

EQUAL OPPORTUNITIES COMMITTEE

Tuesday 21 November 2000
(Morning)

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EQUAL OPPORTUNITIES COMMITTEE **22nd Meeting 2000, Session 1**

CONVENER

*Kate MacLean (Dundee West) (Lab)

DEPUTY CONVENER

Kay Ullrich (West of Scotland) (SNP)

COMMITTEE MEMBERS

*Linda Fabiani (Central Scotland) (SNP)

Johann Lamont (Glasgow Pollok) (Lab)

*Marilyn Livingstone (Kirkcaldy) (Lab)

Mr Jamie McGrigor (Highlands and Islands) (Con)

Irene McGugan (North-East Scotland) (SNP)

*Mr Michael McMahon (Hamilton North and Bellshill) (Lab)

Mr John Munro (Ross, Skye and Inverness West) (LD)

Nora Radcliffe (Gordon) (LD)

Tommy Sheridan (Glasgow) (SSP)

Elaine Smith (Coatbridge and Chryston) (Lab)

*attended

WITNESSES

John Keenan (Visualise)

CLERK TO THE COMMITTEE

Lee Bridges

ASSISTANT CLERK

Alison Campbell

LOCATION

Chamber

Scottish Parliament

Equal Opportunities Committee

Tuesday 21 November 2000

(Morning)

[THE CONVENER opened the meeting at 10:08]

Items in Private

The Convener (Kate MacLean): Although our numbers are somewhat depleted, we should get started. We have received apologies from Kay Ullrich, Nora Radcliffe, Elaine Smith and Tommy Sheridan. I hope that other members are on their way and will join us soon. Do members agree to take items 2 and 5 in private?

Members indicated agreement.

10:08

Meeting continued in private.

10:14

On resuming in public—

Housing Bill

The Convener: I welcome John Keenan to the committee. I apologise at the outset for the fact that we are in the chamber today; it is not the best room in which to give evidence. There are not many committee members here at the moment, for which I also apologise, but I expect that they will arrive during the course of the evidence.

I invite John Keenan to make a short statement to the committee, after which members can ask questions.

John Keenan (Visualise): I am the development manager for Visualise, which is an action group and registered charity for multi-disabled visually impaired people in Scotland. Our client group includes some of the most disadvantaged people in Scotland, purely because of the range of disabilities that they have. They have a visual impairment, sometimes a dual sensory impairment, usually a severe physical disability and, sometimes, extremely challenging behaviour. It can be very costly to provide services for that client group.

Visualise was formed 12 years ago by parents of multi-disabled children who were at the Royal Blind School at the time. The parents were concerned that, when their children left school at 18 or 19, there were absolutely no suitable services for them. We formed Visualise to address that problem.

Eight years ago, we opened our first residential place in Fountainhall Road in Edinburgh for six young residents who come from all over Scotland. There are two from Edinburgh, one from Midlothian, two from south Lanarkshire and one from north Lanarkshire. They are given 24-hour support for 52 weeks a year. They go horse riding, abseiling, canoeing—you name it, they do it. They go to the theatre and to pubs and restaurants and they live a normal life in the community.

We are currently trying to expand on that provision, because there is a need for more residential places in the community, particularly in Lanarkshire. I am speaking to parents in that area. Our model for residential post-schooling in the community is a small home with full support for three residents. We feel that that is a nice model—it is not too big and not too small and it is a good financial model. We also plan to open another place in Edinburgh in the near future.

I am also developing day care services in Edinburgh. We opened an outreach service two

years ago but, because of the specialised nature of that service, it was very expensive. There has been a continuing battle with the City of Edinburgh Council to get it to provide the funding that is necessary to maintain that service. However, earlier this year, the Guide Dogs for the Blind Association came on board. Its representatives came to see the service and liked what they saw and that association has offered financial support to make the service affordable to the council. It wants to use the model throughout Scotland and will provide financial support to develop the service.

Shall I go through a few more background points?

The Convener: That would be helpful. Perhaps you will also tell us whether you provide respite care.

John Keenan: We do not provide respite care at the moment, but that is always on our minds. Respite is a difficult service to fund. If we employ staff, pay their salaries and provide accommodation, we have to pay for that 52 weeks a year, although a local authority might come along only now and again to buy two or three days, two nights or whatever of respite care. If someone paid us to provide a service that they would use when they needed it, that would be fine. However, we are a small organisation and could not take on such a financial commitment.

The provision of proper respite care is a problem. We hope to plan towards providing respite care. Our residential home in Edinburgh has six residents and it is too big and noisy and too much is happening there. We hope that the number of residents will be reduced to three eventually—that would give us some spare capacity for respite care. However, for that to happen, three people would have to move out and we would have to find somewhere for them to go.

I will talk about a problem that is causing us great concern at the moment. One of the residents at Fountain Hall has moved into a long-stay hospital. That has happened because of his behaviour. Because he was becoming violent, we felt that Fountain Hall was no longer suitable for him. We had hoped that he could move to the Greenbank centre, in Edinburgh—a centre in a hospital setting for people with learning difficulties—but no beds were available there. The only bed in Scotland that was available was in Banff, so he is there. However, we are trying to get him back to Edinburgh. To do that, we need to open another suitable house, in which that young man could be contained, looked after and supported if his behaviour became intolerable.

The Convener: Could you take the committee through the main points of your submission to the

housing bill consultation?

John Keenan: I mentioned the possibility of local authorities purchasing properties from the private sector and renting them to organisations such as Visualise. We make that suggestion because of time considerations. I have spoken to housing associations and Scottish Homes and I know that it takes two years to get such a thing off the ground. There are suitable properties in the private sector, but unfortunately, they are quite expensive—a detached villa might cost £250,000 or £300,000. Such properties are available, but Visualise does not have the funds to purchase them and we find it difficult to raise a mortgage because we do not have any capital assets. We lease the property at Fountainhall Road from the Royal Blind School—all that we own is the fittings and furnishings.

It would be useful if local authorities could purchase properties. Ninety per cent of our funding comes from the local authority, which pays our running costs—the local authority pays any rent that has to be paid. Therefore, it would be more sensible if the local authority supplied the property instead of paying us to rent a place. That sounds logical. It would help in emergencies, when we needed quickly to get a property within the community. If such a facility were available, we would not have to go through the whole funding process. I know that it is a costly suggestion, but it would suit organisations such as ours when we faced an emergency situation and needed property quickly.

I have a question on the Executive's proposals on the registration and regulation role of the successor to Scottish Homes. Do those proposals relate to the registration and regulation of organisations?

The Convener: Yes.

John Keenan: That would be important for organisations such as ours. We would have a bit more credibility—especially in applying for section 10 grants—if we were registered and regulated. We have a proven track record, of course, but anything extra helps.

You mention that you would be interested in our comments on homelessness. As I said, homelessness does not mean only that somebody does not have a roof over their head; it can mean a lot of different things. A client of ours who is in hospital is effectively homeless—there is nowhere for him to go when he leaves hospital. The place where he lived before he entered hospital is totally unsuitable for his emotional needs, because it is too big and busy. He needs a smaller, quieter location that will not upset him. Homelessness is not only about people sleeping rough on the streets.

The Convener: Would it be all right for members to start asking questions?

John Keenan: Yes, that will be fine.

Linda Fabiani (Central Scotland) (SNP): I would like to ask for some general background information. First, in a perfect world, approximately how many clients could your organisation assist?

Secondly, do you define the residence that you have in Edinburgh—and any future accommodation—as stepping-stone accommodation for people who are moving on, or is it their permanent home?

Thirdly, you mentioned that you have spoken to housing associations. Do you have any partnerships or links with, or are you speaking in depth with, for example, Key Housing Association, which provides multi-tenanted accommodation for people who have learning difficulties?

John Keenan: What was the first question?

Linda Fabiani: In a perfect world, how many people would you be able to help?

John Keenan: That all comes down to resources.

Linda Fabiani: Yes, but I am trying to get a handle on the size of your client base and how many people are affected.

John Keenan: That is an interesting question, which no one can answer, because no proper studies have been carried out.

I shall cite an example concerning the closure of Lennox Castle hospital. The Royal National Institute for the Blind asked the staff of that hospital to conduct a study into how many people with learning difficulties also had a visual impairment—it found that about 10 or 15 per cent of the patients had a visual impairment and a learning disability. RNIB thought that that result was quite low, so it commissioned an independent survey, which found that 80 per cent of people in long-stay hospitals who had a learning disability also had a visual impairment.

We did something similar with the City of Edinburgh Council. A couple of years ago we asked the council to conduct a survey in its adult training centres to identify people who had a visual impairment. We offered our services, although the council would have had to pay for them. The survey identified one person in the council's adult training centres who was visually impaired. We are now redoing the survey. I have told the council about the findings of the RNIB's report and I have provided the council with publications about how to identify visual impairment.

10:30

I hope that the current survey will reveal far more people who have a visual impairment than the previous survey did—we could be talking about thousands of people in Scotland. Because they are people with severe learning disabilities, they are probably classed as such and nobody is concerned about the visual impairment that can compound such problems. Many people have not been assessed properly. I hope that approaches such as person-centred planning will, in future, rectify that and that services will become needs led. Problems such as visual impairment and hearing loss will then be identified and services will be tailored to suit individuals' needs.

Linda Fabiani: My other two questions can be tied together. Do you define the residential accommodation that people get in Edinburgh and elsewhere as stepping-stone accommodation, from which they can move on to a more independent lifestyle? Do you have links with established housing organisations, such as Key Housing Association?

John Keenan: That is an interesting question. When we opened Fountain Hall eight or nine years ago, we were asked when we were registering what age group we would be dealing with. When I filled in the form, I indicated that we would be dealing with people aged between 16 and 23. Our hope was that, when people were about 23, they would be able to move into their own tenancies and would have less support. However, for the residents, the age of 23 came and went. We then had to reapply for registration with no upper age limit. As parents, we do not want our children to spend their whole lives in one place; we want them to develop.

Some of our clients will never live on their own without a great deal of support. We have examined leasing of properties for single tenancies, but that is not financially viable. The fees would have to be met by the local authority and it would be too expensive to provide the necessary level of support. However, we are always looking into the issue because we want people to move on. They must move on if we are to create vacancies.

Linda Fabiani: I was thinking that the likes of Key Housing Association might be able to help.

John Keenan: I have had many meetings with Horizon Housing Association, which is looking for sites in North and South Lanarkshire. I have also spoken to South Lanarkshire Council officials about its empty homes initiative. I keep returning to the example of our client up in Banff—I have made applications on his behalf to all the housing associations in the Edinburgh area, but with no luck. Even though we see him as a priority case,

we have had no success in finding accommodation for him in Edinburgh.

Linda Fabiani: I take it that he would need accommodation that would include a 24-hour care system.

John Keenan: Exactly. A tenancy would be in his name, but we would have to provide 24-hour support. His behavioural problems mean that we would need not one member of staff, but two, all the time. It would be too stressful for one member of staff to be isolated in a property with somebody who has extreme behavioural problems. A model home would be one that housed perhaps three residents and two members of staff. That would be more financially viable than having two members of staff for one resident. A minimum of two members of staff is needed and things have to be affordable.

Marilyn Livingstone (Kirkcaldy) (Lab): You spoke about barriers and said that finance was the main barrier. If you wanted to spread your provision further, would finance be the main barrier to that? What are the other barriers to your being able to provide a service throughout the country?

John Keenan: Our service can be located anywhere. We do not have big pockets of our client group in any one area. The six Edinburgh residents come from four different council areas. When a person needs a place, the standard of service that is available is the most important thing. The location is not always important, as long as it is not too far away from the person's home. Our client group is used to travelling. Many have been through the Royal Blind School and places such as that, so they are used to being away from home. In fact, Edinburgh becomes their home. My son comes from South Lanarkshire, but his home is now in Edinburgh.

Marilyn Livingstone: In an ideal world, would your service be available in rural areas such as the Highlands and Islands and urban areas such as Dundee?

John Keenan: In an ideal world, yes. However, as I say, we provide a very specialised service that includes a high level of support—it is expensive. I would love to provide the service throughout Scotland.

Marilyn Livingstone: In section 7 of your submission, you mention

"vulnerable people needing support and in particular 'group homes in the community for people with learning disabilities'."

Could you expand on that?

John Keenan: Are you interested in the part in which I quote from the Executive's paper?

Marilyn Livingstone: Yes. Below that quote you say that you support the Executive's

"intention that the grant will also be available to support people through temporary crises such as homelessness".

How does that fit in with your earlier comments? Does it fit in?

John Keenan: Money has to be available to provide for emergencies; but I am not sure what you are asking.

Marilyn Livingstone: Earlier, you said that homelessness was much more than a problem about people not having roofs over their heads; in section 7 of your submission, you talk about the Executive's

"intention that the grant will also be available to support people through temporary crises such as homelessness".

Could that be part of the solution to some of the problems to which you alluded earlier?

John Keenan: I welcome the introduction of new and flexible funding arrangements. I am not sure how that funding will be allocated, but we would like to be in a position to apply for funding on behalf of our client group.

Marilyn Livingstone: That is what I am driving at. You have made two references to homelessness and the way in which funding would help. How would a grant work?

John Keenan: It would work through people identifying the problem, applying for a grant to solve the problem and receiving the grant within a couple of weeks, rather than a couple of years. Money should quickly be available for use; people should not have to go through a grant application process that can take a year or a year and a half. I appreciate that people have to set budgets, but that is currently behind a problem with Scottish Homes. Housing associations must apply to have money put in the Scottish Homes budget and they are required to submit an application for funding six months before the financial year in question. It is, typically, a year and a half before work can start on a given project.

Does that answer your question?

Marilyn Livingstone: The main thing that you are talking about is a reduction in bureaucracy.

John Keenan: Exactly. I was trying to skirt round that, but it is basically what I am talking about. Everything needs to be more proactive and we have to cut through the red tape. There should be a quick route to funding when needs are identified.

I deal with local authorities. I can have a grant allocated to my organisation for emergency circumstances, but I must still wait nine months for it, despite the fact that the money has been

allocated and approved. That is purely because of budget restrictions. In an ideal world, it would not come down to money—or the lack of it—but it does. I appreciate that, but there should be a mechanism to release money when a need is identified.

Mr Michael McMahon (Hamilton North and Bellshill) (Lab): I will stay on the subject of money. I represent a constituency that covers parts of North and South Lanarkshire and I am interested in your programme in that area. I am aware that Lanarkshire Health Board is in the process of expanding its care in the community programmes; it is closing down institutions and getting people into the type of accommodation that you appear to be providing for visually impaired people.

You have covered your discussions with the two local authorities that I have mentioned, but have you had discussions with health boards—to help find assistance with the resources and money that you seek—in areas where you are attempting to develop your programme?

John Keenan: I have been trying to get health board support for years, but I have been unsuccessful. I have always felt that our client group would have ended up in long-stay hospitals if it were not for organisations such as ours. Health boards are getting off the hook, because the full cost of our service is met by local authorities, with some Department of Social Security money. Health boards should contribute to the support that we provide for clients who, traditionally, would have ended up in long-stay hospitals. I have tried to get support from health boards. Perhaps our organisation is too small and perhaps they do not want to talk to us.

Mr McMahon: Is that the case throughout Scotland, or is it specific to one or two health boards?

John Keenan: That applies to Lothian Primary Care NHS Trust—we have a problem with that trust now. I hope that we can get support from it to help us with the problem. That relates to our client who is in Banff simply because there are no beds available elsewhere in Scotland. I hope that we can provide something for him, with health boards' support. I am trying to get a dialogue going with Lothian Primary Care NHS Trust. I have written to members about that problem. Unfortunately, it all happened about the time when Donald Dewar died and people had other things on their minds. In short, we are trying to get support from health boards.

Mr McMahon: Have you had continuing discussions with Lanarkshire Health Board?

John Keenan: We had discussions many years ago, but there has been nothing recently. I would

like to pursue that if possible. We think that we have enough emergencies in Edinburgh, but I know that there is a problem in Lanarkshire and I have spoken to many concerned parents.

10:45

The Convener: You say that the bricks and mortar of local authority housing tends to be unsuitable and that it would be useful if councils were able to buy houses and rent them to organisations. Have you made approaches to any councils in that regard?

John Keenan: No.

The Convener: Where did you get the properties that you currently use?

John Keenan: They belong to the Royal Blind School. That school is sometimes bequeathed properties and it also owns a few properties that are currently used as part of the school, but which might become available next year. The Royal Blind School is very sympathetic to our requirements. However, I would need to ask the school to buy us something that would cost about £300,000, while it must spend a lot of money in other areas.

The Convener: It strikes me that local authorities often release houses for different projects and I would have thought that they might have housing that could be adapted. They may have suitable properties that have been kept on different accounts—perhaps as part of the education department. I am not sure that councils would be able to buy private sector housing.

Linda Fabiani: I am trying to understand learning disability and physical disability in relation to visual impairment and your links with the Royal Blind School. What level of visual impairment would someone in the Royal Blind School have? Is that the level of visual impairment of your client group?

John Keenan: It is not so much about visual impairment. What is a visual impairment? There is a range of visual defects. There are three groups of students at the Royal Blind School. There are those who I describe as the normal blind—people who are visually impaired, but who have no other problems. There is a middle group, who have visual impairment and a slight learning difficulty or minor physical disability. That group is taught at the main school along with the normal blind. Our client group, however, has complex needs—visual impairment together with a range of other disabilities. Our clients have profound support needs and they attend a special unit in the Royal Blind School, called Canaan Lodge. That is where our client group comes from.

Linda Fabiani: Are there other places in

Scotland that provide an education service to that group? Do all your clients come from Canaan Lodge?

John Keenan: They do not all come from Canaan Lodge, but we grew out of Canaan Lodge. We have close links with the Royal Blind School, although that is not the sole source of our client group. We have clients from adult training centres in Edinburgh, for example. Many years ago, the Warnock report was published, which said that everyone has a right to education. However, some people missed out on that because of their age. We have a client from North Lanarkshire who is dual-sensory impaired and he went to a school in Glasgow. Our clients come from all over.

The Convener: Do you have links with other organisations, such as Sense Scotland?

John Keenan: Yes. We have close links with Sense Scotland—we modelled our organisation on Sense Scotland. It is 10 or 15 years ahead of us and has been very helpful. When we opened a residential place in Edinburgh, we sought assistance from Sense Scotland, because it had opened its Overbridge centre a few years previously. It gave us good advice.

Sometimes the two organisations' client groups overlap. I mentioned that we have a dual-sensory impaired young man; if Sense Scotland had had a place for him at the time, it is likely that he would have taken up that provision. Sense Scotland also has clients that have come through the Royal Blind School, who would have come to us if we had provision for them in place. We have close links with Sense Scotland, Guide Dogs for the Blind Association, the Royal National Institute for the Blind and the Royal Blind School.

The Convener: Thank you for coming to give evidence to the committee.

Reporters

The Convener: The next item on the agenda is reporters' progress reports. There is a written report from Elaine Smith, who is not here. The recommendation in that report is to note the key issues that face women in relation to transport.

Mr McMahon: The reporters group is in the same position as it was a couple of weeks ago. It is very difficult to find a time to get us all together. I know that Linda Fabiani and Jamie McGrigor are interested in supporting the initiative, but it is hard to find time to meet. However, we are working on that because it is important that we reconsider the issues—there are members who are keen to do that.

The Convener: We will conclude that item as there are no other reporters here.

10:53

Meeting continued in private until 11:07.

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