

Consultation on the Interim Analytical Report on the Life Chances of Disabled People: A Response

The Tenants Disability Action Group would like to welcome the Strategy Unit's initiative in publishing a detailed Interim Analytical Report, clearly rooted in and based upon the Social Model of Disability and engaging in a wide-ranging Consultation Exercise concerning it with disabled people and Disabled People's Organisations.

To ask some rhetorical questions with clearly-implied negative answers:

(1) How often does a Government thinktank talk directly to the people, concerning whom it is formulating new policy?

(2) How often do Government sources demonstrate any respect for the Disabled People's Movement's slogan "Nothing about us without us!" ?

(3) When has the Social Model of Disability been the basis of pre-legislative debate and policy formulation, in any department, let alone on a cross-departmental platform?

In all these regards therefore, the approach taken by the Strategy Unit is a breath of fresh air, an oasis of inclusion in the Sahara of marginalisation we experience on a daily basis. And it augurs well for the next round of legislation on disability issues having a firm foundation of disability analysis and knowledge informing it. What the draft Disability Discrimination Bill, currently being bounced like a beachball, to and fro, between Maria Eagle and Lord Carter's Select Committee, may lack, further disability legislation in the next Parliament can correct and the Strategy Unit's current labours and our efforts and those of your other respondents will bear fruit on that kind of timescale.

The consultation is, and needs to be ongoing, in other words, and the rolling agenda thereby created will hopefully be like a mighty tidal wave, whose momentum can sweep aside many of the barriers facing disabled people in this country. Rather like Old Man River (I think of Paul Robeson's superb rendition as I write) that agenda just keeps rolling, it just keeps rolling along...

We are pleased to have had the opportunity to be a small tributary, to a stream that feeds the flow of ideas into a swelling tide of opinion, that can one day demolish any dam that lies in its path. Please find enclosed our thoughts on disabled access to housing.

Bruce Birchall
Co-ordinator

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OVERVIEW

Managing Impairments in a Disablist Society

1.1 Disabling housing, disabling transport, disabling care services, disabling education and employment opportunities and disabling attitudes (to name but a few) combine and mutually reinforce one another and create an interlocking, multi-dimensional set of oppressions that encircle, define and permeate the Life Chances of Disabled People.

1.2 It is as if we have been polymerised. Whatever our individual differences in outlook, experience, abilities, aspirations and identity, we are all stuck in the same goo, sucked down by the same quicksand, enmeshed in the same uncomprehending morass of unthinking and unwitting disablism. Our identities are in part merged, in part submerged.

1.3 To develop the determination to rise above adversity, and make something of our lives (including make sense of them) we need to retain a strong sense of who we are, what we want

and what the problem is. It doesn't lie in our impairments. I tell people who insist on asking me about my leg, "why don't you ask about my stairs? They're the problem!" A quick-witted response from a disabled woman I know, when a passer-by pointed at her and said to a friend "Look! No arms!" was to point back and say "Look! No manners!"

1.4 We encounter medical-model assumptions daily, therefore and have to counter-assert social-model alternative formulations and turn the mirror back on the society that bombards us with this mis-analysis. Christopher Wren, when rejecting the idea that a statue be erected of him, near to St Pauls, argued "Sic monumentum, requiris, circumspice!" and we have to similarly urge the world to look around and at itself, if it is to understand the phenomenon of disablism and how we are caught in its spider's web.

1.5 Thus, our impairments are not our defining characteristics. I am not "that guy with a gammy leg who walks peculiarly" (a fact I make light of as "my Notting Hill Gait") but rather that all-round human being with many interests, none of which are visible to you, whose identity you can't see, because all you can see is he happens to have a gammy leg". If only people would but realise it. The impairment is as incidental to my identity as the mole in my armpit.

1.6 It is simply the social consequences of having impairments in a disablist world that define what we can make of our abilities, interests and enthusiasms. The fact of having an impairment in no way limits our abilities, but (in conjunction with disabling housing, disabling transport etc) it does limit our ability to make the most of our abilities. It significantly increases the probability that we will under-achieve. And go to our graves with much still to be said and done, and accomplished.

1.7 Under-achievement can therefore be stated to be the norm that the majority of disabled people's life-paths will converge upon and our current expectation, along with unlevel playing fields as the terrain our life-paths must traverse. All the more reason to raise our expectations therefore. And refuse to co-operate in our own demise.

1.8 Ignorance is one of the major forces we face. There is both laymen's ignorance (complete strangers accost you in the street and say "You won't be running in the London Marathon this year, then!" to which my reply is "No, But then I never did. So I am no worse off, am I?") and there is official ignorance. Nobody seems to know how many disabled people there are in this country (the DRC has just revised its estimate from 8.6 million to 10 million), and nobody has any clear idea of how many homes purpose-built or adapted for disabled people there are, either. No-one knows the scale of the problem, therefore.

1.9 This should not entirely surprise us. Society has barely caught up with the implications of an ageing population and an increase in longevity, combined with a falling birthrate, as regards social policy for a demographically-changed (and still-evolving) population. That it would readily comprehend the scale of the changes needed in attitude-barriers, policy, practice & procedure barriers and the physical barriers of the built environment, to facilitate the social inclusion of a parallel increase in the disabled population, does seem unlikely!

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2. SOME HOUSING ISSUES

2.1 How can we plan what we need to build and how we may need to adapt, if we have no clear data on which to base our policies? As a tenants' group our prime concern has to be arguing for disabled tenants to have access to social housing that is suitable to their needs and impairments. But there is no plan!

2.2 In its reply to the Select Committee Report, the government rejects the idea of a Social Housing Register being a duty it should lay on local authorities. Yet the lack of such a register is a barrier to disabled people getting access to the appropriate housing they need. This has to be seen as part of the official ignorance we face.

Obviously a register does not of itself build any more houses. It does not increase the supply. But what it can do is direct those who need it to what there is. It begins to assemble the data of what there is and where it is. It begins to define the shortfall between provision and need. And it is one tool, and a necessary one, in the diplomacy toolkit that tries to ensure that houses and flats that were built or adapted for occupation by disabled people are actually allocated to them.

2.3 What can happen, and happens all too often is that they are offered, instead, to other applicants in need of housing. A growing family that needs more bedrooms, perhaps. Their case to be rehoused is impeccable; their case to be rehoused in a flat intended for a disabled person is dubious. Yet rehoused in that way they are, as the pressure to fill voids quickly is considerable, and expensive aids and adaptations are ripped out by the incoming tenants as irrelevant to them and in their way. Sometimes the vandal is the landlord, who saves them the bother, and rips them out before handing over the keys. This has to be seen as a waste of valuable resources. And the anarchy of there being no plan, and under-pinning that, no idea of the scale of the problem.

2.4 Perhaps there need to be disincentives to landlords about doing this, similar to those that apply to countries, notably America, whose emission of greenhouse gases exceeds agreed quotas. It might be difficult to police as it depends on knowing what the housing stock is, to discern where it is being inappropriately let. i.e. we come straight back to the root problem of the lack of data-collection and the lack of reliable data-retrieval.

2.5 In the long-term, once every home is a Lifetime Standard Home, and every disabled person appropriately housed, who is then allocated what becomes less important, once the supply to disabled people is not thereby diminished, and the concept of an inappropriate letting (on these grounds) disappears.

But other criteria of appropriateness would remain. Laura Renfree, a local disabled architect who advises us, on a pro bono basis, is of the opinion that ground floor properties should only be let to disabled people and to families with young children (and buggies and prams therefore) and nobody else. It is hard to argue against that view, yet we know nowhere where it is official policy yet.

2.6 That in turn implies that the prime characteristic of a ground floor property is not so much its lack of stairs to approach it, but its potential for there being space to park the vehicles people need, be they wheelchairs or baby buggies, motorised scooters or prams. Not that most ground floor properties have adequate space for this, at present. But it is their potential to do so, that presents an opportunity, that enabling (as opposed to disabling) planning law and best practice must seize. The provision of garages for people with mobility impairments, adjacent to their homes is an essential prerequisite for their ability to come and go freely. To be able to take part in society as equals.

2.7 One might mention, en passant here, the appalling length of time it takes for amputees to have prostheses made and fitted, and the sheer awkwardness of ambulance crews having to lift and carry amputees to and from homes above the ground floor, in the many months this takes, to get them to prosthetic or physiotherapy appointments. This manhandling is a potent symbol of the powerlessness to move freely that many of us face.

3. SOME HOUSING ISSUES ARISING FROM OUR PRACTICE

3.1 Notting Hill Housing Trust was created by a local vicar as a response to Rachmanism. An alternative to overcrowding, high rents, houses in a poor state of repair, was of immediate appeal to liberal opinion and indeed NHHT has relied upon this groundswell of sympathy for there being such an alternative, throughout its 40-year existence. Its chain of charity shops, staffed by volunteers attesting to that sympathy remaining with it, as it has grown and transformed itself into a medium-sized property business, and begun to acquire some of the characteristics of the Rachmanism it was set up to oppose.

3.2 The frequency of cyclical maintenance has slipped from six years to over eight years; the botched refurbishment of many properties (by quantity surveyors not by architects) has led to poorly-designed flats with not enough space or storage space for people spending most of their lives in social housing; getting repairs done is a constant frustration (with customer satisfaction permanently at under 50%) and NHHT does not have its own direct labour force (which would enable it to offer work and apprenticeships to local people) such that the profit involved in maintaining social housing goes into the private sector and the accountability of the Trust for the quality of the work done is thereby removed (and tenants' only means of redress is through the courts).

3.3 In becoming a medium-sized property business, NHHT has diversified into developing co-ownership schemes and estates of mixed tenure (part rented, part co-owned), and in the process, lost sight of its core purpose: acquiring, building and making Social Housing available to low-income people. It makes £18,000,000 a year from "Staircasing", the profit on sales of quarter-shares in co-owned properties, but rather than plough this back into reinvestment in its older properties, it just builds more mixed tenure developments.

3.4 The previous NHHT management, in a meeting held with them, once explained how they had recently refurbished half-a-dozen small terraced houses for sale to disabled people, but there had been little interest (disabled people are typically of low income and unlikely to be able to get mortgages "didn't they realise that?). We suggested that they be rented out instead, in that case. That wasn't possible, he said, as the way co-ownership schemes were financed was different from schemes to let.

3.5 Thus properties intended for and suitable for disabled peoples occupation were not able to be allocated to them, because housing was being regarded as a commodity rather than as a service. Arguably, a similar attitude was at work in the case described in 2.3 above. The pressure to fill voids can be analysed as a case of seeing housing just as income streams, with the consequence that not interrupting the income flowing in becomes the priority, and any priority given to housing disabled people disappears in the process.

3.6 As part of NHHT's deflection from its core purpose, there has been a failure to reinvest in its housing stock. As a consequence, some 20% of its housing stock now needs to be brought up to Decent Homes Standard by 2010, a project that will require £90,000,000 to be laid aside for that purpose, and the need to lay aside that sum is variously being cited as grounds for not doing repairs on the other 80% of their properties (thus encouraging these properties, in turn, to languish, and deteriorate and become in need for elevation to Decent Homes Standard) and for not adequately funding Aids and Adaptations.

3.7 Historically, there was inadequate re-investment for there now to be 20% of homes needing to be brought up to Decent Homes Standard. Habinteg Housing Association, in contrast, who are progressive on disability housing, already have all their homes at that standard, six years ahead

of target. It is a question of priorities. Not only is NHHT about to perpetuate the historical problem, in the belt-tightening it is imposing on the rest of its portfolio, an increasing number of older houses are being sold each year (a policy TDAG is opposed to) simply so as to fund that reinvestment programme. A musical chairs policy that will result in less social housing being available to low-income and disabled people.

4. SOME SUGGESTIONS FOR AN ENABLING HOUSING POLICY

4.1 The rest of this (too brief) paper concerns itself with some suggestions and ideas that would mean that disabled tenants of Registered Social Landlords had meaningful equality of access to housing appropriate to their needs and their impairments as compared to general needs tenants. These suggestions arise from the practice, analysis and thinking of the Tenants' Disability Action Group.

4.2 Much of this material first appeared as my submission to the Scrutiny Committee considering the draft Disability Discrimination Bill (DDB 37). However the way the Civil Servants have reproduced that, both on the website and in print, fails to convey the sense intended by the 2-column layout of the original, in which a solution is placed opposite to the problem it addresses. Thus it has a rather garbled effect, scrambling the meaning, hence it is a useful exercise to restate and update that material, here.

4.3 Consistent with the picture described nationally in 1,8 above, NHHT doesn't yet know how many disabled tenants they have got, nor do they know how many flats suitable for disabled tenants they have got in their housing stock. Thus they are unable to plan what they need to do to reduce the shortfall in provision over a given period.

4.4 It seems essential that Government (through the ODPM) grasp the bull by the horns and require RSLs to establish these facts and submit plans on how they will tackle the shortfall. The numbers of disabled people, and their typical range of impairments and housing needs will vary from area to area, and cannot be assumed to mirror average national trends, useful as it will be to ascertain these. For example in coal-mining areas, the incidence of lung damage such as pneumoconiosis can be expected to be higher than in the stockbroker belt and the implication may be that those breathing difficulties mean that inclusive design in Barnsley has to have an emphasis on avoiding hills, both in the approach to ex-miners' homes and in the approach to local shops and facilities.

4.5 Whether this requirement should be established by disability legislation or by schedules attached to it or by regulatory powers invested in the Housing Corporation is a matter for some debate, It may be that an Enquiry into Disability and Housing is needed (akin to that into Race and Housing in the wake of the Race Relations (Amendment) Act) to determine the best course of action, but at this stage, what we would argue is that

4.5.1 An action programme with distinct phases to it be devised

4.5.2 There be within it a series of intermediate targets and completion dates

4.5.3 There should be a clear outcome and a target date for it (akin to 2010 for Decent Homes Standard to be achieved).

4.6 This might mean, perhaps, targets such as these:

4.6.1 RSLs to be given 2 years to produce databases which are mutually compatible with one another to assist in Choice-Based Lettings Schemes being able to widen the range of providers disabled tenants can look to for transfers.

4.6.2 RSLs to have 1 further year to produce Action Plans to rehouse all their existing disabled

tenants who need a transfer within 5 years (8 years in all).

4.6.3 Co-operation between and joint planning by RSLs to be encouraged.

4.7 Decent Homes Plus Standard:

A recent DRC paper on housing, made available to disability groups, conveys the interesting information that it has persuaded a ODPM Committee that the needs of disabled and elderly people need to be built into the concept of the Decent Homes Standard, and, indeed, should have been built into it from the outset. A Decent Homes Plus Standard is thereby defined and the issue is what the intermediate targets and completion dates are to be for its implementation. I had argued for a concept of Enhanced Homes in my DDB 37 paper, along similar lines of reasoning, restated here as 4.8.

4.8 The Need for an Enhanced Homes/Decent Homes Plus Standard:

A new Standard is needed for older houses, equivalent to the Lifetime Homes Standard for new ones, to enable most categories of disabled people to be able to achieve appropriate housing within RSLs' existing housing stock.

We cannot be left to rely on new-build properties alone (see 4.18 below) as in inner city areas with few building plots available, little new house-building may prove possible. Inevitably disabled people who need conversions with wider entrances or stairwells or load-bearing walls or ceilings will not benefit from this new standard. Many older houses were simply not built to be able to take stair lifts and hoists and we know of cases where has to wait for dead men's shoes to offer tenants who need this properties in their area. There will be limits to its applicability to all.

4.9 The question (and we lack data of course) is what percentage of older homes need to be at this new higher standard? And how soon do they need to attain it? With longevity increasing, and a correlation between old age and frailty, and estimates that 42% of tenants in social housing have either a disability or a long-term illness, to suggest 50% of older houses need to be brought up to this standard seems realistic. Accordingly, targets need to be set. In DDB 37 I suggested legislation require 25% of the Decent Homes of 2010 to be brought up to Decent Homes Plus Standard by 2015 and 50% of Decent Homes to be brought up to Decent Homes Plus Standard by 2020. But with ODPM commitment to the Standard seemingly established, we could perhaps advance those target dates by 3 years and 5 years respectively, to 2012 and 2015.

4.10 The necessity to get on with it is posed by the following information we have gleaned:

Having a disability confers no priority for a transfer unless you're totally housebound
Last year there were 97 transfers in a housing stock of 11,000, and a waiting list > 2,000
Times to wait for a transfer are being quoted as 10-15 years,
possibly up to 20 years. It is probable that NHHT is not unique in this, but typical. Research is needed into it.

4.11 Central to the argument of a Decent Homes Plus Standard advanced in DDB 37 was the notion that disabled people need more space. This can take various forms. More cupboard space at reachable heights (as we can't be climbing ladders to get to our possessions); space for Zimmer Frames or wheelchairs; space for District Nurses to store their dressing packs and medical supplies and space for our homes to be used by Nurses as treatment rooms; an extra bedroom for a live-in or stay-over carers, office space for us to organise the accounts side of Direct Payments, and crucially where disabled people try and work from home, because of the problems of disabling transport making it difficult to work elsewhere, and our low income making the

affording of rent for a separate workspace problematical, we will need the extra square footage of workspace with which to do so.

4.12 This runs counter to the tendency of RSLs to use a concept of "need" as regards the size of accommodation a household needs, which does not take into account whether a member of the household is a disabled person. This produces too-simplistic equations: e.g. single person = 1 bedroom flat, which are discriminatory. The disabled tenant is then not offered flats that are appropriate to his or her needs, but pressurised to take less than they need, to get a transfer within a reasonable time span or to get one at all. Of particular concern to us is any attempt to pressurise disabled people into taking places in sheltered housing or residential care, for lack of suitable independent living options in the community. Clarity on this central issue that what disabled people want is the opportunity to live in their own homes, with the support services they need to do so, is essential. Arguing for institutionalisation of disabled people as a solution to their housing needs not being able to be met within the Social Housing sector is not part of the inclusion agenda!

4.13 Three useful new concepts were defined in DDB 37 that could be adopted more widely in conducting this debate. **Over-occupation:** the extent to which the limited space available is overstretched, by having to be multi-purpose and multi-tasking. An amputee needing a constant supply of clean stump socks or a tenant with a succession of rotating sleepover carers will both have extra laundry requirements and need a utility room, e.g. to reduce his or her over-occupation and consequential stress to a manageable level. Arguing by analogy with Disability Living Allowance & Disability Working Allowance which attempt to meet the extra expenditure costs of disability, DDB 37 postulated that a similar concept of Disability Living Space Allowance is now needed.

4.14 **Disability Living Space Allowance**

This takes us back to the databases discussed in 4.6.1 The database as regards the tenant's needs has to reflect the

"extra requirements" of the onset of disability, otherwise the real needs of tenants will be masked by RSLs' oppressively limited definitions of "needs" being imposed on them (see 4.12). Planning to meet needs will be undermined if the needs are under-estimated by inadequate definition of needs or inadequate minimum standards being applied.

4.15 **Disability Working Space Allowance:**

Arguing by analogy with Disability Working Allowance a concept of Disability Working Space Allowance is similarly needed. This could cover both a tenant's own working space and the working space of District Nurses and of carers within the tenant's home. Where a tenant receives Direct Payments to employ carers and does their tax and payroll himself, s/he will need office space (a desk, filing cabinet, a safe) and workspace within the home to do so. If in addition s/he is working from home, this will need to be recognised with a higher Disability Working Space Allowance.

4.16 Ultimately an option that needs to be developed by RSLs, as there is a general social trend away from commuting to work, is living space/studio space complexes for a single rent, some of which are specifically designed and built for disabled people to occupy, and their aspirations to live in such spaces need to be surveyed and on the database.

4.17 Once these concepts are utilised, the extent of over-occupation (and the need for extra space) can be quantified as the shortfall: DLSA + DWSA - current space and databases can have that calculation recorded in them.

4.18 Lest it be assumed that Ken Livingstone's London Plan, with its promise of 100% of new-build properties being built to Lifetime Homes Standard and 10% to Wheelchair Access Standard is a universal panacea for disabled tenants, it needs to be explained why it is not. Firstly, it won't come in at once. NHHT has taken the pragmatic view that it will make all new planning applications on this basis but that those schemes that currently have planning permission will be built, as planned, with only 10% of units of Lifetime Homes Standard.

Secondly, it only applies to London not to the rest of England (Wales and Northern Ireland already have a 100% Lifetime Homes Standard requirement for new-build homes). Incorporating the Lifetime Homes Standard into Part M of the Building Regulations will be the way to achieve it throughout England, but I'm told this is unlikely to occur before 2006.

4.19 But principally the problem is that **the existing disabled tenants of RSLs cannot be allocated these new-build homes**. Like the Torment of Tantalus in Greek Mythology, they remain tantalisingly out of our reach. This is because of the housing finance system currently in force whereby all new-build allocations have to go to tenants on the Local Authority Waiting Lists. Thus whilst the London Plan benefits disabled people not yet in social housing, it provides little comfort for those who are. This barrier is buried deep in ODPM/Housing Corporation procedures, and it is they who must demolish it.

4.20 NHHT's policy that disabled tenants get no special priority for rehousing unless they are completely housebound is driven by the shortage of suitable flats to offer as transfers, not by it being the fair or appropriate treatment of those tenants' needs. However, the Disability Discrimination Bill has as its starting point equitable treatment of disabled tenants and, driven by this priority, it can be seen the policy is discriminatory:

Two cases affecting committee members illustrate this: a wheelchair user in a 3rd floor flat in a block whose lift breaks down constantly, and a woman born with arms that only go down as far as her elbows, who was 7 years getting a ground floor flat with windows she could open and climb out of if needs be: both unacceptable fire risks

4.21 The policy needs to be that tenants with mobility impairments are not placed above the ground floor in the first place. If London was built like Salt Lake City (long and low) this would be easy to fulfill. So: what are RSLs to do if they haven't got enough suitable ground-floor flats? RSLs will need to be given the money to acquire the extra flats. And in saying that, we need must highlight an area of weakness of the Draft Disability Discrimination Bill, that the Select Committee has highlighted, the failure of Maria Eagle and Andrew Smith to supply a cost-benefit analysis in introducing the bill, as Ministers are supposed to do, to indicate where the money would come from.

4.22 This doesn't of course deal with the very common situation, highlighted in the National Housing Federation's oral evidence to the Select Committee, of tenants who become disabled, mid-life, once already in social housing. Upper-floor flats that once suited us when we were in our 20s and 30s are no longer so suitable once in our 50s and 60s. Especially if we become wheelchair users on upper floors, not through being allocated to upper floor flats but by being on upper floors and proving to need to use a wheelchair. The needs of elderly people start to merge into the needs of disabled people, here, A Lithuanian man in his mid-70s in a NHHT flat near me has to cope with a 4th floor flat, with no clear means of redress. Again, driven by a shortage of suitable properties. A partial remedy worth considering is conferring a right of first refusal for tenants over 40 on upper floors to move to a lower floor

flat if one becomes vacant in their house. This would, for non-disabled people, need to exclude ground floor flats as it would be in conflict with these being made available to disabled people who needed ground floor.

4.23 Another otherwise sensible policy, the right of succession for live-in carers, needs to similarly be tempered with realism that the way in which their succession rights are to be conferred should not reduce the supply of flats suitable for disabled people. Where the disabled tenant (that the carer worked for) who died, lives in a flat that is suitable for another disabled person, the succession right should be to another flat, not that flat. Where the flat the disabled tenant who died vacates is not one that is suitable for other disabled people, there would seem to be no reason to deny the live-in-carer the tenancy.

4.24 An intractable problem, stemming from older housing stock not being designed or built for independent living in the community by disabled people, is that many ground floor flats are not level access to the street. This can be in part remedied by external stair lifts, funded by an improved system of Disabled Facilities Grants, but the long-term design solution has to be that the Government needs to decree all new buildings, whether for rent or for owner-occupation or for commercial use are built flush to the street.

4.25 A connected issue is that the concept of accessible housing needs to be enlarged to include the approach to a flat or a house. So what if the flat is flush to the ground at its entrance, if it is a mile inside a council estate, where no bus calls, or at the top of a steep hill that makes every shopping trip a misery? Databases need to concern themselves with this level of detail, too, or many wasted viewing journeys will result from Choice-Based Lettings Schemes that have not assembled and made clearly visible such details.

5. RECOMMENDATIONS

5.1 That the ODPM consult widely with disabled people and Disabled People's Organisations regarding the specifications of the new Decent Homes Plus Standard that would take into account the housing needs of elderly and disabled people, with

5.1.1 a clear analysis of the kind of housing problems it can tackle, and those it acknowledges can only be solved by new-build homes.

5.1.2 a timetable for implementation, with intermediate targets for RSLs to achieve

5.1.3 places for elected representatives of disabled tenants on the management structures of RSLs to oversee the implementation of this Standard

5.2 That the Strategy Unit set up a Permanent Consultative Body of Disabled People to advise it on the future direction of strategic planning on disability, and that amongst its working groups there be one on Housing.

5.3 That the National Housing Federation's Disabled Tenants' Charter, after it has been the subject of a consultation with disabled people, be developed into a Best Practice code for RSLs on how they house disabled tenants and how they involve them in their work. That one of the first tasks of the proposed Strategy Unit Consultative Group (in 5.2) be the development of the Charter into a Best Practice Code, in conjunction with the DRC and representatives of the Strategy Unit.

5.4 That the rolling agenda of disability issues that arise from various Government Departments be collated systematically by the Strategy Unit, as the basis of discussions with the Consultative Group.

yours sincerely

Bruce Birchall
Co-ordinator