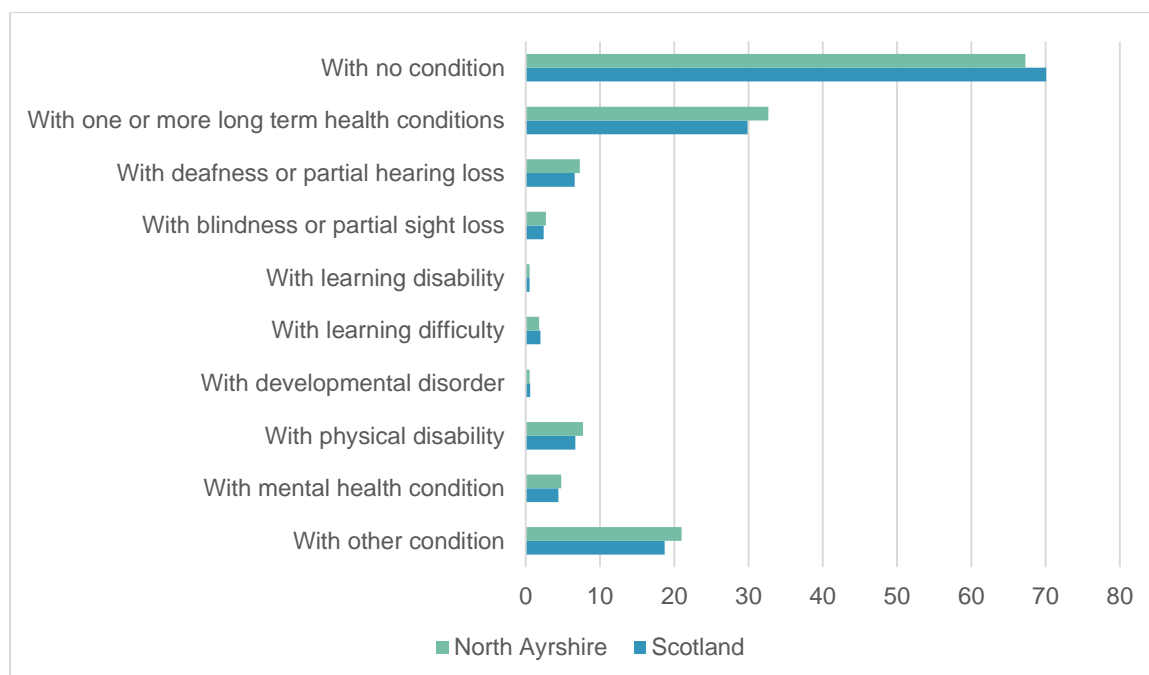
100. However, when asked to describe their health during the 2011 census 79.3% of local people described their health as either good or very good (Figure 9).

FIGURE 9: GENERAL HEALTH OF NORTH AYRSHIRE AND SCOTLAND (% OF POPULATION) (SOURCE: SCOTLAND CENSUS 2011)



101. The breakdown of health conditions in North Ayrshire is detailed in Figure 10.

FIGURE 10: LONG TERM HEALTH CONDITIONS IN NORTH AYRSHIRE (SOURCE: SCOTLAND CENSUS 2011)



102. North Ayrshire has a higher number of people with ‘deafness or partial hearing loss’ and ‘physical disability’ when compared with the Scottish average. The other categories were more or less in line with those for Scotland.

103. While the Scottish House Condition Survey 2014 results should be used with caution, due to the small base number (260 participants), the survey did suggest poorer health in North Ayrshire than the rest of Scotland. The survey states that 56% of all households surveyed had a long-standing illness or disability. Furthermore, it indicates that a higher proportion of all household types in North Ayrshire have long-standing health issues, as seen in Table 4.

Table 4: Long Standing Illness / Disability by household type

	Single Person Household 000's	Family Household 000's	Older / Pensioner Household 000's	All Households 000's
North Ayrshire 2014	25	23	15	63
Scotland 2014	1,029	788	586	2,403

Source: Scottish House Condition Survey 2014

104. The survey states that older / pensioner households are more likely to have long-standing health issues which reinforce the correlation between an ageing population and increased health issues.

Interventions

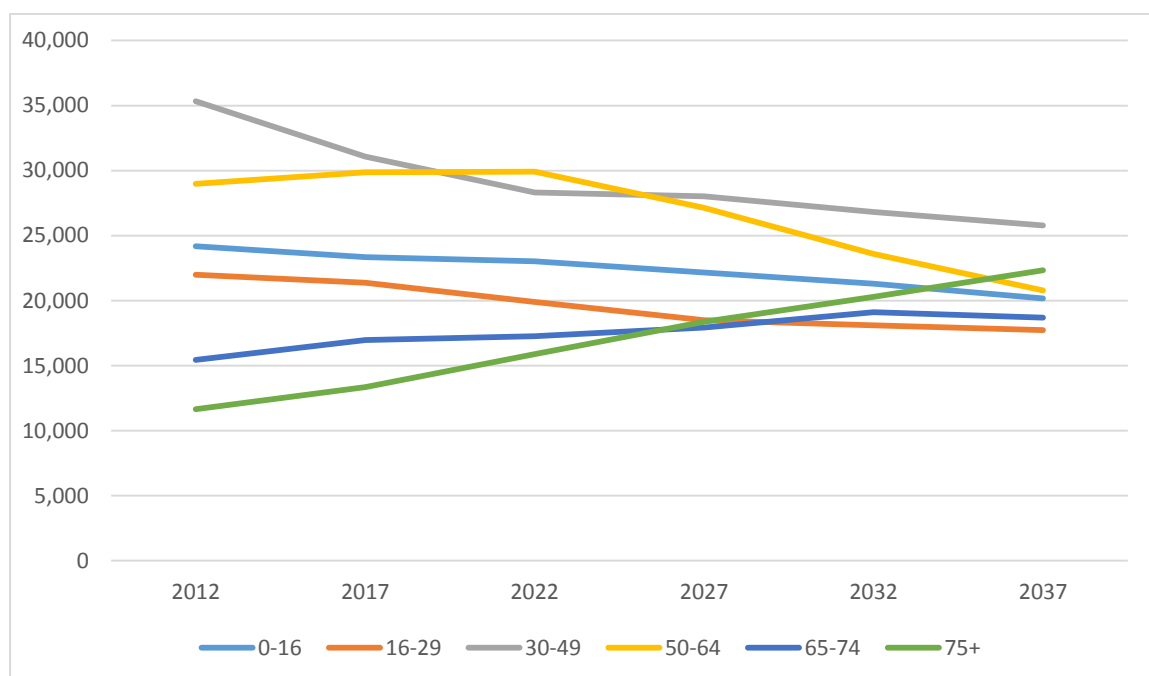
105. The evidence suggests that limiting long-term health conditions are higher in North Ayrshire than in the rest of Scotland. With the population projections showing an ageing population, this trend is likely to continue in the future.
106. As North Ayrshire has a higher than an average number of people with deafness or partial hearing loss, consideration may have to be given to the design of housing in order to better support these issues.
107. As at July 2016, there are 870 people on the North Ayrshire Housing Register with an accessible assessed housing need which represents 18% of total applicants.
108. Future housing provision should reflect the number of applicants with limiting long-term health conditions.

Older People

Demographic Change

109. Figure 11 sets out the population projections by age group for North Ayrshire from 2012 to 2037.

FIGURE 11: POPULATION PROJECTION (SOURCE: NATIONAL RECORDS OF SCOTLAND 2012)



110. Table 5 shows the population change by age group for the years 2012-2037.

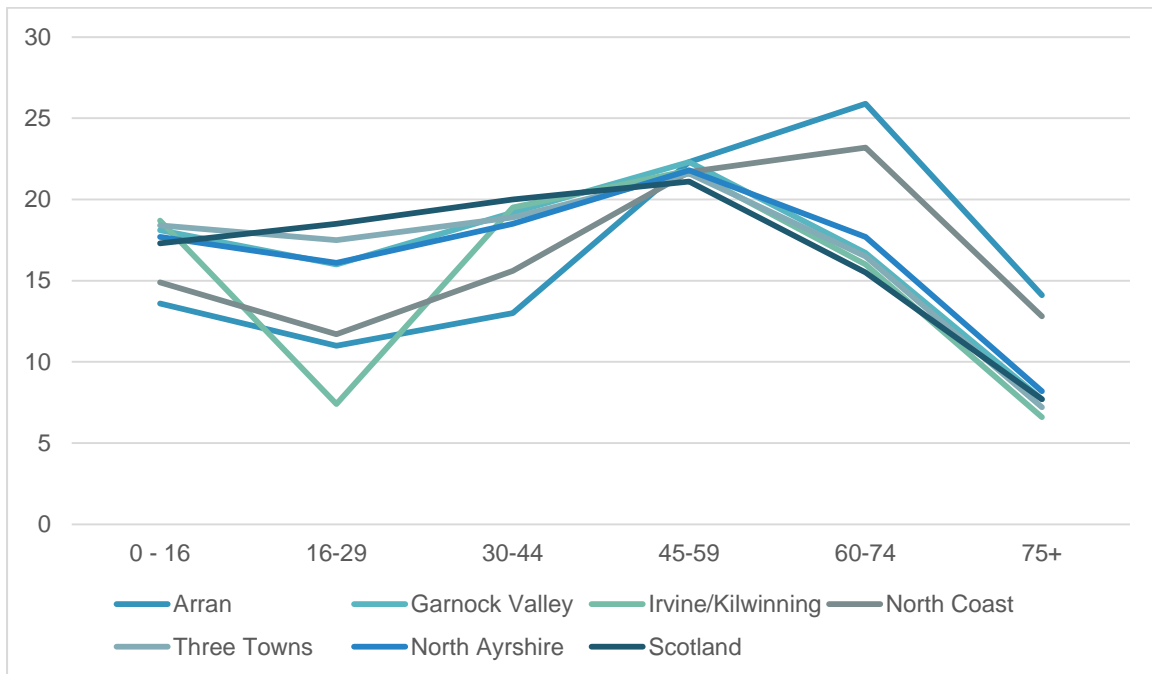
Table 5: Population Projection % change by age group 2012-2037

Age Group	0-16	16-29	30-49	50-64	65-74	75+	All
% Change	-17	-19	-27	-28	21	92	-8

Source: National Records of Scotland 2012

111. There are also differences in Housing Market Areas with Arran and the North Coast having a significantly larger percentage of older people than other areas. Figure 12 shows the percentage of the population in North Ayrshire’s Housing Market Area’s by age according to the 2011 Census.

FIGURE 12: PERCENTAGE OF POPULATION, BY AGE AND HOUSING MARKET AREA (SOURCE: SCOTLAND CENSUS 2011)



Future Need and Level of Provision

112. The Local Housing Strategy Older People Housing Survey 2016 provides an understanding of what older people want locally, with regards to housing. When asked if they would consider moving house within the next five years, the majority of respondents, most of whom live in sheltered or amenity accommodation, answered no. However, as sheltered housing tends to be the ultimate housing option for those living there, this is not a surprising result.

113. In a survey on older people's housing carried out by North Ayrshire Council in 2013, 88% of respondents said, they had no plans to move home at all. Of the remaining 12% who would consider a move within the next 5 years, over half

indicated a reference for accessible and amenity housing, with 6% specifically saying they would want to move to sheltered housing.

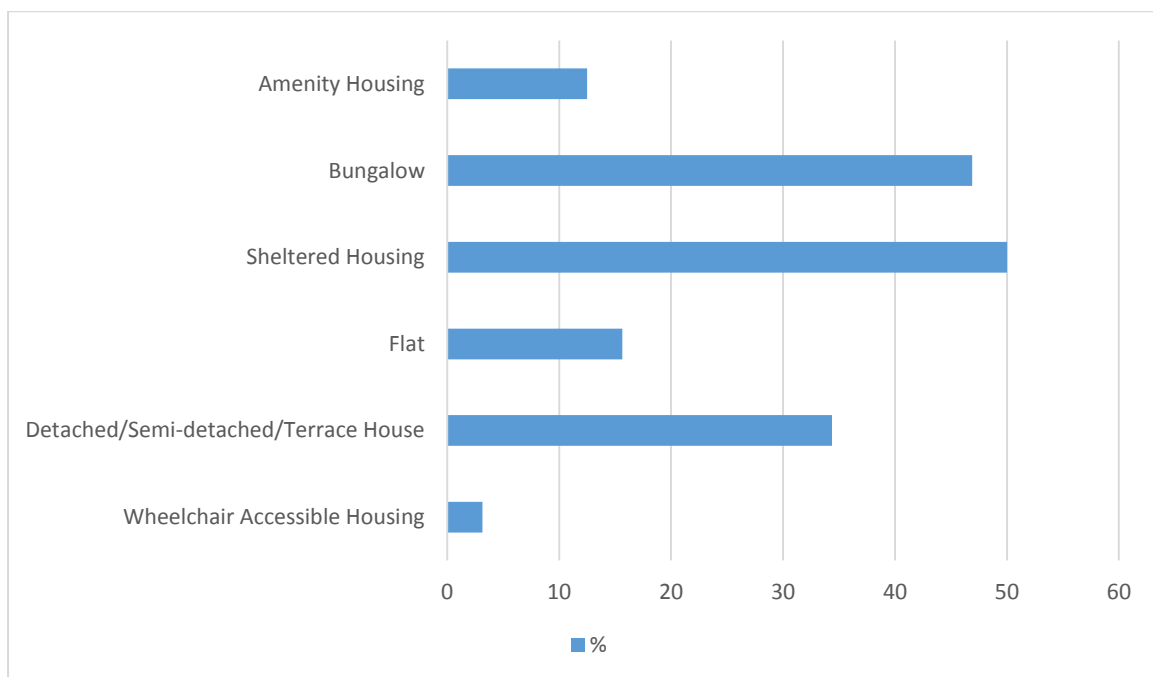
114. The main reasons those who would consider a move would do so were medical reasons, downsizing and requiring level access accommodation.

115. These respondents did not currently live in sheltered/amenity or level access accommodation.

116. While 74% said they would not be considering a move, the majority of the 14% who said they are, currently live in detached, semi-detached or terraced housing. The remaining 12% said they did not know if they were considering a move.

117. Figure 13 shows the future housing aspirations of those who would be considering moving house.

FIGURE 13: FUTURE HOUSING ASPIRATIONS OF OLDER PEOPLE IN NORTH AYRSHIRE (SOURCE: NORTH AYRSHIRE COUNCIL OLDER PEOPLES HOUSING SURVEY 2016)



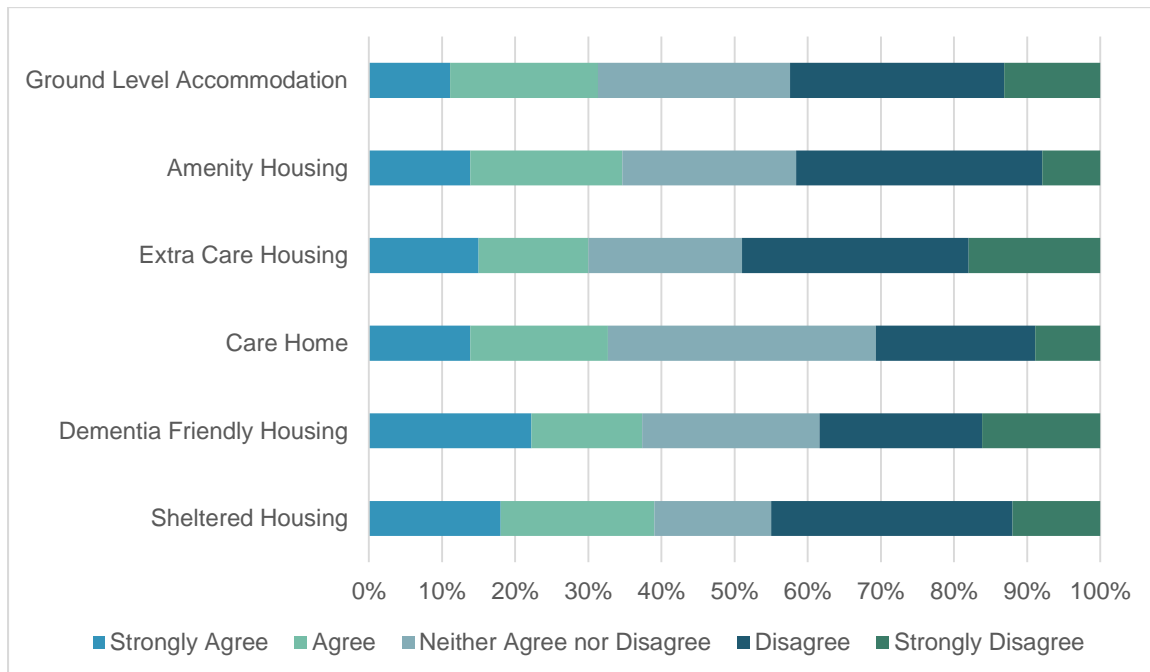
118. As can be seen in Figure 13, the vast majority of older people would like to move to some form of accessible accommodation, with 50% looking to move to Sheltered Housing.

Consultation

119. During the consultation that took place to inform this topic paper, views on current housing, health and care options for older people were gathered.

120. In relation to the supply of housing, local older people were asked whether they thought there was an adequate supply of the various different housing options (Figure 14).

FIGURE 14: SUPPLY OF HOUSING FOR OLDER PEOPLE (SOURCE: NORTH AYRSHIRE COUNCIL OLDER PEOPLES HOUSING SURVEY 2016)

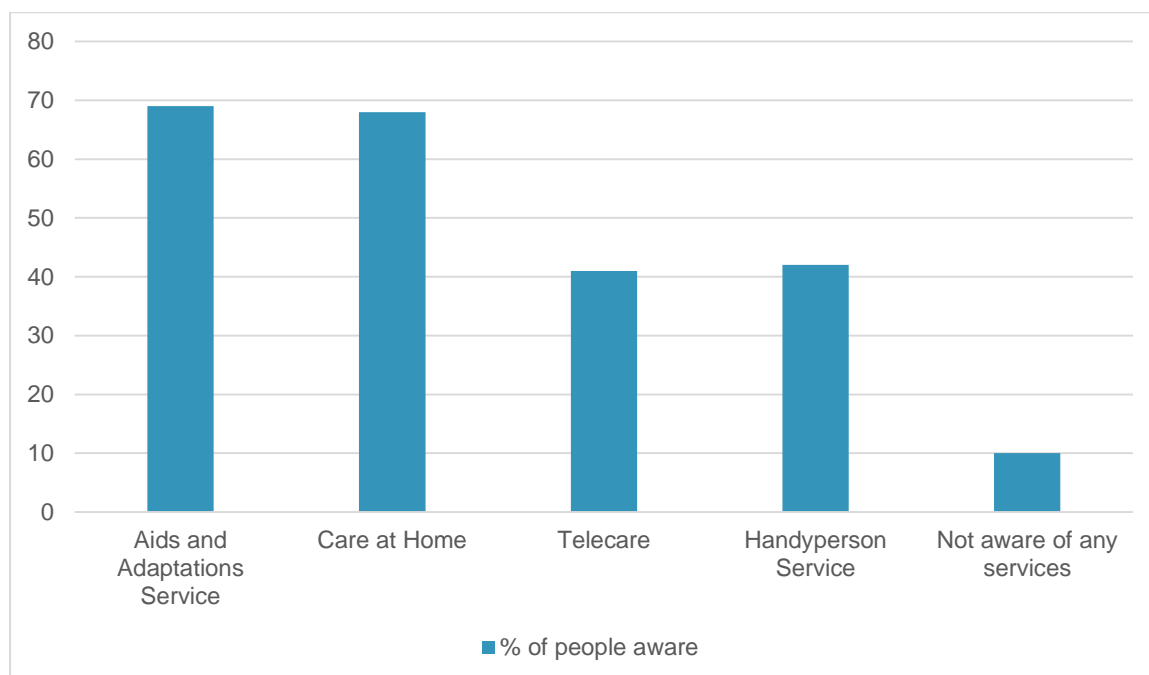


121. In all instances apart from care homes, there was a higher number of responses saying that they disagreed or strongly disagreed that there was an adequate supply of the various housing options.

122. The survey also showed that the vast majority of older people (74%) would prefer to remain in their own homes or communities, rather than institutional settings.

123. Figure 15 highlights the awareness levels of the support services provided by North Ayrshire Council.

FIGURE 15: PERCENTAGE OF RESPONDENTS AWARE OF NORTH AYRSHIRE COUNCIL SUPPORT SERVICES (SOURCE: NORTH AYRSHIRE COUNCIL OLDER PEOPLES HOUSING SURVEY 2013)



124. With regards to awareness of local support services, 69% of respondents said they were aware of the Aids and Adaptations Service and 68% were aware of the Care at Home service. Only 41% were aware of the telecare service, and 42% were aware of the handyperson service. This, alongside 10% responding that they had not heard of any of these services suggests that an awareness raising exercise of support services for older people would be beneficial.

125. 69% of people agree or strongly agree that these services are sufficient to allow people to remain in their homes for as long as possible, so it is essential that older people are aware that they are available.

126. When asked what they think is the best way of providing information on the availability of services to older people, focus group participants felt that Tenant Participation Groups and sharing information through Tenancy Matters (a free magazine issued quarterly to all Council tenants) are particularly effective. They also suggested using TV screens in council offices, Housing offices and Sheltered Housing complexes as well as using local libraries to display information. However, these methods are likely only to reach Council tenants, so every effort must be made to ensure people in all tenures are aware of services.

127. Participants also expressed a desire for information classes to show older people how to use computers and access the internet, allowing for information on services to be shared effectively online. Many participants saw an additional benefit in knowing how to use computers, as they could make internet calls to family members, thus helping to reduce isolation. This could also help reduce Council spend on marketing materials to advertise the services.

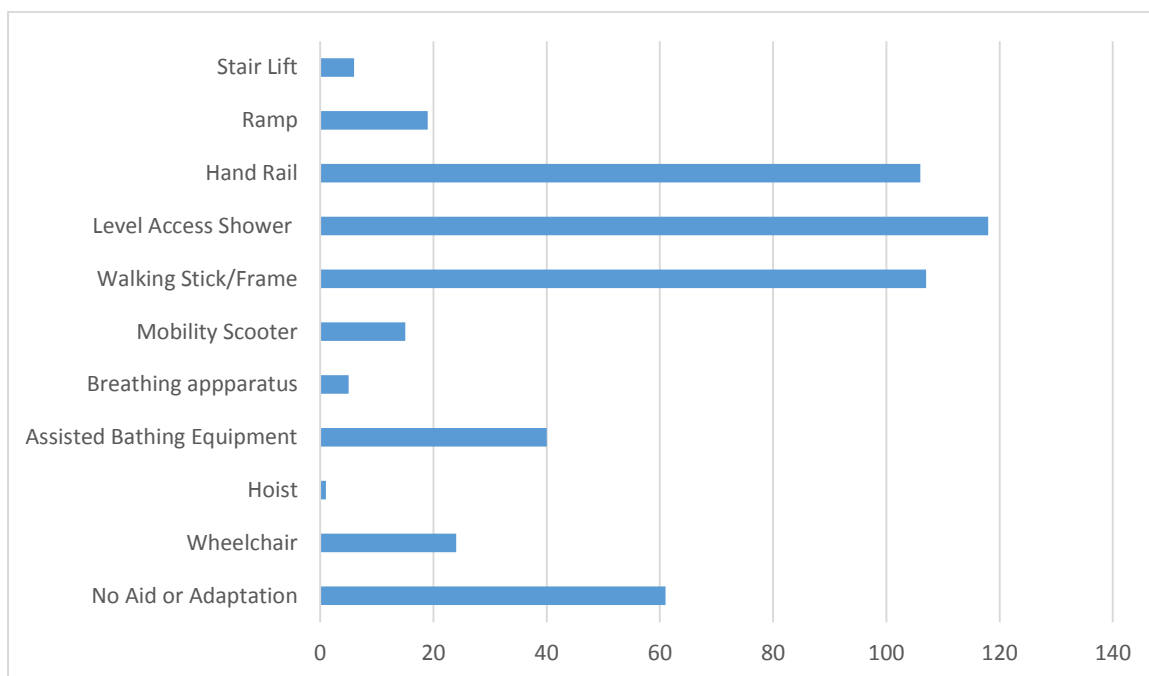
128. When discussing what factors could potentially result in older people having to move, or wanting to move house, focus group participants discussed the type of accommodation they would be seeking. Similar to the responses gathered from the surveys, level access, low maintenance homes and gardens with at least two bedrooms (to allow for carers/visitors) and ample space for equipment emerged as the most suitable type of accommodation. Participants also felt that mixed housing developments would bring a better sense of community and common areas could help reduce isolation and loneliness. It was also noted that it would be beneficial if new developments could be designed in such a way as to allow further adaptations in the future, to meet the changing needs of the person.
129. Stakeholder interviews with senior colleagues, as well as local housing associations, provided the opportunity to gain a greater insight into the housing needs and wants of older people. Stakeholders discussed the current housing provision and support, and the various housing options for older people.
130. All stakeholders considered the location of housing, and proximity to amenities and transport links vital. Respondents also felt it would be favourable to develop homes that are already wheelchair accessible, with wider doors and level access, thus reducing the need for adaptations and potentially unnecessary and disruptive house moves in the future.
131. It was highlighted during interviews that it has traditionally been assumed older people want 1 bedded properties. However, a second bedroom would be more advantageous as it would allow space for family members and even carers the opportunity to stay over, which in turn could provide support for the person and help reduce isolation and loneliness. Housing for older people that incorporates dementia design standards, and with a communal aspect was also considered of great importance.
132. During stakeholder interviews, Registered Social Landlord partners noted the different wants and demands of housing for older people in different localities; for example, in their experience, older people in Largs are more open to living in flatted accommodation, whereas, in the new development in Vineburgh, Irvine, no flats were incorporated as there was no demand for these and they would not be filled. Understanding the housing preferences of people in different areas is key to ensuring need and demand are appropriately met.

Providing Accessible Housing

133. Adaptations play an important role in preventing falls and other accidents within the home, reducing emergency hospital admissions, reducing admission to long term care and ensuring the quality of life.

134. The Older Peoples Housing Survey 2016 paints the picture of aids and adaptations currently used by people in North Ayrshire (Figure 16)

FIGURE 16: AIDS AND ADAPTATIONS IN HOUSING OF OLDER PEOPLE (SOURCE: NORTH AYRSHIRE COUNCIL OLDER PEOPLES HOUSING SURVEY 2016)



135. 118 people said they have a level access shower installed in their home, and 106 have a handrail.

136. The majority of those with equipment or adaptation in their home live in Sheltered or Amenity Housing and/or Council/Registered Social Landlord tenures.

137. Of the 61 who said they do not have any aids or adaptations in their home, 40 live in Council/Registered Social Landlord accommodation, and 20 own their own home.

138. However, it is not evident if any of these require equipment or adaptations in their home, or are waiting on any being installed.

139. It is unclear from this question who the aids and adaptations were provided by, if they were provided by North Ayrshire Council, Registered Social Landlords, health organisations or privately funded.

140. Of those who currently do not have any equipment or adaptations in their home, 12 are considering moving within the next 5 years and indicated a preference for a sheltered housing, amenity housing, and a bungalow or detached housing.

Interventions

141. Arran and North Coast have a higher proportion of over 60's, and the lowest proportion of under 30's in comparison with the other localities. This will create an in-balance between those needing care and those able to provide care in these areas.
142. Consideration should also be given to the different housing wants, and needs of each locality.
143. Over the last three years, older people have been consistent in their desire to stay in their own home for as long as possible. Therefore every effort must be made to support this. However, those who would consider moving are consistent in their desire and preference for amenity or sheltered accommodation.
144. Through consultation, it became apparent that accommodation that can be adapted in the future to meet changing needs would be most preferential.
145. The awareness of support services are high, and the majority of users find them beneficial so it is, therefore, important that all who could benefit from them are aware of them and able to access them.
146. Handrails and level access showers are the most commonly installed adaptations. Consideration should be given to installing these as standard in new developments, to alleviate the expense of installing retrospectively.

People with a Disability

Types of Disability

147. Under the Equality Act 2010, you are disabled “if you have a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities.”
148. The main categories of disability are:
 - **Physical disability** - pertains to total or partial loss of a person’s bodily functions (e.g. walking, gross motor skills, bladder control, etc.) and total or partial loss of a part of the body (e.g. a person with an amputation).”
 - **Mental illness** - “refers to a diagnosable condition that significantly interferes with an individual's cognitive, emotional or social abilities e.g. depression, anxiety, schizophrenia.”
 - **Learning disability** - “is a reduced intellectual ability and difficulty with everyday activities – for example, household tasks, socialising or managing money – which affects someone for their whole life.”

149. There are many other disabilities, disorders and genetic conditions that are associated with the categories noted above:

“Everyone with Down's syndrome...has some kind of learning disability, and so do many people with cerebral palsy. People with autism may also have learning disabilities, and around 30% of people with epilepsy have a learning disability.” (NHS, 2015).

Background

150. The Housing (Scotland) Act 2006 and the Disability Discrimination Act 1995 advise that disability related work applies to both physical and mental impairments. For example, the needs of an individual with autism should be considered the same as the needs of an individual with a physical disability. “The 2006 Act includes a general duty to provide assistance to make a house suitable for a disabled person where the house is or will be that person's only or main residence, or to reinstate a house that has been so adapted.”

151. Therefore, Housing Services provides assistance if an individual requires:

- an accessible house due to a health issue or disability that impacts on their ability to function independently within their current home; or
- a move to a different type or size of the home to alleviate some or all of the difficulties caused within their current home.

152. Consequently, for the purpose of this paper, a ‘disabled person’ refers to every child or adult who considers themselves to have a Long Term Illness, health problem or disability which limits their day to day activities. This includes individuals with a physical disability, mental health illness or learning disability. Associated disorders or conditions such as dementia have also been taken into consideration.

153. A demographic analysis carried out by North Ayrshire Council for “Housing Services – The Future Needs of Disabled People in North Ayrshire (2015)” produced the following findings:

- Life expectancy for residents in Scotland with a disability is inherently lower than the general population, although this gap is lessening;
- By 2035, the number of persons in Scotland with a Long Term Illness/Disability will increase by 8%; compared with a decrease of -6% in North Ayrshire. Even though the local disabled population will decline, the number of local residents aged 65+ years with a Long Term Illness/Disability is estimated to increase by 42% (from 2010);
- Dementia is one of the main causes of a disability in later life and one of the leading health challenges worldwide. The number of local residents with dementia is increasing, and this trend is expected to continue due to the rapidly increasing ageing population;

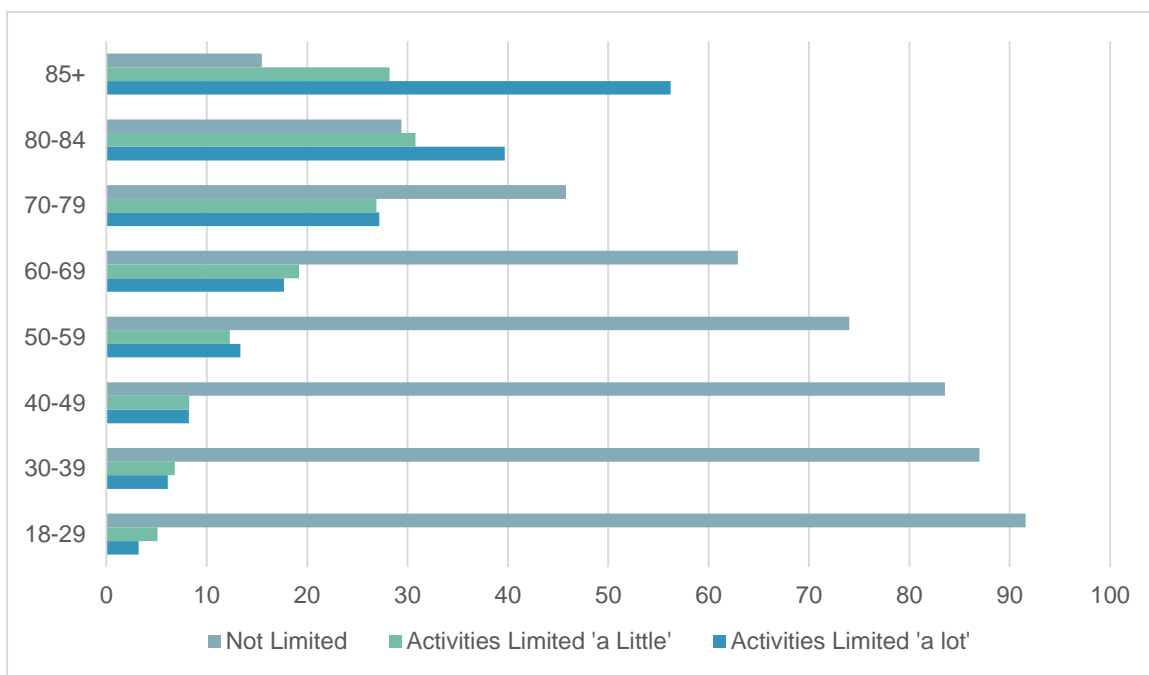
- Nearly half of residents in Irvine (49%) and the Three Towns (47%) have a Long Term Illness/Disability which limits their daily activities or the work they can do;
- The local social rented sector has a higher proportion of people with a Long Term Illness/Disability compared with other housing tenures;
- The most common disability amongst local residents is mobility/physical disability.

154. The study, however, also identified a significant lack of available and comparable information at a local and national level in relation to disabled individuals.

Adults with disabilities

155. Figure 17 provides a breakdown of the number of adults with a long-term illness or disability, by age group.

FIGURE 17: PERCENTAGE OF ADULTS WITH A LONG TERM ILLNESS OR DISABILITY IN NORTH AYRSHIRE (SOURCE: SCOTLAND CENSUS 2011)

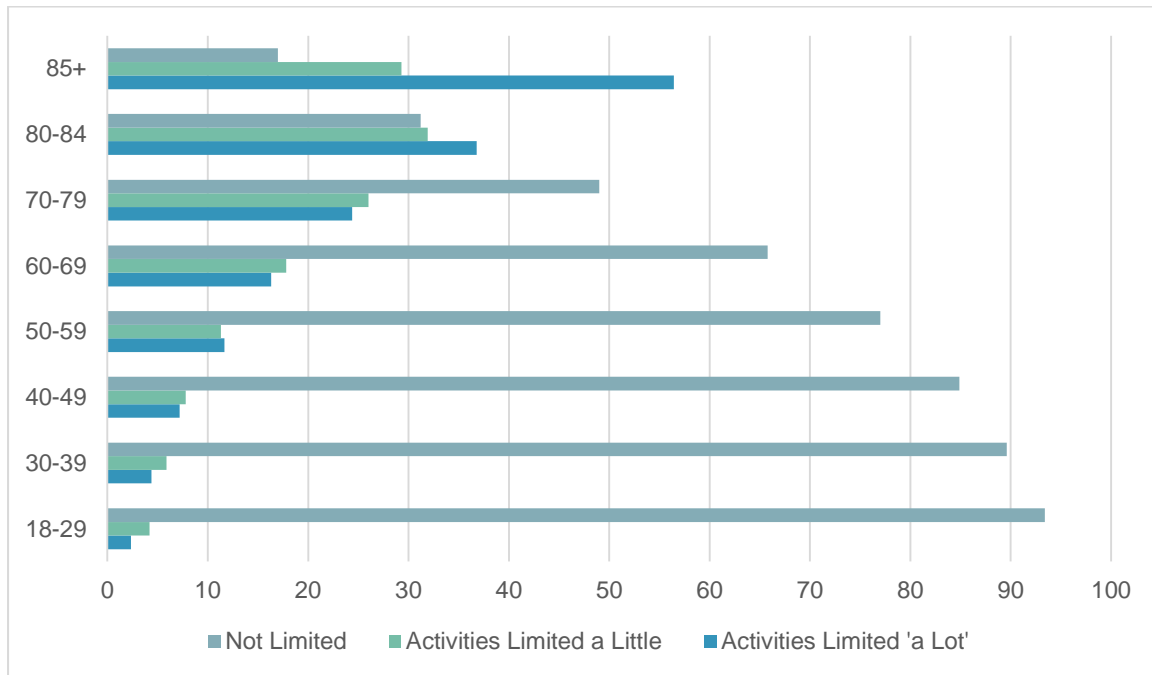


156. The age group with the highest number of people with their day to day activities limited 'a lot' are in the 60-69 age group (17.7%) and 70-79 age group (27.2%). Unsurprisingly, as age increases, the percentage in each group with day to day activities limited 'a lot' also increases.

157. Over 84% of those aged over 85 are limited in their day to day activities either 'a lot', or 'a little'. As the ageing population increases in the coming years, this will continue to rise putting pressure on the resources to support elderly disabled people across North Ayrshire.

158. The picture across Scotland is relatively similar; however, the percentage of the total population with a disability or long-term illness across North Ayrshire is 2.2% higher than the percentage of total population across Scotland, as seen in Figure 18.

FIGURE 18: NO. OF ADULTS WITH A LONG TERM ILLNESS OR DISABILITY IN SCOTLAND (SOURCE: SCOTLAND CENSUS 2011)



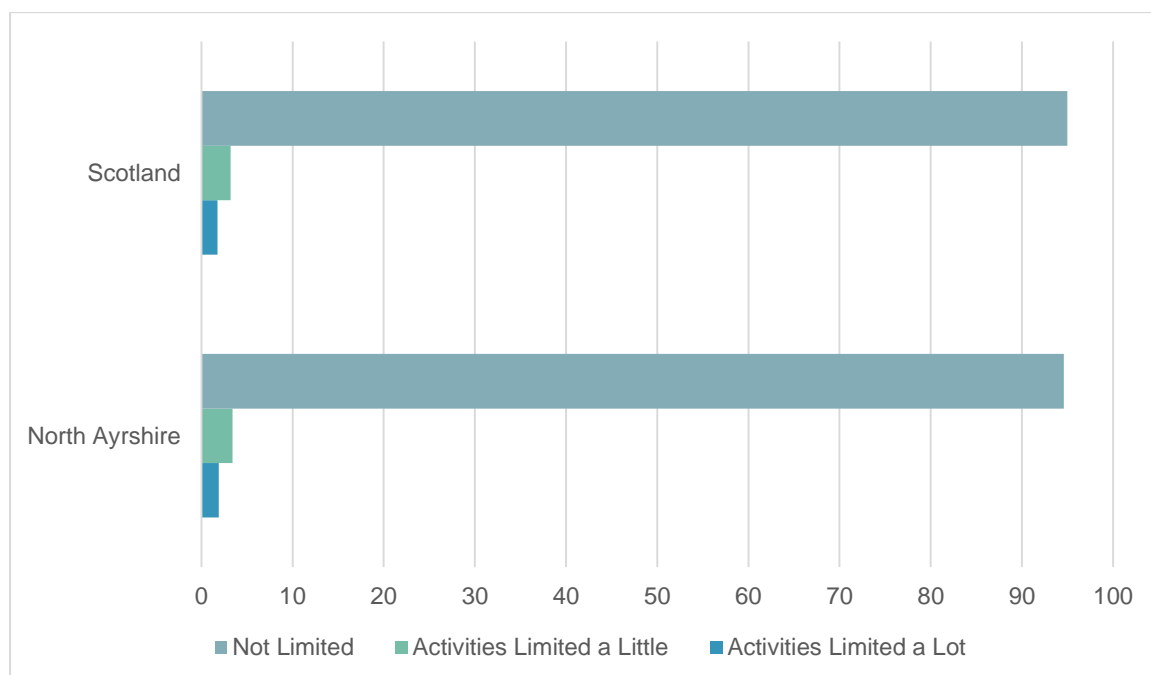
Children with disabilities

159. The United Nations Convention on the Rights of the Child has been signed by nearly every country in the world, including the UK. It defines a child as being a person under the age of 18.

160. The convention states in Article 23: 'If you are disabled, you have the right to special care and education and to be included in the community.'

161. Figure 19 displays the number of children with a disability in Scotland and North Ayrshire.

FIGURE 19: NO. OF CHILDREN WITH A DISABILITY IN NORTH AYRSHIRE AND SCOTLAND (SOURCE: SCOTLAND CENSUS 2011)



162. In North Ayrshire, 533 (1.9%) children aged 0-17 have a Long Term Illness or disability that limits their day to day activities ‘a lot’.

163. The age group with the highest level of day to day activities limited ‘a lot’ is age 10-14, with 215 (2.68% of the total number of children in this age group across North Ayrshire).

164. In Scotland, 18,248 children aged 0-17 have a long-term illness or disability, which at 1.75% of the total number in that age group, is slightly less than North Ayrshire.

165. The age group with the highest level of day to day activities limited ‘a lot’ is age 10-14 with 6498, (2.2% of the total number of children in this age group across Scotland).

166. When compared with Scotland as a whole, North Ayrshire has a slightly higher number of children with disabilities.

Housing for people with disabilities

167. As part of the Annual Return on the Charter, all housing associations provide information on the number of current tenants, housing applicants and new tenants that consider themselves to have a disability. This, however, is not backed up by any medical diagnosis. The numbers in each category can be seen in Table 6.

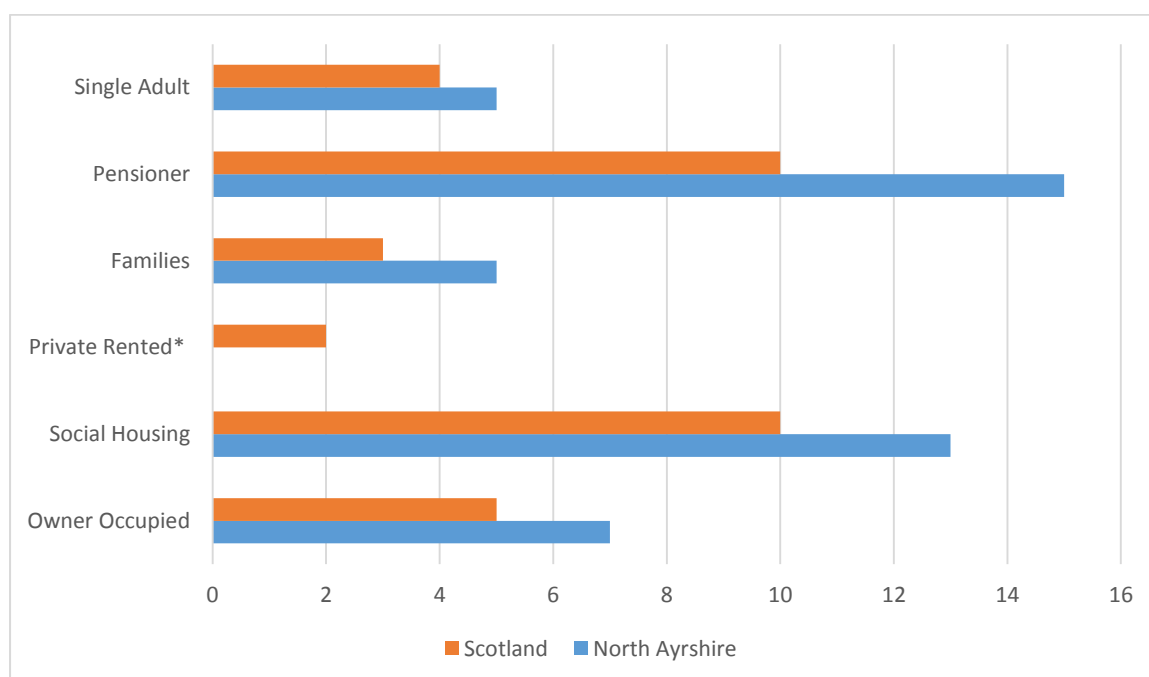
Table 6: Number of people that consider themselves to have a disability

	Existing Tenants	Applicants on housing list	New tenants
2014/15	345	1559	353
2015/16	329	1074	180

Source: North Ayrshire Council Annual Return on the Charter 2016

168. Figure 20 provides information on the type of housing which causes restrictions for the Long Term Sick or Disabled.

FIGURE 20: PERCENTAGE OF DWELLINGS CONTAINING A LONG TERM SICK OR DISABLED INDIVIDUAL WHO IS RESTRICTED BY THEIR DWELLING (BY TENURE AND HOUSEHOLD TYPE) (SOURCE: SCOTTISH HOUSEHOLD CONDITION SURVEY 2012-2014)



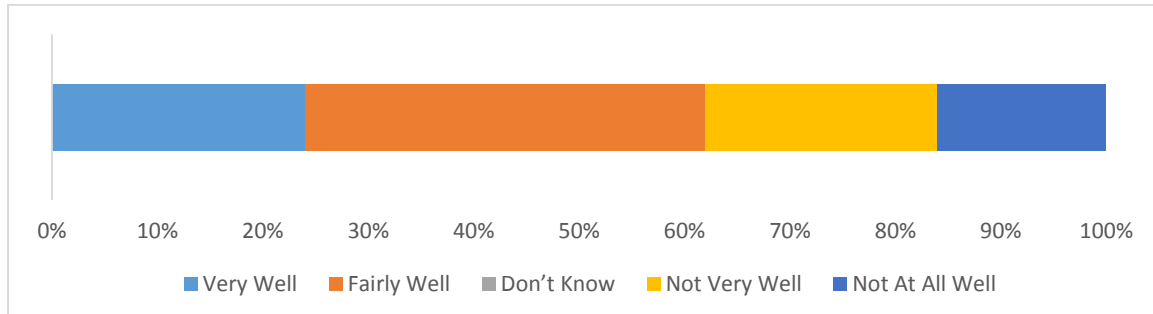
*NO INFORMATION AVAILABLE FOR NORTH AYRSHIRE

169. 13% of properties are social housing, but a higher than average 7% of restrictions are in owner-occupied dwellings. Pensioners also face the biggest obstacles as 15% of that restricted fall into this category, a higher rate than the average for Scotland of 10%.

170. The Local Housing Strategy Disabled People Housing Survey 2016 provides a small snapshot of housing needs for people living with disabilities in North Ayrshire, as only 74 people responded.

171. When asked if their current home meets their needs, most said their home met their needs very well or fairly well (Figure 21)

FIGURE 21: HOUSING THAT MEETS PEOPLE'S NEEDS (SOURCE: NORTH AYRSHIRE COUNCIL DISABLED PEOPLES HOUSING SURVEY 2016)



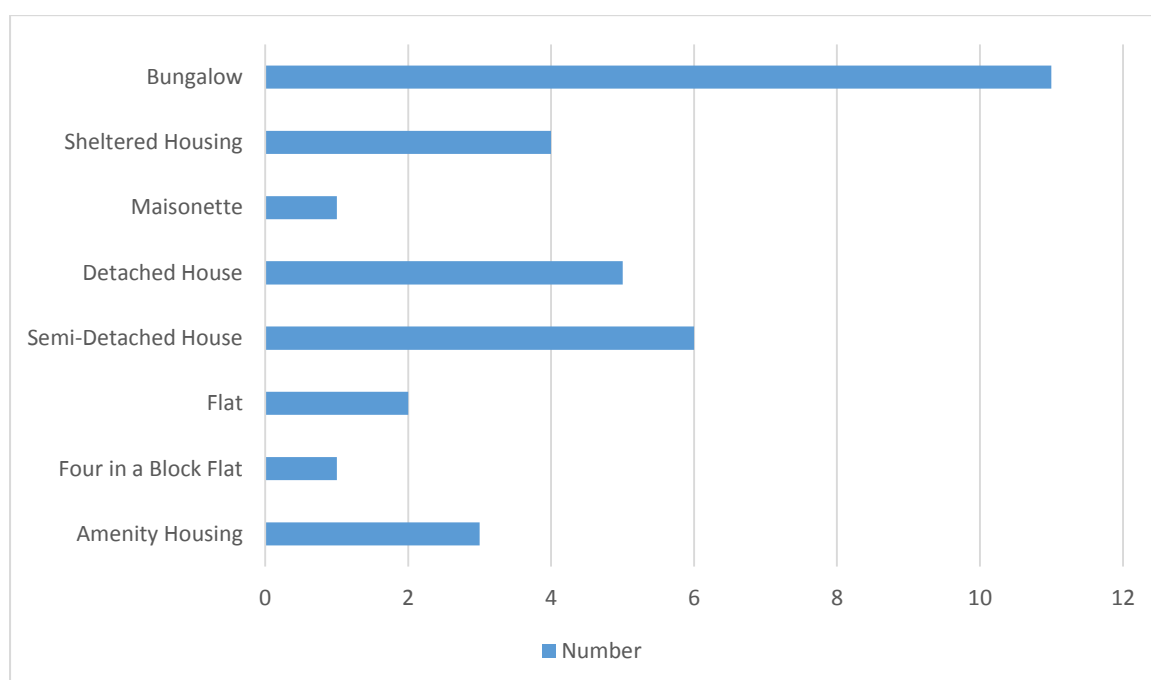
172. Of those who said their current home does not meet their needs (14 people), 7 rent their house from North Ayrshire Council or a Registered Social Landlord, 2 rent from a private landlord, 4 own their own home and the remaining 1 lives with family/friends. Nine of the 14 live in a semi-detached or terraced house.

173. When asked if they are considering moving home in the next 5 years, 14 answered yes, and 13 answered no. Of those who said they are considering moving, the majority cited medical reasons and downsizing for this decision.

174. When asked what type of accommodation they would like to move to, most people said Bungalow. Figure 22 outlines the future housing aspirations of people living with disabilities who indicated they would like to move in the next 5 years.

175. The sample size from this survey makes it difficult to draw conclusions regarding the housing needs of people with disabilities. As such, further work will be required during the lifetime of the Local Housing Strategy to ascertain the housing needs of this group.

FIGURE 22: FUTURE HOUSING ASPIRATIONS OF PEOPLE LIVING WITH DISABILITIES (SOURCE: NORTH AYRSHIRE COUNCIL DISABLED PEOPLE HOUSING SURVEY 2016)



176. It should be noted that people could select more than one option to this question. In total, 12 people indicated they would like to move to a Bungalow, Sheltered Housing, Amenity Housing or Wheelchair Accessible Housing. Further characteristics of the respondents to this question include:

- 75% currently live in semi-detached or terraced housing
- 17% currently live in a 4 in a block
- 68% said their home no longer meets their needs
- 75% require level access
- 50% are downsizing

177. All 12 said they would consider moving to a North Ayrshire Council home, with 8 of those also saying they would consider a Housing Association or Charitable Trust home.

178. During the focus group discussions, it emerged that modern, level access and low maintenance properties were the ideal accommodation type.

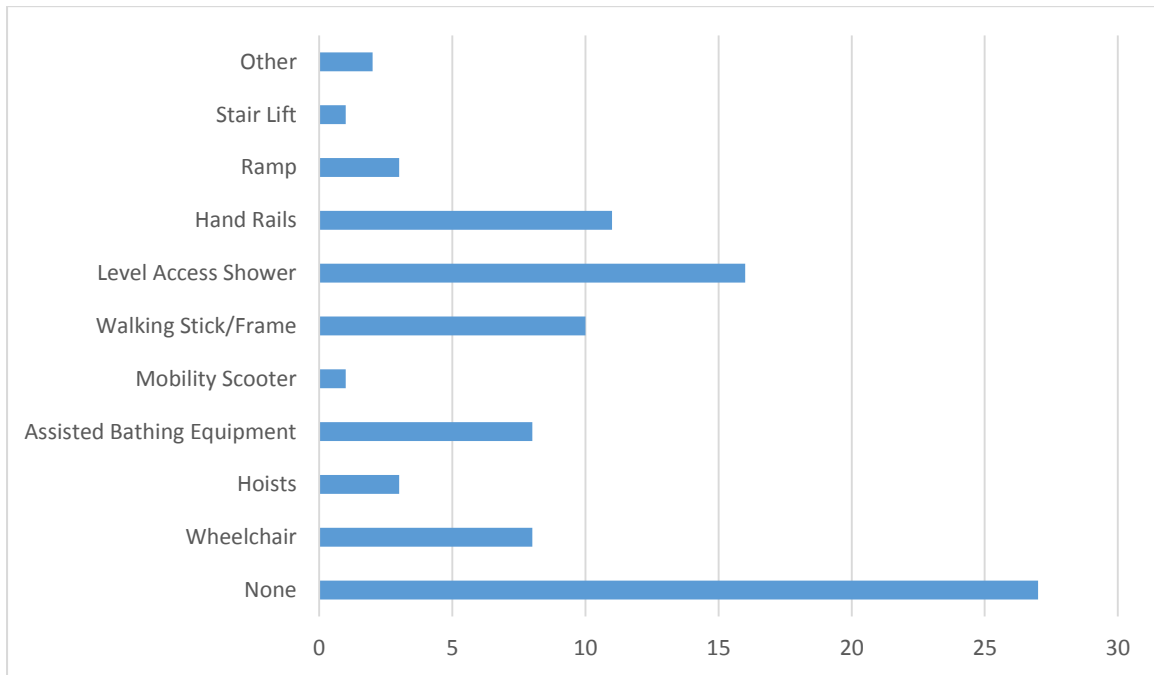
179. When asked about available support, 63% of respondents were aware of the aids and adaptations service, and 59% were aware of the care at home service. Only 53% were aware of the telecare system and 38% aware of the handy person service. This suggests an awareness raising exercise is required to promote these services.

180. Stakeholder interviews highlighted the various issues in providing appropriate housing for people with learning disabilities. People with learning disabilities have

varying and complex needs, and therefore a 'one size fits all' approach cannot be adopted.

181. There are some elements that could be implemented in housing that is being specifically designed for someone with learning disabilities as a standard practice, such as secure entry systems, dementia-friendly design, and incorporating the use of assistive technology throughout the home as well as fully soundproofing.
182. There is a tendency to house people with learning disabilities individually, however, for many, supportive accommodation models could be beneficial. Ultimately, there needs to be a balance between providing support and encouraging independence.
183. Focus Group discussions highlighted the need for a common sense approach to fixtures and fittings within homes, such as mains light switches beside the bed, as well as delayed light switches and ample sockets for equipment.
184. It was also suggested that varnished woodwork, such as skirting boards and door surrounds, would be more appropriate than painted woodwork, as it is less likely to be chipped and scratched by wheelchairs.
185. The Disabled People Housing Survey 2016 also asked if people have any equipment or adaptations in their home. However, this survey only specified equipment provided by North Ayrshire Council, so it is not evident if any equipment or adaptations have been provided by other organisations or funded privately.
186. As shown in Figure 23, similar to the results from the Older People's Housing Survey, most people have a level access shower installed in their home.

FIGURE 23: AIDS AND ADAPTATIONS PROVIDED BY NORTH AYRSHIRE COUNCIL FOR PEOPLE LIVING WITH A DISABILITY (SOURCE: NORTH AYRSHIRE COUNCIL DISABLED PEOPLE'S HOUSING SURVEY 2016)



187. Of the 27 people who said they do not have any equipment or adaptations in their home, eight said their current home does not meet their needs. 13 also said they are considering moving within the next 5 years, with all indicating a preference to move to sheltered housing, amenity housing, wheelchair accessible housing or a bungalow.
188. Due to increased demand for services requiring equipment and adaptations to support people living with disabilities in their own home, the Health and Social Care Partnership exceeded their annual budget for Physical Disability (NAHSCP 2016b).
189. This highlights the growing need to provide future proof housing, where adaptations and equipment are already either part of the design or are easily added when needed.

Community Support

190. Social inclusion is crucial to promoting independence amongst people living with disabilities.
191. Through conducting stakeholder interviews with the Health and Social Care Partnership, the importance of this was evident. However, the barriers became apparent.
192. There does not appear to be an issue with the provision of activity groups, with stakeholders saying that the provision of groups for adults and children with physical and learning disabilities is good throughout North Ayrshire. However, accessing these groups can be problematic due to transport restrictions. In many cases, access to leisure and recreational activities can be made all more difficult due to issues around navigating buildings internally and accessing toilet facilities.
193. From the perspective of children with disabilities, activities in which the whole family can participate are lacking.
194. Segregating activities for people with disabilities was raised as an issue. Although there are many activity groups for people with disabilities, they are predominantly only for people with disabilities. There needs to be more integration between people with disabilities (particularly learning disabilities, both children and adults) as this can help them develop skills they need to become more independent and feel safer in the community. Stakeholders see improving integration, as a corporate responsibility.

Interventions

195. Predictably, the number of adults with a long-term illness or disability increases with age. With the number of older people in North Ayrshire forecast to grow, adequate housing solutions will be required to meet the predicted need.

196. North Ayrshire has a slightly lower than the national average number of children with disabilities. However, there is still a significant number, and consideration will need to be made in providing housing that is suitable for their needs, as well as their family's needs, now and in the future. Better planning and foresight will be required to make sure the housing needs are adequately met before a crisis point is reached.
197. Pensioners, people living in social housing and people who own their home are amongst those whose home restrictive due to their condition. It is, therefore, important that these groups specifically are able to access the support they require to ensure their home is suitable for their needs.
198. In a similar theme to the housing preferences of older people, people with a disability indicated a preference for amenity housing, as well as bungalows or level access properties.
199. Support services are vital to ensuring people can live independently in their own home, or a home-like setting so it is important that all who can benefit are aware of and able to access them, particularly handyman and telecare services.
200. Consideration should also be given to housing solutions for people with learning disabilities. There are design elements that can be implemented to help those with a learning disability live independent safely in their own home.
201. Activity groups can help children and adults with disabilities develop skills to live independently, improving their social skills and confidence. Stakeholders view improving the integration of these activity groups as a corporate responsibility. Working together with Council partners to improve access to activity groups can help meet this responsibility.

Accessible/Adapted Housing

Aids and Adaptations

202. Housing adaptations play a major role in enabling older people and disabled people to live independently in their own homes. Adaptations encompass a broad range of changes to the fabric of a building to enable people of all ages who have been affected by injury or suffer from ill health, or the effects of ageing, to carry out ordinary activities of daily life. The Scottish Government defines an aid or adaptation as:

“aid or adaptation” means any alteration or addition to the structure, access, layout or fixtures of accommodation, and any equipment or fittings installed or provided for use in accommodation, for the purpose of allowing a person to occupy, or to continue to occupy, the accommodation as their sole or main residence;” (Scottish Government, 2015h)

203. They can range from simple alterations such as grab rails, lever taps, and non-slip flooring; to more complicated, structural alterations, such as an extension to a house, or a through floor lift.
204. Adaptations can: prevent hospital admissions; allow people to return home safely after a period in the hospital, and ultimately minimise the duration of time spent in the hospital. Providing adaptations at the right time can be life changing for an individual, and for their family members or carers.
205. From April 2015, the Housing Adaptations function was delegated to the new Integration Joint Boards. It is hoped that by integrating Health and Social Care Services, resources will be used more effectively and efficiently. As a result, services should be better placed to meet the needs of the increasing number of people with longer term, and often-complex needs, many of whom are older. The delegation of the Adaptations Process to Health and Social Care Services presents the opportunity to adopt one of the Adaptation Working Group's key recommendations; ensuring a person-centred approach is at the heart of the revised Adaptations Process.
206. The new streamlined service will put the individual at the centre of the Adaptations Process, and ensure that those in the greatest need will be provided with appropriate adaptations timeously and efficiently. The installation of appropriate adaptations will ensure independent living where possible and enable our existing tenants to safely remain in their own homes and communities.
207. The provision of private sector housing equipment or adaptations is covered within the 'Scheme of Assistance'.
208. The Scottish Government has issued the Guidance on the Provision of Aids and Adaptations (Scottish Government, 2009) which encourages partnerships to:
- Place the user and carer at the centre of provision;
 - Ensure a consistent approach to assessment and provision of services, including equipment and adaptations;
 - Ensure accurate and accessible information on equipment and adaptations is available to all service users and their carer's.

The North Ayrshire Picture

209. The Scottish House Conditions Survey 2012-14 found that 22% of the social housing stock in North Ayrshire currently has aids or adaptations installed.
210. Where adaptations are needed, Table 7 has highlighted the age and type of property.

Table 7: Dwellings with Adaptations by dwelling characteristics and tenure

Local Authority	% of LA	Dwellings with Adaptations by Dwelling Characteristics				Dwellings with Adaptations by Tenure	
		Age of dwelling		House or flat		Owner-Occupied	Social Housing
		Pre-1945	Post 1945	House	Flat		
North Ayrshire	22%	23%	24%	21%	30%	16%	37%
Scotland	20%	18%	22%	18%	27%	17%	31%

Source: Scottish House Conditions Survey 2012-2014

211. As can be seen from this data, the provision of adaptations is slightly higher in properties build post-1945.
212. The Scottish House Conditions Survey shows that in North Ayrshire, 5% of properties are in need of adaptations, which is in line with the Scottish average of 5% (Table 8).

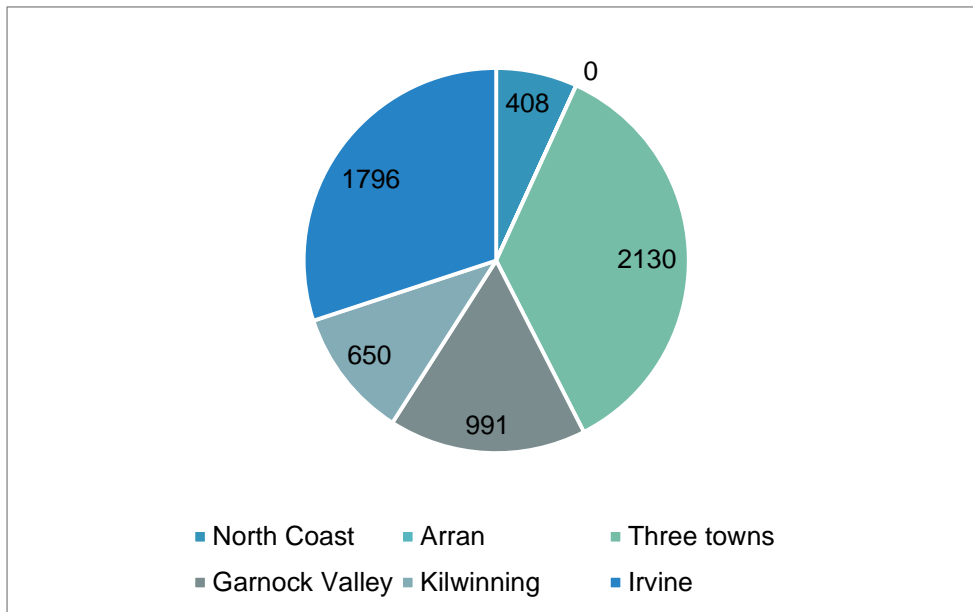
Table 8: Properties Requiring Adaptations

Local Authority	Owner-occupied	Social Housing	Private Rented
North Ayrshire	-	5%	-
Scotland	2%	5%	1%

Source: Scottish Household Condition Survey 2014

213. Figure 24 provides an illustration of the number of adapted properties across the partners of the North Ayrshire Housing Register.

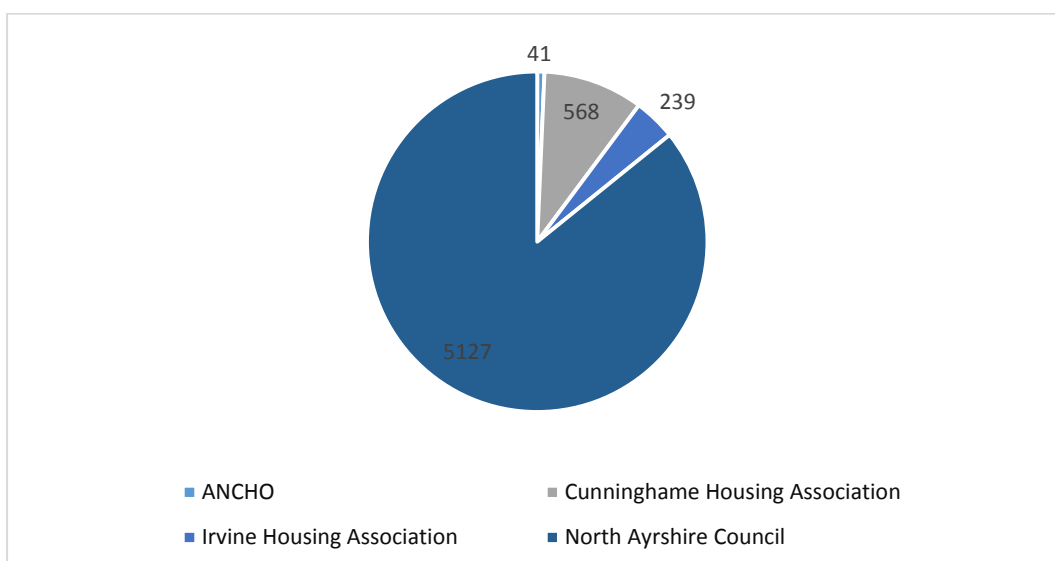
FIGURE 24: NUMBER OF ADAPTED PROPERTIES (BY LOCALITY) (SOURCE: NORTHGATE)



214. There are 5975 adapted social housing properties in total, which is 35% of the total housing stock across the partners. The highest proportion of adapted stock is in the Three Towns (36%) followed by Irvine (30%) and Garnock Valley (17%). 49% of these properties have one adaptation, 26% have two adaptations, 12% have three adaptations, and 7% have four adaptations, 6% have five or more adaptations.

215. Figure 25 provides a breakdown of the housing providers responsible for these adapted properties.

FIGURE 25: NO. OF ADAPTED PROPERTIES PER HOUSING PROVIDER ON THE COMMON HOUSING REGISTER (SOURCE: NORTHGATE)



216. Table 9 outlines the total number of stock managed by these social landlords.

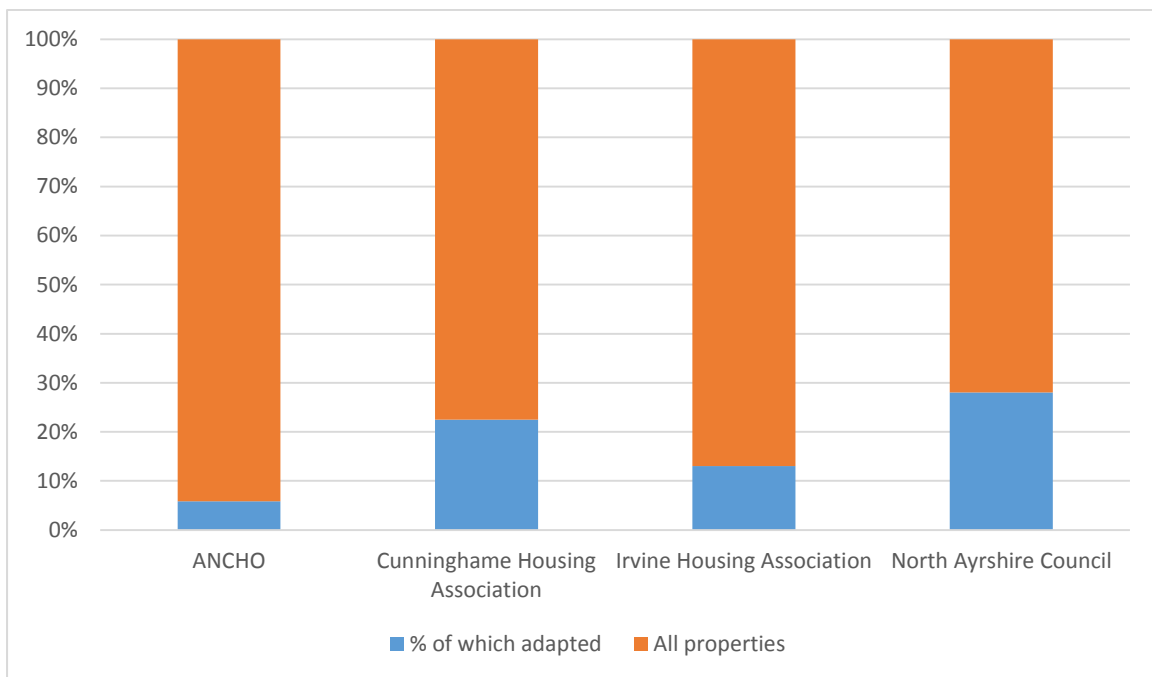
Table 9: Total Number of stock managed by registered social landlords on the common housing register

Registered Social Landlord	Total Stock (Units)
ANCHO	661
Cunninghame Housing Association	1942
Irvine Housing Association	1625
North Ayrshire Council	13,097

Source: Social Housing Register 2016

217. Figure 26 outlines what percentage of their stock is currently adapted.

FIGURE 26: % OF REGISTERED SOCIAL LANDLORD STOCK WITH ADAPTATIONS (SOURCE: NORTHGATE/SOCIAL HOUSING REGISTER 2016)



218. Cunninghame Housing Association and North Ayrshire Council have the largest portfolio of stock in North Ayrshire, so it, therefore, makes sense that they have the largest proportion of adapted stock.

219. From the housing allocation data, we can see that there was a total of 4,773 lets made during 2014/15 and 1,366 (29%) of these lets were made to properties which have some form of aid/ adaptation. This suggests that there is significantly more adapted stock than people requiring adapted properties on the housing register and many allocations of adapted properties are made to applicants who

do not require adaptations. Again, data limitations mean that we cannot identify which adaptations are present or required.

220. Stakeholder interviews reaffirmed that overall; the provision of aids and adaptations is adequate at providing support to remain independent. However, stakeholders from the Health and Social Care Partnership feel that more must be done to ensure speedy installation of adaptations, as waiting lists are often lengthy, adding unnecessary distress to the person.

Wheelchair Accessible Housing

221. As at August 2016, there were 114 housing register applicants requiring wheelchair housing. This equates to 2.4% of housing register applicants. Housing register applicants can select different sizes of property for which they wish to be considered, and may choose more than one property size. Seventy-three percent of applicants who require wheelchair housing also required two-bedroom accommodation; 40% require one-bedroom property and the remaining three bedrooms or more.

222. Three out of every four applicants for wheelchair housing are under 65 years old.

223. There are 41 social rented wheelchair accessible properties in North Ayrshire, the majority of these (26) are amenity properties, 8 are general needs, and 7 are sheltered housing.

224. The supply of wheelchair accessible housing is half the current outstanding demand for accommodation of this type.

225. By analysing the North Ayrshire Housing Register, the required ratio of housing for wheelchair users was identified. This showed that as at August 2014, 1% of demand for one-bedroom properties comes from wheelchair users, with 2% of demand for two bedroom properties. The Council recognises that occasionally it may be necessary to build larger 'wheelchair user' housing to meet the needs of individual households.

226. Long term projected demographic, and health changes are likely to mean there will be additional requirements for wheelchair accessible properties.

227. Within the Strategic Housing Investment Plan, projects designed to meet the needs of a particular household or group of individuals will have a high priority, where evidence exists to support the endeavour. There is an overall requirement within the SHIP for 3% of new build developments to be wheelchair accessible housing. During the period 2015 to 2020 twenty-nine wheelchair units are planned.

Interventions

228. In 2013, North Ayrshire Council Housing Services commissioned a review of the provision of housing adaptations by the Council and its partners, across all tenures. The purpose of the study was to investigate options to deliver a more person-centred, equitable, effective, and consistent Adaptations Service.
229. The following key areas have been identified for improvement within the existing North Ayrshire Council Adaptation Process:
- Lack of clearly defined roles and responsibilities;
 - Lengthy waiting lists;
 - Poor customer service;
 - Lack of procedures/timescales/roles;
 - No clearly defined definition of acceptable adaptations; and
 - No performance management information.
230. The following five key objectives have also been identified:
- Customer Focus will be at the centre of the new adaptations process;
 - Independent Living will be achievable for all service users;
 - Value for Money will ensure the delivery of more adaptations on a restricted budget;
 - Equitable Distribution of Resources will guarantee a fair process; and
 - Accountability will improve by incorporating an efficient performance management system.
231. There are significant issues around adapting North Ayrshire housing constructed post-1945. There is a higher instance of retrospective adaptations installed in these properties.
232. A significant proportion of social housing stock is adapted, which gives an indication of the potential future social housing need.
233. The number of adapted properties in each locality is proportionate to population density; however, it is disproportionate to the age demographics, as Arran and North Coast have higher numbers of older people, but fewer adapted properties. It may, therefore, be necessary to ascertain if this is due to need being adequately met, or if the need is unknown.
234. Overall, there is a lack of published data nationally relating to the provision of wheelchair accessible accommodation and the extent of need for such properties. The Scottish House Conditions Survey indicates that there is a concentration of adapted property and individuals restricted by their dwelling / waiting for adaptations in the social rented sector. This suggests both investment and need are concentrated in this sector.

Supported Housing

235. There tends to be a lack of clarity about the definition of both a housing support need and of a housing support service. Debate about definitions has the potential to become unhelpful, losing focus on the key requirement: meeting the needs of individuals and households who are vulnerable and in need of assistance.

236. In order to move forward, the following have been taken as the key features of housing support, and the focus for this component of the Local Housing Strategy:

- Services with a focus on prevention – in particular preventing, or reducing the likelihood of, housing needs arising such as the loss of accommodation, an avoidable need to move, or of current housing becoming unsuitable or presenting a risk.
- A low-level service response to those who are not eligible for a care service from the local authority, but have difficulty in sustaining independent living
- Support to people, based on their needs, and irrespective of the tenure in which they live.

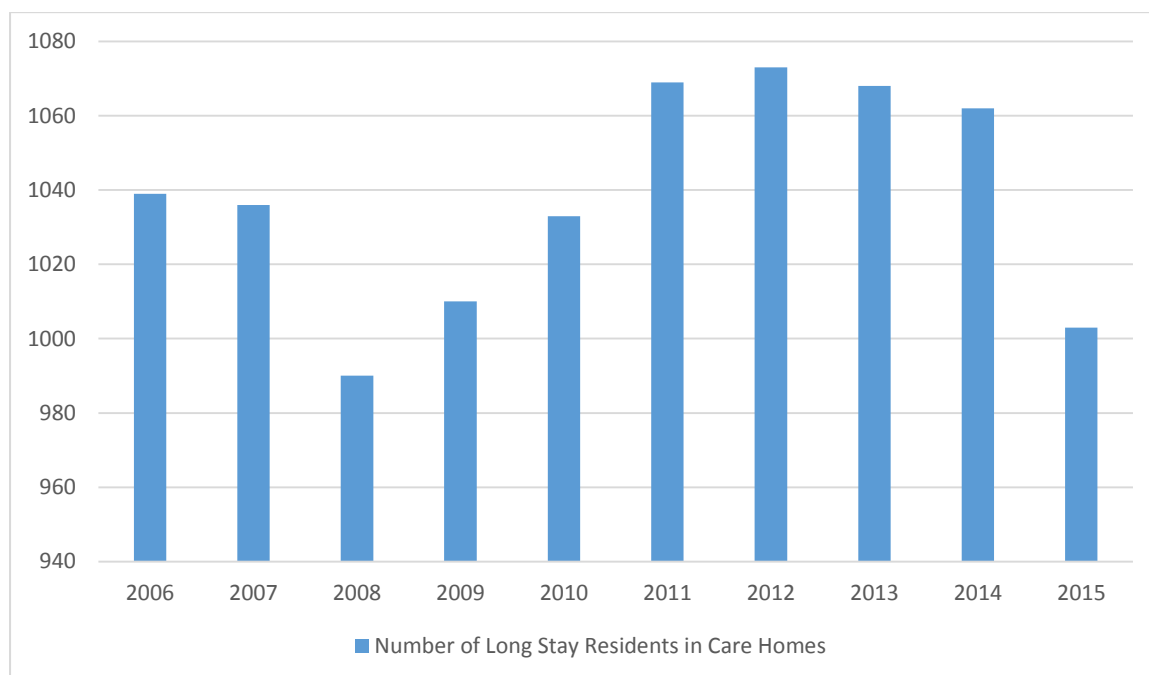
237. The focus on prevention is a key feature of housing support. Housing support services provide the Council and its partners with a core of services with this focus on prevention in relation to housing 'crises'. There is, however, a need for services with a health and social care focus, which are preventative and delay or avoid the need for more expensive service interventions, in particular, emergency hospital admission.

Residential Care Homes

238. The Care Home Census, Scottish Statistics on Adults Resident in Care Homes 2006-2015 provides care home data at both a Scottish and local authority level for 2006-2015.

239. Figure 27 outlines the total number of long-stay residents in care homes from the period 2006-2015 in North Ayrshire.

FIGURE 27: TOTAL NUMBER OF LONG-STAY RESIDENTS IN CARE HOMES IN NORTH AYRSHIRE (SOURCE: THE CARE HOME CENSUS, SCOTTISH STATISTICS ON ADULTS RESIDENT CARE HOMES 2006-2015)



240. After peaking in 2012, the number of long-stay residents has declined in recent years, with a decrease of 6% between 2014 and 2015. In total, the number of long-stay residents has decreased by 3% between 2006 and 2015. There is no explanation for the sudden drop between 2007 and 2008, and the subsequent increase between 2008 and 2011.

241. This is mirrored in the number of care homes in North Ayrshire which has fallen from 35 registered care homes in 2006 to 29 registered care homes in 2015.

242. The largest decline has been in the provision of local authority care homes where there has been a reduction of 60% over the same period. This could be attributed to the strategic change in reshaping care for older people with a focus on resources enabling people to live in their own home for as long as possible.

243. When taking into account the characteristics of care home residents within North Ayrshire, there has been a reduction in all 'characteristic groups' apart from those being medically diagnosed with dementia, as seen in Table 10.

Table 10: North Ayrshire Care Home Characteristics

Characteristics of Long Stay Residents	% of long-stay residents		
	2006	2015	2016
Requiring Nursing Care	70	69	65
Visual Impairment	18	14	18
Hearing Impairment	15	7	9
Acquired Brain Injury	8	3	2
Other Physical. Disability or Chronic Illness	11	36	36
Dementia (Medically Diagnosed)	33	51	50
Dementia (Not Medically Diagnosed)	15	13	12
Mental Health Problems	10	5	7
Learning Disability	6	2	8
Alcohol-Related Problems	*	*	*
Drugs Related Problems	*	*	*
None of these	*	*	*
Total Number of residents	1039	1003	922
*INDICATES VALUES HAVE BEEN SUPPRESSED DUE TO POTENTIAL RISK OF EXPOSURE AND TO MAINTAIN CLIENT CONFIDENTIALITY			

Source: Care Home Census

244. Residents requiring nursing care still accounts for the largest proportion of characteristics within care homes. This picture is mirrored across the whole of Scotland.

245. The mean age at which there is admission for long stay residents in adult care homes in 2016 is 80 years old, lower than the Scottish average of 81.

246. The number of registered places in care homes per 1,000 population aged 65+ in North Ayrshire has reduced from 47 in 2006, to 37 in 2016. North Ayrshire Council does not operate or own, any Care Homes.

Sheltered Housing

247. There are 43 Sheltered Housing complexes across North Ayrshire totalling 911 units. Of the 43, North Ayrshire Council are responsible for 28, 13 are owned by Registered Social Landlords, and the remaining two are privately owned.

248. Currently, the ratio of population over 60 (35,183), to number of units available (714) is 50:1. Across Scotland, the ratio of population over 60 (1,226,856) to units available (31,204) is 39:1, putting North Ayrshire behind the national level (Table 11).

249. Research has shown that North Ayrshire has a lower proportion of Sheltered Housing than Scotland as a whole, despite having a higher proportion of the population over the age of 60 years.

Table 11: Individual Sheltered Housing Unit to over 60+ population ratio

Individual unit to 60+ population		
	Scotland	North Ayrshire
Overall Population	5,295,000	138,146
Approx. number of over 60's	1,226,856	35,813
Over 60's % of population	23%	26%
Number of individual sheltered units	31,204	714
Over 60's per individual unit	39	50

Source: Housing Statistic for Scotland – Housing for Older People and those with disabilities; Scotland Census 2011

250. At August 2016 there was a total of 641 housing register applicants who require sheltered housing. This accounts for 13.5% of housing register applicants. 135 of these applicants (21%) have zero housing points. 22% (1,064) housing register applicants require amenity housing. There is considerable overlap between those applicants seeking sheltered and amenity housing with 505 (10.2%) seeking both sheltered and amenity housing. (North Ayrshire Housing Register Database).

251. At 31 March 2016, there were 634 units of 'sheltered self-contained units' and 1,202, units of medium dependency self-contained units. These figures exclude any private providers of older people's housing (Scottish Housing Register, 2016).

252. Changing attitudes towards Sheltered Housing was discussed during focus groups. Participants discussed that although previously, they may not have entertained the idea of living in a sheltered housing unit in the past, they are becoming more open to the idea and see the benefit they can bring. They suggested holding Sheltered Housing Open Days, in an attempt to encourage those who would benefit from living there, to consider them.
253. Focus Group participants also indicated their disapproval at the lack of wardens in sheltered housing complexes and would like to see them reinstated. They felt wardens give an added level of security and support and could help reduce isolation.
254. The Council is embarking on a programme of re-provisioning all of its sheltered housing complexes. All units delivered through this programme will be accessible and have a minimum of one bedroom. Establishing high levels of fuel efficiency is also a key part of the programme.

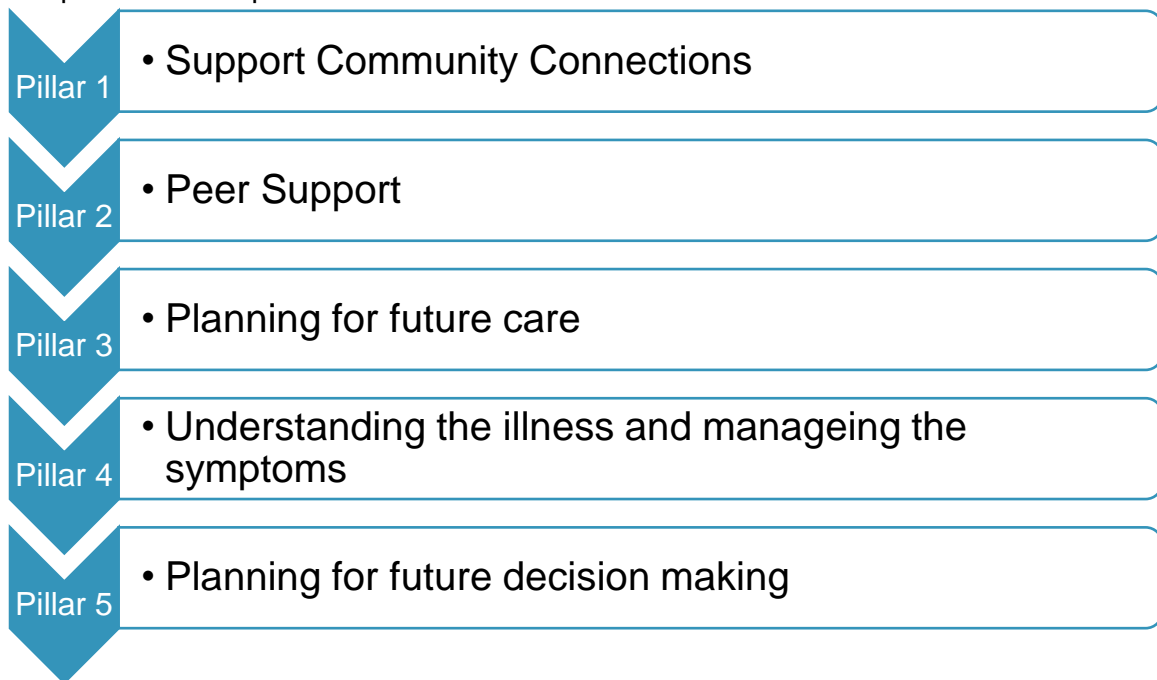
Creating Dementia Friendly Environments

255. As part of the sheltered housing re-provisioning programme, a 'dementia friendly design' will be incorporated into all units.
256. Alzheimer Scotland reported that in 2016 it is estimated that 90,000 people have dementia in Scotland. Within North Ayrshire, there are approximately 2,571 people with dementia. (Source: <http://www.alzscot.org/campaigning/statistics>)
257. Given the projected increase in the older population in the future, it has been assumed this number will also increase, and therefore, providing suitable support for dementia sufferers will be imperative, particularly how they can be supported within the home, to reduce pressure on support services and avoid unnecessary hospital admissions.
258. In 2013, the Scottish Government published the second National Dementia Strategy, which places importance on developing dementia enabled and dementia friendly local communities that contribute to greater awareness of dementia and reduced stigma.
259. Well-designed housing is particularly important for people with dementia and can extend the amount of time they are able to live at home by reducing accidents and delaying the need for residential care.
260. While most people with dementia live in their own home in the community, their homes were not built to today's standards of accessibility.
261. North Ayrshire Council is committed to leading the way in providing high quality, affordable homes that meet the needs and aspirations of older people in

North Ayrshire. This includes providing suitable accommodation for people with dementia.

262. Alzheimer Scotland's 5 pillar and 8 pillar models of Community Support sets out an integrated and comprehensive, evidence-based approach to supporting people with dementia living at home during the year following diagnosis (5 pillar model) and the moderate to severe stages of the illness (8 pillar model).

The pillars of the 5 pillar model are:



263. In planning for the future care, it is important that housing services are involved as the person's diagnosis will have an impact on both their current and future housing needs.

264. The pillars for the 8 pillar model are:



265. Pillar 5, Environment, is expanded to read; Consideration of housing issues is an essential component in supporting the person to remain living in the community. It is crucial this is connected with health and social care needs; a proactive and preventative approach must be taken to implementing changes and adaptations to the home.

266. Adaptations, aids, design changes and assistive technology can help to maintain the independence of the person and assist the carer. They can address some of the challenges caused by the symptoms of the illness, as well as co-existing conditions.

267. The North Ayrshire Health and Social Care Partnership has worked with the North Ayrshire Dementia Support Service to help older people with dementia and their carer's sustain independence in the home (NAHSCP 2015).

Interventions

268. The number of care homes within North Ayrshire has fallen with the largest reduction being in the provision of local authority care homes. North Ayrshire Council does not operate any complexes. Given the desire amongst older people to avoid institutionalised settings, this trend is unlikely to change, and therefore a need for increased provision is unlikely to arise.
269. Within the characteristics of care home residents, there has been a significant increase in residents with a diagnosis of dementia, which reflects the trend of older people in general.
270. Residents requiring nursing care still accounts for the largest proportion of characteristics within care homes.
271. Those whose home no longer meets their need are increasingly looking to move to sheltered and amenity accommodation. North Ayrshire currently has a higher ratio of older people to Sheltered Housing Unit than the national average, which suggests an undersupply of sheltered housing.
272. Through the sheltered housing re-provisioning programme, North Ayrshire Council is implementing the dementia friendly design to all units. Incorporating dementia friendly design in housing can also have a benefit to those who do not suffer from dementia, so it may be worthwhile incorporating the design elements in housing built for older people and people with disabilities.

Care & Support

273. Based on the projected increase in the number older people in North Ayrshire it is anticipated that an increase in care and support services which enable people to live in their own home or in community settings for longer will be required.
274. A review of older people specific budgets and outcomes across housing providers, Social Care and the NHS should be undertaken to identify any duplication of services and identify opportunities for joint working and efficiency.
275. Based on the projected increase in the number older people in North Ayrshire it is anticipated that an increase in care and support services which enable people to live in their own home or in community settings for longer will be required.

Care and Repair

276. Care and repair services help elderly homeowners and private sector tenants over 65 years of age who require adaptations or small repairs to their home.

277. The services can provide:

- advice and practical assistance to enable you to remain living in your own home
- scheme of assistance works e.g. bathing adaptations for eligible elderly and disabled applicants
- home safety and security visits and follow up referrals
- small repairs required to improve your safety and security at home - clients are required to pay the cost of labour and materials above the £80 (VAT included) repair limit
- a property survey to identify hazards relating to trips and falls
- a handrails and bannisters assistance service

278. A Small Repairs Service is also available to Care and Repair Extra clients who are elderly or disabled. This service will assist with repairs required to improve the safety and security of the home. Qualifying repairs under the Small Repairs Service are paid for by the service (North Ayrshire Council funded) to a value of £80. Any costs over £80 are paid by the occupier.

279. The North Ayrshire mainland and Isle of Cumbrae service has been expanded to include a handyperson service. This covers small jobs normally carried out by a handyperson, as well as some jobs carried out by tradespeople, and may include:

- joinery repairs
- electrical repairs
- fitting shelves, towel rails, curtain poles
- fitting doors and door handles
- window repairs
- changing lightbulbs
- fitting security lighting
- fitting additional sockets and lights
- patch repairs to plaster/ tiling
- building flat pack furniture
- other general handyperson jobs

280. The handyperson service will be chargeable with prices maintained at fair and reasonable levels. It is available to all owner-occupiers, private sector tenants, council tenants and housing association tenants living on the North Ayrshire mainland and Isle of Cumbrae.

281. Both the Care and Repair and Handyman Services are delivered by Cunninghame Housing Association on behalf of North Ayrshire Council. A recent review of service delivery led to the creation of a Public Social Partnership from 1st April 2015. At this time the service was expanded to include the Handyperson.

282. Demand for Care and Repair is rising significantly. Prior to 2015, there have been approximately 500 to 600 enquiries per annum; this has risen significantly to 1,300 enquiries between April 2015 and February 2016.
283. In the second quarter of 2016 (April-June), 1285 enquiries were received, with 79% coming from people over the age of 65.
284. The funding available for the Small Repairs Service during 2015/16 was £20,000, and this amount was used within the first three months, leaving an unmet demand throughout the rest of the year. There is scope to increase these funds in order to deliver the service to a greater number of people and meet overall demand.
285. There are high levels of demand for the Care and Repair, Small Repairs and Handyman Services all of which enable older people to remain in their own homes.

Self-Directed Support

286. The Scottish Government introduced the Social Care (Self-directed Support) (Scotland) Act 2013 which came into force on April 1, 2014. It places a duty on local authority social work departments to offer people who are eligible for social care a range of choices over how they receive their support.
287. Self-directed Support allows people, their carer's and their families to make informed choices on what their support looks like and how it is delivered, making it possible to meet agreed personal outcomes.
288. Self-directed Support offers a number of options for getting support:
- Taken as a direct payment
 - Allocated to a provider the individual chooses (sometimes called an individual service fund, there the council or funder, holds the budget, but the person is in charge of how it is spent)
 - The council can arrange a service
 - A mixture of all 3 above for different types of support.

Care at Home

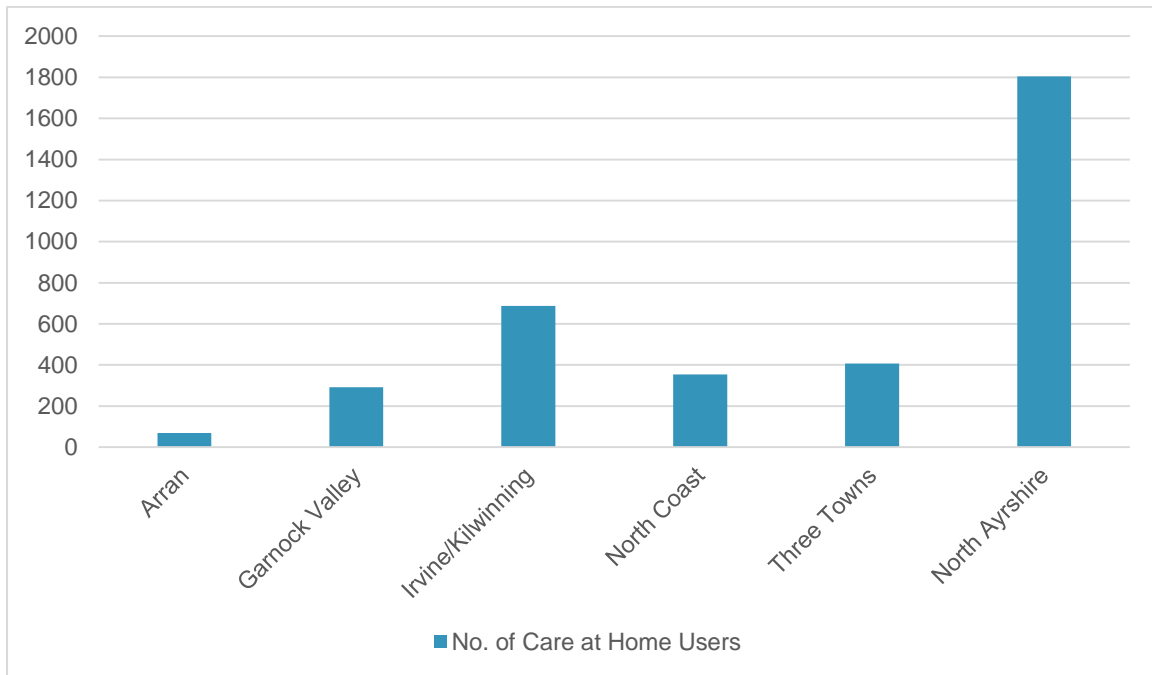
Care at Home is a service designed to preserve an individual's independence and allow them to remain in their home for as long as possible. The service is available 24 hours a day, 365 days a year and can help with daily tasks such as:

- Getting dressed
- Maintaining personal hygiene
- Taking medication
- Getting into and out of bed

289. Services may be provided by North Ayrshire Council care at home assistants or through an approved partner in the independent sector.

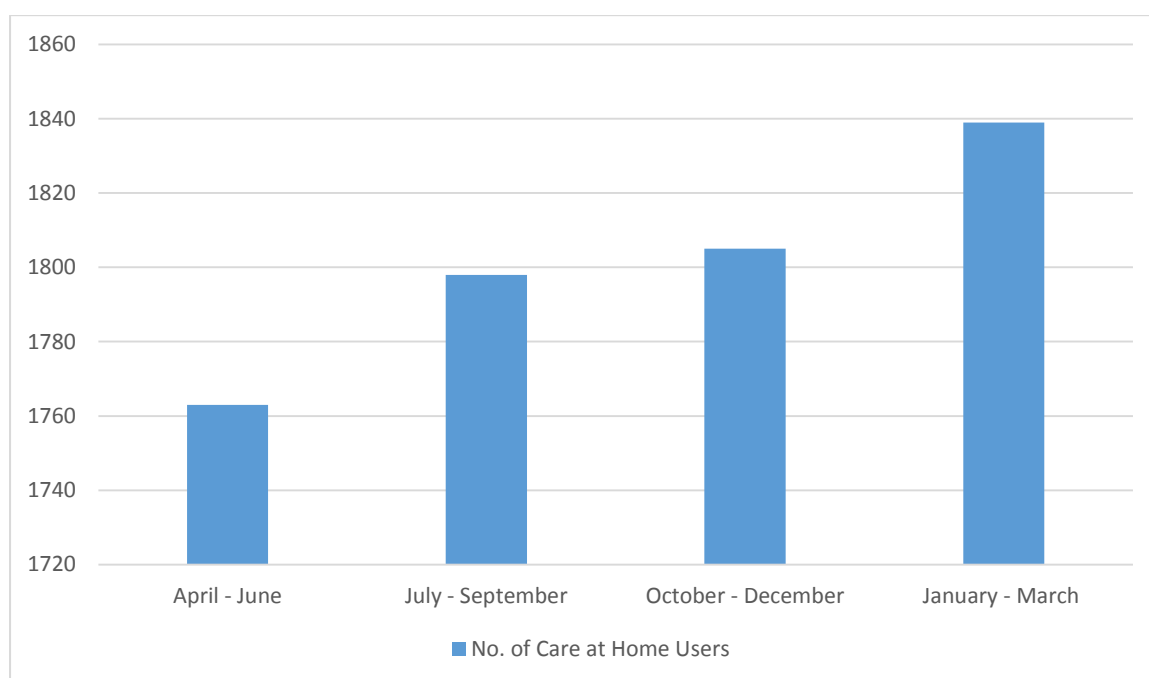
290. As at 31st December 2015 there was a total of 1,805 Care at Home service users. Figure 28 shows the number of Care at Home service users by Sub Housing Market Area.

FIGURE 28: NO. OF CARE AT HOME SERVICES USERS BY SUB HOUSING MARKET AREA (SOURCE: HEALTH AND SOCIAL CARE PARTNERSHIP DATABASE)



291. As a result of the review of Care at Home Services detailed in the Strategic Plan, North Ayrshire Health and Social Care Partnership have invested in, and increased, the capacity of Care at Home to meet local demand. Between April 2015 and March 2016, the number of Care at Home users increased by 76 (Figure 29).

FIGURE 29: NO. OF PEOPLE USING CARE AT HOME APRIL 2015 - MARCH 2016 (SOURCE: HEALTH AND SOCIAL CARE PARTNERSHIP ANNUAL REVIEW)



292. Re-ablement Service and Intermediate Care and Enablement Service has helped maintain over 2000 people in their own homes by supporting them at a time they needed it.

Telecare Service

293. National Telehealth and Telecare Delivery Plan for Scotland to 2015 (Scottish Government, 2013e) outlines Scotland’s ongoing commitment and investment to innovate and expand ‘technology-enabled’ service redesign at scale.

294. The plan states that telehealth and telecare contribute enormously to:

- the Scottish Government’s 2020 Vision for our health system – a vision where everyone is able to live longer, healthier lives at home or in a homely setting;
- integrated health and adult social care as a key policy and strategic priority;
- and to the European Commission’s ambition for 2020, where we aim to see an increase in the average healthy life years by two years.
- Despite focusing on the period up to 2015, the plan has been set within longer term ambitions to 2020. The vision for 2020 is:
 - Enhanced well-being and quality of life
 - Improved sustainability of care
 - Increased economic growth in Scotland.

295. Telecare is a range of electronic aids and adaptations that enable disabled adults and older people to retain independence, safety and comfort in their own home. Telecare offers 24 hours a day, 365 days a year monitoring and support and can be provided alongside any other services such as Care at Home. It

comprises a system that automatically alerts a monitoring station if a person becomes ill or something is wrong.

296. Telecare includes the following:

- community alarm
- fall detectors
- property exit sensors
- smoke detectors
- carbon monoxide detectors
- just checking system
- medication reminders/dispenser
- flood detectors
- excessive heat and cold sensors
- domestic abuse alarms
- safer walking alarms

297. There is a weekly charge of £4.30 for the telecare service with residents on Arran and Cumbrae paying a separate charge of £2.10 per week (charges correct at September 2016).

298. Whilst telecare is available on both islands the service is limited by the responder service on Arran and Cumbrae. For island residents, a designated carer contact will be required to ensure if activations of the community alarm occur out of hours contact can be made with a neighbour, friend or family member.

299. Table 12 shows the number of Telecare service users by Sub Housing Market Area as at 31st December 2015.

Table 12: Number of Telecare users by Sub Housing Market Area

SHMA	Telecare Service Users
Arran	166
Garnock Valley	499
Irvine / Kilwinning	1417
North Coast	689
Three Towns	792
North Ayrshire	3101

Source: North Ayrshire Health and Social Care Partnership Database

300. The number of telecare users is highest in the Irvine / Kilwinning area with 1417 users. It is lowest in Arran with only 166 users on the island.

Community Support

301. Throughout stakeholder interviews, stakeholders were keen to stress the importance of social/activity community groups to help promote social inclusion and reduce isolation and loneliness. The Health and Social Care Partnership acknowledged the benefit that sheltered housing community hubs can have on providing social opportunities for older people, saying that although it is an expense, it is a good long term investment.

302. Transport is seen as one of the biggest barriers to social inclusion for a variety of reasons, including proximity to transport links and ability to use certain modes of transport due to mobility restrictions. It was suggested that utilising volunteers, particularly in the role of volunteer drivers, would help encourage older people to participate in social activities.

Interventions

303. The Care at Home team have greatly reduced the waiting lists for care packages, and the length of hospital stays people need (NAHSCP 2016), however, the number of service users is projected to rise by 45% by 2031. Therefore it is imperative that this service continues to expand to be readily available for those who need it (NAHSCP 2015).

304. During focus group discussions, it emerged that participants felt that support services such as Telecare, Care & Repair and Care at Home, amongst others, were adequate in supporting people to live independently. They highlighted individual issues that could be improved upon, such as advertising the availability of panic buttons more effectively and installing intercom systems throughout properties so calls can be answered quickly (particularly in cases of emergency).

305. The impact of these services and the difference they make in supporting people to live independently cannot be underestimated. As the ageing population increases, pressure on these services will grow. It is imperative that adequate provision of these services continues to be made and that they are expanded where possible.

306. Improving access to social activity groups is a crucial step in reducing social isolation, and helping to improve confidence and encourage independence. Community hubs in sheltered housing complexes can be hugely beneficial in helping to alleviate isolation, whilst also providing a base to deliver support services to the community.

Student Accommodation

307. The Housing Need and Demand assessment produced the following findings regarding student accommodation in North Ayrshire.
308. Ayrshire College is the sole provider of further and higher education in North Ayrshire. Whilst the college has campuses across Ayrshire, one is located in North Ayrshire - Kilwinning Campus.
309. There are approximately 3,500 Ayrshire College students living in North Ayrshire. Some of these students will study at the North Ayrshire Campuses while others travel to the Ayr or Kilmarnock campuses.
310. Of all Ayrshire College students around 7% do not have an Ayrshire address and may travel to college from homes in neighbouring authorities such as Renfrewshire, East Renfrewshire and Inverclyde.
311. Director of Student Services, Ayrshire College stated that the college does not provide any student accommodation based on low demand for such services from existing and potential students.
312. The vast majority of students at Ayrshire College are already resident in the area when they apply for and take up a place to study. Where students do move into North Ayrshire on commencing their studies, the College provides support to ensure their accommodation is sustainable.

Interventions

313. There is no identified need for student accommodation in the future. Students face similar pressures to other young people in the area in terms of accessing accommodation.

Refugees

Syrian resettlement programme

314. In September 2015, North Ayrshire Council made a humanitarian commitment to support the resettlement and integration of 100 refugees into local communities as part of the Syrian Resettlement Programme.
315. To support this pledge North Ayrshire Council have received Home Office grant funding to support the initial provision of accommodation, English for Speakers of Other Languages tuition, Health and Educational services.
316. Over the next four years, the Council, alongside partner agencies will continue to provide robust resettlement and ongoing support packages to Syrian families as they arrive in North Ayrshire.

Gypsy/Travellers

317. In line with Scottish Government guidelines, North Ayrshire Council considers Gypsy Travellers to be a minority ethnic community. The Council recognises Gypsy Travellers rights to nomadic life and respects the fact that Gypsy Travellers may wish to maintain a travelling way of life as part of their cultural identity. It is acknowledged that there should be no discrimination against Gypsy Travellers because of their way of life and culture.
318. Scotland's Census 2011 indicated there were 58 households where the household reference person designated White: Gypsy/Traveller as their ethnicity in North Ayrshire. In Scotland as a whole, 4,121 people identified as Gypsy/Traveller.
319. The Twice Yearly Count of Gypsies/Travellers in Scotland (undertaken by local authorities) was last taken in 2009. At that time, it was estimated that around 112 Gypsy/Traveller households were living in the Glasgow, Clyde Valley and Ayrshire area, with 497 estimated households across Scotland.
320. It was estimated that around 19 Gypsy/Traveller households were living in the North Ayrshire area: 8 households resident on Council provided pitches and 11 households on unauthorised encampments (Scottish Government, 2010a).
321. Historically, the gypsy/traveller population have been difficult to quantify, hence the large disparity between the 'Twice Yearly Count' figures and the Census figures. Travelling partly accounts for this, but the community often do not wish to be counted or identified and as such, the counts, surveys, etc. are not completely reliable. A Scottish Government review of the count estimated that it might only record a third of the gypsies/travellers in Scotland. (Scottish Government, 2010b).
322. There is currently one Gypsy Traveller site in North Ayrshire. The Redburn travellers site is located two miles from Irvine town centre. The Redburn site comprises of 16 individual pitches including four pitches that are for mobility access. Each pitch has its own amenity block with separate kitchen, shower/toilet facilities and utility room. Each tenant is responsible for their rent, council tax and electricity. The occupancy rate for 2015 was 97.4%. There is currently a waiting list of 12 applicants.
323. The Redburn site has a range of services and amenities to meet the needs of the gypsy/travelling community. A community room is available onsite for partner services to meet tenants and their children in a safe and comfortable environment. The multipurpose room is used to provide support services to tenants including:

- Education Tutors – currently three sessions per week (Tuesday, Thursday and Friday), one session specifically for literacy and numeracy
- Connected Community Service (Play team) – currently one session per week (which won the ‘Nancy Ovens award for play’ in September 2014).
- Doctor surgery – every week by appointment only, NHS Primary care and Early Years. Includes access to dental health, healthy eating, Opticians, healthy baby programme, etc.
- North Ayrshire Tenancy Support team – proved support with budgeting, debt advice, and benefit claims, helping tenants stay in their current tenancies, understanding and managing tenancy rights and responsibilities, etc. (recently accredited for their work).
- Welfare Reform Team – a new service to the site, initially starting with a benefit maximisation programme and progressing to other welfare reform issues, i.e. Universal Credit when it is expanded throughout North Ayrshire (NA HNDA, 2016).

324. In 2006, an Accommodation Needs Assessment of Gypsies/Travellers in West Central Scotland was commissioned by 11 local authorities; Argyll and Bute, West Dunbartonshire, East Dunbartonshire, Glasgow, East Renfrewshire, Renfrewshire, Inverclyde, South Lanarkshire, East Ayrshire, South Ayrshire and North Ayrshire.

325. A number of recommendations came from the research:

Demonstrate continued joint working at a regional level

- In recognition of this recommendation, North Ayrshire Council established a working group to review the Councils approach to managing unauthorised encampments and develop an appropriate policy, with representatives from Housing Services, Legal, Street Scene, Social Services, Environmental Health, Trading Standards and Police Scotland.
- Two full-time roles were also developed to work directly with Gypsy/Travellers in North Ayrshire – Gypsy/Traveller Unauthorised Encampment Officer and Gypsy Traveller Coordinator, both of whom are active members in the Scottish Traveller Site Managers Association meetings.

Update of the evidence base for similar study every five years

- In 2015, a Satisfaction Survey was carried out with tenants on the Redburn site to investigate levels of satisfaction with site provision. This survey indicated that the reasons for Gypsy/Travellers coming to North Ayrshire include:
 - Family connections in the area
 - Liking the area
 - Moving to the area for work
 - Gypsy Traveller Churches in the area
 - Police approach.
- The survey showed that 56% of tenants had been resident on the site for less than one year, 6% less than two years and 6% less than five years. 5 tenants

(31%) have been resident on the site for over 5 years. 15 tenants reported that they travelled for part of the year. 80% of tenants reported that they were satisfied with the site in general, with only 6% responding as very dissatisfied. Dissatisfaction mainly related to the kitchen and bathroom facilities.

326. Monitor trends on an annual basis

- The Gypsy Traveller Encampment Officer visits all encampments in the area on a daily basis, sending daily updates to partner organisations and keeps managers informed as required. Weekly, monthly, quarterly and annual reports are compiled for senior management. The annual report includes statistical analysis on the number of local encampments as well as encampments across Ayrshire and Scotland.

Demonstrate accessibility of access to application process for both social housing and Council/RSL sites

- The Unauthorised Encampment Officer was appointed in September 2014. The main role is to coordinate the Council's response to unauthorised encampments and identify the welfare needs of residents.
- The Unauthorised Encampment Officer offers advice and assistance on housing options within the area, as well as assistance with completing forms.

House visits to Gypsy/Traveller households on Council/Registered Social Landlord sites on an annual basis

- The Gypsy Traveller Coordinator is based at the Redburn Traveller Site, interacting with tenants and visitors on a daily basis, providing support as and when required.

Travelling Showpeople

North Ayrshire does not have a resident Travelling Showpeople community.

The North Ayrshire Housing Needs and Demand Assessment 2016 highlights that the planned regeneration of Glasgow's East End may have led to the displacement of Show people living in that area. Evidence gathered from unauthorised encampments show no evidence to suggest that this group has, or intends to, relocate to North Ayrshire.

Interventions

327. Throughout 2016, North Ayrshire Council have been conducting a 'Travellers who visited North Ayrshire' Accommodation Survey. As at July 2016, there have been 16 respondents to the survey. When asked if they would stay at the Redburn Travellers site if space was available, 88% said they would not. 75% said they would not like to relocate to North Ayrshire permanently, and 69% only intended to stay in the area for less than one month. This suggests that the Gypsy/Travellers coming to North Ayrshire are not seeking to stay long term, and the current provision of 16 pitches at the Redburn Site is adequate for the current demand.

328. The North Ayrshire Housing Needs and Demand Assessment concluded that no need for additional provision within North Ayrshire had been identified. North Ayrshire Council will continue to monitor this through the work of the Unauthorised Encampment Officer. As a result, no policy interventions have been identified, in relation to the housing of this specific group.

329. As there is no evidence to suggest that Travelling Show People have, or intend to relocate to North Ayrshire, no policy interventions in relation to this specific group have been identified.

Draft Actions

Ref	Action	Indicator/Measure	Target/Milestone	Risk Score	Base Line	Timescale	Responsibility	Progress Update
1	Implement dementia friendly design standards in all new build social housing sheltered complexes	100% of new build sheltered housing is dementia friendly	All new sheltered complexes adhere to dementia build standard	12		From 2017	Developing Social Landlord	
2	Implement dementia friendly design standards in all social housing sheltered refurbishments – as far as reasonably practicable.	100% of sheltered refurbishment projects include dementia friendly design elements.	The number of existing sheltered complexes with dementia friendly elements increases	12		From 2017	Developing Social Landlord	
3	Ensure around a quarter of all new build homes are designed for older people	25% of all new builds are of one and/or two bedrooms with level access.	The next Strategic Housing Investment Plan 2019-2024 continues the policy set out in the Strategic Housing Investment Plan 2017-2022	12		From 2019	Developing Social Landlord	
4	A review to streamline the Equipment & Adaptation Service is undertaken.	Number of days to complete an application reduces	The installation of Equipment & Adaptations is quicker.	20		From 2017	Health & Social Care Partnership	

5	Continue to work collaboratively to identify emerging innovation and good practice	Additional housing responses are identified which support the aims of the HSCP.	The housing response to the aims of the HSCP is flexible and dynamic.	12	n/a	From 2017	Strategic Housing Board / Strategy Planning Group
6	Investigate the potential to install generic adaptations (eg. Level access, amenity, sheltered) as part of the ongoing capital investment process.	An assessment of the viability of installing adaptations during capital programmes is complete.	A decision is made as to whether adaptations can be installed during wider capital investment for social housing stock.	12	n/a	From 2017	Social Housing Landlords
7	Train front line staff to identify an emerging need for adaptation, before a crisis point is reached	A reduction in the number of 'crisis' referrals for adaptations	Crisis situations are prevented.	20	n/a	From 2017	Health & Social Care Partnership
8	Maximise the use of hub facilities	The number of 'vacant' hours in hubs reduces	Hours of activity within hubs is maximised	12	n/a	From 2017	Health & Social Care Partnership

Glossary

Accessible/Adapted Housing: Housing that can be accessed easily from outside and which allows good freedom and safety of movement inside.

These Homes can be suitable for a person who uses a wheelchair infrequently (mainly outside of the home).

Care and Support: Delivered through a range of care and support services that enable people to live independently in their own homes for as long as possible. Services are available to people across all tenures and are based on need and the resources available.

Disability: Under the Equality Act 2010 you are disabled “if you have a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities.”

The main categories of disability are:

Physical disability - pertains to total or partial loss of a person’s bodily functions (e.g. walking, gross motor skills, bladder control, etc.) and total or partial loss of a part of the body (e.g. a person with an amputation).”

Mental illness - “refers to a diagnosable condition that significantly interferes with an individual’s cognitive, emotional or social abilities e.g. depression, anxiety, schizophrenia.”

Learning disability - “is a reduced intellectual ability and difficulty with everyday activities – for example, household tasks, socialising or managing money – which affects someone for their whole life.”

Healthy Life Expectancy: Healthy life expectancy is an estimate of how many years’ people might live in a ‘healthy’ state and is, therefore, a key summary measure of a population’s health.

Housing Contribution Statement: A Housing Contribution Statement is required from each local authority. The

Housing Contribution Statement has been developed in collaboration with Housing Services and North Ayrshire Health and Social Care Partnership. It fully supports the integration of housing with health and social care.

Housing Need and Demand

Assessment: A Housing Need and Demand Assessment provides the evidence base upon which housing supply targets are reached in local housing strategies, and suitable land is allocated through development plans to meet targets.

Independent Living: Independent Living is about freedom, choice, dignity and control for those with a disability or long-term health condition, those who have become frail or those in need of support.

Integration of Health and Social Care:

The Public Bodies (Joint Working)(Scotland) Act sets out the legislative framework for integrating health and social care, requiring local authorities and health boards to establish integrated partnership arrangements. This integration has resulted in the North Ayrshire Health and Social Care Partnership.

Integration Joint Board: The Integration Joint Board (IJB) is the governing body of the North Ayrshire Health and Social Care Partnership. It is delegated responsibilities by North Ayrshire Council and NHS Ayrshire and Arran.

Non-Permanent Accommodation: Non-Permanent Accommodation will be mainly available in the private rented sector, and may appeal to those who know that they will be residing in an area for a relatively short time or who are, as yet, unable to commit to a longer period of residence. Non-Permanent Accommodation is likely to be most suitable for students, migrant workers, asylum seekers or refugees.

Scottish Index of Multiple Deprivation: The Scottish Index of Multiple Deprivation

uses a range of socio-economic data to calculate deprivation across small areas known as data zones. There are currently 6976 data zones, with roughly equal population.

Specialist Provision: Specialist Provision refers to the wide range of accommodation needs and care and support services (housing support) needed to allow people of all ages to live well and independently.

Supported Accommodation: For those who require a level of available support to help them live as independently as possible. This could include, care and residential homes for both older people and those with a physical disability, mental health condition or learning disability.

Wheelchair Accessible: These are homes suitable for those that need to use a wheelchair most, if not all, of the time to get around both inside the home, and outside.

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Appendix 1: Equality Impact Assessment

Equality Impact Assessment

This form will assist in carrying out an equality impact assessment of new, revised and existing policies and practices. Guidance on how to complete assessments is given in the Council's **Equality Impact Assessment Toolkit**. The form is mandatory and must be published on the Council website once the policy or practice has been approved.

Section 1 - Details

1.1. **Service** **Section**

1.2. **Name of Policy or Practice being assessed:**

Is it new Existing

1.3. **List of participants in Equality Impact Assessment**

1.4. **Manager responsible for impact assessment**

Name:

Designation:

1.5. Timetable

Date assessment started:

01/06/2016

(dd/mm/yyyy)

Completion date:

21/12/2016

(dd/mm/yyyy)

Section 2 – Aim and Relevance

2.1. What is the purpose of the policy or practice?

The Housing (Scotland) Act 2001 requires Local Authorities to prepare a Local Housing Strategy that is supported by an assessment of housing need and demand and which sets out the strategic direction for tackling a range of issues across all housing tenures.

North Ayrshire Council will address issues relating to Older people, people living with a physical disability, learning disability or mental health condition, young people (students), people leaving supported accommodation and ethnic minorities in North Ayrshire. This will form one of the Independent Living and Specialist Provision Topic paper, which will inform the Local Housing Strategy for North Ayrshire.

2.2. What are the anticipated notable outcomes (positive and negative)?

This topic paper identifies an ageing population within North Ayrshire and identifies the urgent need to ensure adequate housing is provided to support older people in the future. While the North Ayrshire population is predicted to decline in the coming years, the number of older people is set to grow, and the needs of this demographic will need to be met.

One of the main issues facing housing and the older population is the ability to adapt properties to suit the need. Many houses in current North Ayrshire stock are unsuitable for the adaptations needed or have been adapted as far as they can be. The paper, therefore, addresses the need to ensure housing is future proof, with a percentage of all housing stock requiring a level or wheelchair access.

The paper also addresses the housing need for people living with disabilities, both adults and children. Similar housing issues that face older people are also faced by people living with disabilities, in terms of adapting their homes. The paper also addresses the need to ensure homes are suitable for children living with disabilities and their families.

Through research carried out when developing the Housing Needs and Demand Assessment, there was no housing further need to be identified for Students or Gypsy/Travellers living in North Ayrshire.

2.3. Who is affected by the policy or practice as an internal or external service user?

Older People, People living with a physical disability, learning disability or mental health condition, students, people living in supported accommodation such as ex-offenders, Ethnic Minorities such as Gypsy Travellers and Asylum Seekers

2.4. Please indicate the equality groups likely to be affected by the policy:

Age, Disability, Gender, Gender reassignment, Pregnancy and maternity, race, religion or belief, sexual orientation.

2.5 Which aspects of the policy eliminate unlawful discrimination, harassment and victimisation?

The policy aims to provide suitable housing for all people in North Ayrshire, regardless of age, disability, gender, gender reassignment, race, religion or belief or sexual orientation, therefore eliminating unlawful discrimination, harassment and victimisation.

2.6 Which aspects of the policy advance equality of opportunity between people which share a relevant protected characteristic and those who do not?

All aspects of the policy strive to advance equality of opportunity between people which share a relevant protected characteristic and those who do not by presenting the need, and the solutions to provide affordable, future-proof housing, and support to help people live independently in their own home for as long as possible.

2.7 Which aspects of the policy foster good relations between people who share a protected characteristic and those who do not?

All aspects of the policy foster good relations between people who share a protected characteristic and those who do not.

2.8	Have any cross-cutting impacts been identified from other Council Services or Partner Agencies (multiple discrimination or accumulated effects of multiple proposals on a protected characteristic)?
	None Identified
2.9	If Crosscutting issues identified with other Services, what discussion/interaction has taken place to mitigate any potential negative impacts of accumulated proposals?
	N/A

Section 3 – Collecting Information

3.1. What evidence is available about the needs of relevant groups?

Source of Evidence

Demographic data, including Census

- Scottish Census 2011,
- General Records of Scotland
- Scottish Index of Multiple Deprivation

Research

- Christie Commission Review of Public Services 2015
- Age, Home and Community: A Strategy for Housing for Scotland's Older People: 2012 – 2021
- Scotland's National Dementia Strategy 2013-2016
- The Keys to Life: Improving quality of life for people living with learning disabilities
- North Ayrshire Joint Commissioning Strategy for Older People 2012
- North Ayrshire Policy on Unauthorised Encampments

Consultation & survey reports

Older People Focus Group – Age Concern, strategic housing providers, Elderly Forums, NA Tenant Network, Sheltered Housing Forum, Carers Centre, NA Connected Communities, Tenants, NAHSCP

Disabled People Focus Group – Strategic housing providers, Residents, Carers, North Ayrshire Access Panel, NAHSCP, Cornerstone,

Older People's Housing Survey – 254 responses

Disabled People Housing Survey – 74 responses

Redburn Travellers Site Satisfaction Survey- An annual survey of all occupied pitches. The last survey had responses from all 16 pitches

Housing Live Events – 5 Roadshows were held across North Ayrshire with over 500 responses to short surveys

Stakeholder Interviews – one to one interviews were carried out with councillors, strategic housing providers and service providers

Building Solutions Workshop - was attended by around 100 residents and stakeholders, including older people and people with disabilities to develop and agree on strategic outcomes and actions for the LHS.

Equality Monitoring Data

N/a

Inspection & audit reports

N/A

Service user feedback & complaints

N/A

Ombudsman reports & case law

N/A

Officer knowledge & experience

Knowledge and experience gained through researching the topic paper.

3.2. Are there any gaps in evidence?

No

Section 4 – Impacts

4.1. Could the proposed policy or practice have an impact on any of the following protected characteristics? (Positive or negative)

Protected Characteristic	Yes	No	Please explain
Age (Older people, children and young people)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The policy sets out the Council's aim to provide suitable housing for people of all ages in North Ayrshire.
Disability (Physical and Learning)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The policy sets out the Councils aim to provide suitable housing for people living with a disability, be it physical or learning.
Gender reassignment (Where a person is living as the opposite gender to their birth)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no 'exceptional' or unique independent living housing issues which related to this equality group. Therefore no impact positive or negative will arise from this topic paper.
Pregnancy and Maternity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no 'exceptional' or unique independent living housing issues which related to this equality group. Therefore no impact positive or

			negative will arise from this topic paper.
Race, ethnicity, colour, nationality or national origins (including gypsy/ travellers, refugees and asylum seekers)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no 'exceptional' or unique independent living housing issues which related to this equality group. Therefore no impact positive or negative will arise from this topic paper.
Religion or belief	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no 'exceptional' or unique independent living housing issues which related to this equality group. Therefore no impact positive or negative will arise from this topic paper.
Sex (Women and Men)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no 'exceptional' or unique independent living housing issues which related to this equality group. Therefore no impact positive or negative will arise from this topic paper.
Sexual Orientation (Lesbian, gay and bisexual people)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no 'exceptional' or unique independent living housing issues which related to this equality group. Therefore no impact positive or negative will arise from this topic paper.
Other (Poverty, homelessness, ex-offenders, isolated rural communities, carers, part-time workers, or people in a marriage/civil partnership)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The topic paper specifically examines the mechanisms to encourage and support independent living. Outcomes of this paper are intended to impact on all groups positively.

Section 5 – Assessment

5.1. Is there any evidence that the policy:

- may result in less favourable treatment for particular groups?
- may give rise to direct or indirect discrimination?
- may give rise to unlawful harassment or victimisation?

Yes

No

No evidence

If yes, give details

5.2. If you have identified a negative impact, how will you modify this?

No negative impact identified

5.3. Is the policy or practice intended to promote equality by permitting positive action or action to remove or minimise disadvantage?

Yes

No

If yes, please give details

The policy is intended to positively promote independent living in North Ayrshire by providing suitable housing and support services.

Section 6 – Consultation & Recommendations

6.1. Describe the consultation undertaken with equality groups, including details of the groups involved and the methods used.

Every effort was taken to ensure the research methods were as broad as possible. The consultation was carried out through Focus Groups on housing issues relating to Older People and People living with Disabilities. Both groups were attended by residents, Health and Social Care Partnership colleagues, Independent and Third sector support providers, Housing Association representatives as well as carers. Stakeholder Interviews were held with Health and Social Care Partnership, Housing Association colleagues and Elected Members, covering issues such as Children living with disabilities, Older People and people living with learning disabilities. Local Housing Strategy Surveys were widely available to be completed. There were five surveys in total, two of which related directly to the development of this paper: Housing for Older People and Housing for People with Disabilities. These surveys

were advertised through posters, social media, post, and in libraries. At the request of local community groups on Arran, all surveys were available at Garrison House on Cumbrae for completion. Surveys were also distributed to key service providers and stakeholders to offer widespread accessibility to service users who may not have to be able to gain access to the surveys online.

The Gypsy/Traveller Coordinator conducts a rolling survey to assess the Redburn Travellers site. This, as well as the 'Travellers Who visit North Ayrshire Accommodation 2016' Survey were consulted.

A Building Solutions Workshop was attended by older people and people with disabilities to develop and agree on strategic outcomes and actions for the LHS.

Section 7 – Outcome of Assessment

7.1. Please detail the outcome of the assessment:

- No major alterations to policy assessed, EIA shows policy is robust
- Adjust the policy to remove barriers or better promote equality
- Continue the policy – there are justifications to continue the policy despite potential for adverse impact
- Stop and remove the policy as there is actual or potential; unlawful discrimination

7.2. Please detail recommendations, including any action required to address negative impacts identified

No negative impacts identified

7.3. Is a more detailed impact assessment needed?

No

Section 8 – Monitoring

- 8.1. Describe how you will monitor the impact of this policy e.g. performance indicators used, other monitoring arrangements, who will monitor progress, criteria used to measure if outcomes are achieved.**

The impact of this policy will be identified through assessing and monitoring the indicators developed through the Local Housing Strategy. The Strategy Team will be responsible for monitoring the progress.

- 8.2. Describe how you will publish the results of monitoring arrangements?**

The policy will be reviewed as part of the Local Housing Strategy 201702022 review process

- 8.3. When is the policy or practice due to being reviewed?**

- 8.4. Head of Service who has approved impact assessment**

Please insert name and title of the Head of Service who has approved this assessment

Name:

Title

Date:

Section 9 – Publication

- 9.1 All Equality Impact Assessments must be published on the Council website. Please forward to Andrew Hale (ahale@north-ayrshire.gov.uk)**

Useful Guidance

Equality and Human Rights Commission: Assessing impact and the public sector duty: A guide for public authorities (Scotland) (2012)

<http://www.equalityhumanrights.com>