

**Housing and Adult Social Services**  
**Physical and Sensory Impairment Strategy**  
**Consultation Event**  
**09.11.2007**

**Workshop messages**

There were four workshop themes:

- Independence
- Health and well-being
- Finance
- Employment

Workshops were asked to address four questions:

1. What are the barriers to an improved quality of life for people with physical and/or sensory impairment?
2. Which support services currently work well?
3. Which support services currently don't work so well?
4. How can support services work better together?

Each workshop ran twice.

## Independence workshop

### **What are the barriers to an improved quality of life for people with physical and/or sensory impairment?**

- Lack of information about services in suitable formats/readily available.
- Standard big print format.
- Information – consistent contact?
- Bureaucracy
- Internet access versus leaflets? the challenge is keeping information up to date
- Fostering dependence – need to foster independent attitudes
- Physical environment – conflicting needs
- Pedestrian areas – can't park between certain hours, car parking generally a barrier
- Mobility – buggy, buggy parking, buggy rage
- Resources – Disabled Facilities Grant
- Information
  - Right information
  - Location – drop-in centres, surgeries, organisations
  - Website – access / don't like using them, cost, special equipment
  - Leaflets – like them, can go back to them
  - Mixed approach including personal approach (trust and rely)
  - Service users often more knowledgeable
  - Accessible to all – language – plain
- Resources – eligibility criteria
  - Set too high – due to funding
  - Risk to independence
  - Discretion – individuals don't fit slot into one category – more flexible – can be insulting
  - Individual needs are fitted into a system
  - Individual budgets – insufficient info – means tested?
  - Need for City of York Council to give more information giving sessions
  - Assessment first – Occupational Therapist's "Need"
- Assessment of need – Occupational Therapy service
- Open referral system – but varied response within a service dependent on the profession - more knowledge required

- ? self referral for minor adaptations
- user is the expert – accept responsibility re risk
- Profession with skills and knowledge
- Listen to individuals
- Moving the goal posts – policy changes

### **Which support services currently work well?**

- Direct Payments – more choice
- Disabled Facilities Grant / aids / adaptations – supporting people with independence ??
- Some evidence of responsiveness across agencies
- Multi professional approach – good / condition specific contact
- Review processes potentially good, need to be orientated towards outcomes.
- Examples of swift assessment and provision
- Emphasis on keeping people at home
- Continuing Care processes
- Pockets of good practise, more joined up working required
- Direct Payments
- Independent Living Scheme
- Getting support initially difficult, but once you get it, it often works well
- Single Assessment Process forms / IT systems
- Voluntary sector, e.g. Liaison Officer at the hospital
- Crisis intervention

### **Which support services currently don't work so well?**

- Too close a scrutiny at start of assessment process
- Lack of consistent point of contact
- Tendency to minimise needs
- Lack of preventive services / prevention of carer breakdown
- Lack of personalised service
- Too many contacts, too many professionals
- Allocation policy

### **How can support services work better together?**

- Better joint planning – long term funding

- Meaningful consultation ... actions, outcomes
- Closer links with voluntary agencies
- Better partnership arrangements, for example “Valuing People” learning disability services
- Why don't departments talk together internally within Housing and Adult Social Services and outside
- Forms – same info collected over and over again from different departments – Single Assessment Process form / IT system – outside agencies use them – updated version ... who holds them
- Health need to “shadow” social services to see impact of non-registration / registration
- Listen!

## **Finance workshop**

### **What are the barriers to an improved quality of life for people with physical and/or sensory impairment?**

- Information – find other ways to provide information, then people can choose, for example, cancer information drop in, good advertising on TV and radio, hospital site
- Centre for Independent Living in the future
- Direct access / more subtle access
- Web site – accessible
- Lots of different ways needed to get information out to people
- Communication barrier – interpreters – hospital needs 24 hour interpreting provision
- Having to book an interpreter means having to wait – its not fair!
- Opening bank accounts for direct payments
- Artificial barriers around getting accommodation, for example, age criteria
- People's attitudes!
- Finding out about things – what is there above basic income mobility allowance – does this exclude you from other services?
- Where do we start to get information ?
- Need link between hospital and community, community and community, area and area
- What is a key worker?
- “One Stop Shop” – starting point – Centre for Independent Living
- “Information Prescription” – will this have all the information required?

### **Which support services currently work well?**

- People having direct payments is giving people more choice and control
- Starting to recognise disabled people as full employees in City of York Council ... could be better though
- Social workers giving equipment to help is working well
- General support ... help with forms
- Improved getting equipment out to people

- Technology / door bells / smoke alarms – easier to install
- Access to work / Job Centre Plus
- An organisation called Working Links
- Sure Start
- Future Prospects

### **Which support services currently don't work so well?**

- Poor communication within City of York Council and other departments, not enough linking in
- Getting banks and big institutions to help people with needs – booking interpreters
- Opening bank accounts for direct payments
- Department of Work and Pensions not communicating with the Council – difficult getting interpreters to sort things out quickly
- For some people British Sign Language is their first language – not English!
- More face to face – letters don't always get the best response
- Work place equipment / aids also not good
- York Blind and Partially sighted Society not getting referrals for equipment from social services, which means some people are not getting equipment
- What about where people are being encouraged to work beyond 65 – Government shift
- Benefits complicated – feels like you have to know the system – different rules, age dependent, means tested
- Link between agencies could be better – Department of Work and Pensions and social services

### **How can support services work better together?**

- Improve communication systems
- Get rid of jargon ... legal need can make this difficult sometimes
- Benefit issue can make it difficult for people getting work – can be scary / confusing / all benefits
- Specialist links between health, social services and voluntary sector
- The right type of accommodation – estate agents giving good information – adapting existing accommodation

- Waiting list , for example, have been on waiting list for 3 years and still not moved

## Health and well-being workshop

### **What are the barriers to an improved quality of life for people with physical and/or sensory impairment?**

Note: no service users in the morning group. Information may not have got through to some users, some group members aware of some not invited, also need to consider access for people in paid employment. Point of contact needed for feedback from other users / routes needed.

- Language – disability, impairment, long term conditions ... what conditions should be included?
- Services defined by our language, citizens may have different definitions
- Information – right time
- Lack of resources
- Disability – still important to focus on healthy lifestyle
- Do we know enough about how information is currently accessed – what works, what doesn't work
- York Blind and Partially Sighted Society – information in the hospital – may not be able to have someone for each condition, but could work for other conditions
- Low Vision Pilot Project– working on a service that will address integrated approach – rehab, optometrist, information and networks
- Access to support at an early stage – applicable to all impairments
- Social well being – think beyond health
- Only eligible if registered Blind or Partially Sighted, is this true?
- Who do services focus on – user told a service works with older people – message wrong, plus perception of users
- Services open outside office hours for those working
- Query value of registers, still some issues about awareness in community based services, importance of listening and 'being alongside'
- Resources can be maximised by integration – preventing duplication – small pots of money together can do more
- How far can service users 'self direct' support – outcomes real to individuals health and well-being

Note: Making Research Count hosting two events next year – University doing some research re Centres for Independent Living

- Would like to use facilities that were used before becoming disabled
  - Oaklands – going for √√ accreditation for all different disabilities – staff training
  - York University Gym up and running in this way
- Transport
- Resources
- Finances
  - services / activities should be free for personal assistants / carers
- Going into hospital – lack of staff skilled in communicating with deaf and blind patients
- Information – how to find out about things
  - Blind Society Newsletter
  - GP's
  - Public places
  - Radio
- Communication barrier – how are we going to communicate with gym staff?
- Cost of awareness
  - Aim at all types of disabilities, sensory and physical

### **Which support services currently work well?**

- Deaf Resource Centre outreach work
- Blind social worker in hospital (but not for each clinic)
- Learning support available (but not always known about)
- Low vision pilot project
- In the future Centre for Independent Living has potential to provide user led approach, co-ordination, information
- Potential support – transport
- Changing attitudes – listening, sharing
- Age Concern and community organisations
- Responsive homecare service from hospital
- Health services
- District nurses
- Move community focused groups (specific issues)
- Staff with basic skills – signing

- Identifying someone who has a visual / hearing impairment, particularly in the hospital

### **Which support service currently don't work so well?**

Note: there were no issues recorded under this heading for these two workshop groups. Many of those things that don't work so well are the barriers to an improved quality of life.

### **How can support services work better together?**

- Information / communication – GP's, Libraries
- Better signposting – to all services, health, City of York Council
- “One stop shop”
- Look towards improving services for those with a disability – emergency calls
- Raise awareness!
- Pooled resources

## **Employment workshop**

### **What are the barriers to an improved quality of life for people with physical and/or sensory impairment?**

- Support services - interpreters
- Equipment like smoke alarms not available
- Access to buildings
- Disability awareness of employers – cost – other staff – attitudes - right information?
- Benefits – affected if working
- Information / communication – lots of things out there but how do we find out about them?
- Expectations of people – assuming you cant do things
- Access to education / higher education
- Leaflets – other formats
- Access to rights as an employee
- Access to work – support within the workplace
- Work places may not be accessible
- Transport to and from work
- Financially worse off
- Employers feel cost implications in employing disabled people
- Employers responsibilities – time consuming, sickness, culture
- Employers unaware of help available
- Individual aspirations may not be met or recognised
- Services sometimes geared to low paid work
- No information about employment in GP surgeries
- Knowing where to look for employment

### **Which support services currently work well?**

- Workstep
  - 'taught and trained me'
  - national programme
  - gaining and maintaining employment
- New Deal (through Connexions)
  - Interview preparation
  - CV
  - Benefits advice
  - Good at providing ongoing support

- Information about services not available enough, but service are out there
- Working also helps with other things in my life, I am now learning to drive'
- Future Prospects
- Workstep, Job Centre Plus
- Access to work service – transport, resources
- Initial well planned support in employment?
- Job coaching – good, but short term
- Security and ongoing support
- Placements and voluntary opportunities
- Occupational Health service

### **Which support services currently don't work so well?**

- Access to the right information
- Disjointed services
- Benefits system
- Health teams don't consider employment issues
- Thinking about people's whole lives instead of separate aspects within support services
- Knowing what's out there, right places to go for information, information not available
- Are services available?
- Do people know about services?
- Supporting buddies and carers to access training – reduced fees / costs
- Long term, sustained support
- Improved networking between organisations
- Awareness of services – raise profile
- Transport services – bus passes – after 9am
- Awareness of Disability Employment Advisors – Job Centre Plus
- Occupational Health

### **How can support services work better together?**

- Centre for Independent Living – with the right level of staffing in terms of experience / expertise
- More communication about what's out there
- Attitudes

- Employers
- Other staff
- Organisations
- Successful employers to share stories
- Give disabled people the chance to show what skills they have
- By knowing one another
- Information on employment through GP
- What is available?
- Encourage and support employers to support their employees
- Link with Benefits, Connexions, Education (adult and further)
- Being able to provide life skill to individuals
- Link with college / Job Centre Plus / Supported Employment
- More effective strategic planning – awareness of need throughout community
- People are put in boxes!
- Networks and partnerships