# City of York Council Sensory Provision: Customer Survey Feedback

### 1. Background

As part of CYC's review of its Sensory Provision various consultation exercises have been undertaken. These included a Sensory Engagement Event with key delivery partners and stakeholders in October 2015, followed by a Market Engagement Event with prospective service providers in March 2016.

Following on from these events a comprehensive survey of existing customers has been undertaken during April-June 2016. The target audience included people with sight loss and/or hearing loss. The survey included service users accessing voluntary sector provision commissioned by CYC, those accessing provision directly from CYC (social care workers, rehabilitation officers and wider social care teams) and those not accessing provision at all.

#### 2. Methodology

## **Customer Survey**

A comprehensive customer survey was distributed via CYC and voluntary sector mailing lists. The survey asked customers to identify their age range and covered a range of topics, including the current support received by service users and their satisfaction with it / whether there were gaps in existing provision.

The survey also focused on the importance of the following **key themes** to users of sensory services:

- Access to information and support about support services
- Ability to communicate and receive information in an appropriate format.
- · Being able to socialise and communicate with others
- · Access to counselling and support with emotional needs
- An individual's ability to look after themselves, their home and their family
- Access to social services e.g. rehabilitation, equipment, care

- Access to financial advice and support, including access to benefits
- Access and understanding of new technology e.g. online shopping, voice recognition software etc.
- · Access to education, training and lifelong learning.
- Access to employment and volunteering opportunities.
- Access to sports and leisure opportunities.
- Access to affordable, easy-to-use equipment

Service users were asked to rank the importance of the above on a scale of 1-5 (with 5 indicating 'very important' and 1 indicating 'not at all important'). Customers were then asked to identify whether their needs were being met in these areas (with 5 indicating 'needs completely met' and 1 indicating that the service user's needs were not being met at all).

## **Customer Focus Groups**

In addition to the surveys 2 x focus groups were held with customers experiencing sight and/or hearing loss. These were hosted by the York Blind and Partially Sighted Society and Jorvik Deaf Connections, a user led group of customers with hearing impairment.

## 3. Summary of Survey Feedback

The customer response demographic consisted largely of those with sight loss, with only 21% experiencing hearing loss and 18% Dual Sensory Impairment.

- Specialist equipment was highlighted as the most prevalently used source of existing support by respondees, with 32 out of 37 citing having access and making use of specialist equipment as part of their current support.
- "Meeting others with sight loss can be an inspiration, gives a sense of determination."
- "Emotional support with health and wellbeing is the most important thing to me- and feeling capable."
- This was followed closely by those who currently made use of both social and leisure activities and counselling and advice services.

This corresponds directly to Question 5, in which customers had been asked to rate the importance and provision of a range of practical, financial and emotional support needs. With 94.59% of customers rating being able to 'socialise and communicate with others' as extremely important.

- According to customer comments this need was necessary to help 'build confidence' and 'avoid isolation', largely being met through counselling, communal activities and events arranged by organisations such as YBPSS and the Wilberforce Trust.
- Over 75% of customers felt that the equipment they needed was largely accessible and affordable.
- The majority of customers agreed that: "Support comes from regular contact with local society, where I can ask questions and get support."
- Although many customers felt that they had little use for the internet, they highly appreciated any assistance in accessing audio books and other forms of entertainment.
- The area where the largest number of customers felt that their needs were fully met was access to information services and support, with 37% rating it a 5.
- Responses were divided over the importance of both work and volunteering and education and lifelong learning, with 35% rating access to education as not important at all and 30% rating it as highly important.
- According to the customer comments this is largely due to the age variation in the sample, with many customers highlighting it would be of higher importance had it not been for their old age. Opinions on current provision of the above mentioned services were equally divided, with 14 out of 37 suggesting they felt access to learning provision was inadequate

- There was also some concern surrounding access and street mobility, many customers felt that getting around the streets of York presented a challenge. Customers felt that they could cope well although they had to rely heavily on partners, friends and family. The issues are worsened by a lack of consistency and proper notice of road works and bus timetable changes. "Road safety is a big problem. Stuff'on pavements, workmen closing pavements with no way round and traffic lights. Often have to rely on good will of passers by when I get stuck.
- Overall service users felt that they could largely access the services
  they required to a lesser or greater extent, they often felt more
  comfortable and supported when accessing services and equipment
  through organisations specifically tailored to their impairment rather
  than directly from the hospital or through a social worker. A full break
  down of customer responses can be found in Appednix A.

## 4. Summary of Focus Group Feedback

## Focus Group 1: York Blind & Partially Sighted Society (YBPS)

The focus group lasted for 2 hours and was attended by 22 service users with visual and/or hearing impairment (predominantly visual impairment). The event sparked a healthy debate across a range of subject areas and was well received by attendees. A brief resume of key discussion points is set out below:

**Service Delivery Models:** In terms of the operating model that might best deliver the best outcomes for customers there was unanimous opinion. Attendees strongly felt that sensory provision would be better delivered by strengthening and maintaining voluntary sector arrangements. The key source of support, advice and assistance for participants in their day-to-day lives was the voluntary sector, particularly YBPS.

**City of York Council Provision:** Very few of the focus group participants had any awareness of City of York Council's Sensory Team or its functions, although that could be because CYC staff are largely

based within voluntary settings and perceived as being part of the 'voluntary sector offer'.

Those that did have an understanding of the role of CYC social care workers and the CYC funded Mobility/Rehabilitation Officer suggested that they offered an excellent, but highly restricted service – for instance the Rehabilitation Officer was only available three days per week and was overwhelmed with demand.

It was noted by one participant that CYC has steadily reduced its inhouse Sensory Team over recent years whilst investment in the voluntary sector has remained fairly static. Investment in the voluntary sector was the key to achieving results, but there had to be some financial commitment behind that, and not over-reliance on the sector to leverage its own resources.

**Social Care Assessments:** The group did not think that being classed as eligible for support under the Care Act translated into particularly creative solutions for people with visual impairment - access to equipment, benefits advice and support with rehabilitation seemed to be the key sources of support. If anything the Care Act seems to have created more paperwork.

Customers were aware of Direct Payments and had thoughts/ideas in terms of how these could be used creatively to support them in their lives. Few had taken their personal budget in the form of a direct payment however. It was felt that there was a lack of guidance around Direct Payments and how they could be used flexibly. Also, there was a lack of guidance around how to manage PAs and the paperwork associated with Direct Payments etc.

NHS / Hospital Provision: Participants thought that the hospital based services (funded by the Vale of York CCG) were important and the connection between these, and the services provided by City of York Council needed to be maintained. The Low Vision Assessments Clinic should be offered within a community setting.

The role of the Eye Care Liaison Officer (a CCG-funded YBPS staff member based within York Teaching Hospital) was regarded as particularly helpful - as an initial contact point when medical treatment has ended and the patient was left with a residual level of vision.

**Social/Emotional Support:** Many of the participants stressed the value of initiatives to overcome social isolation- volunteering, befriending, counseling and emotional support.

Access to Equipment: Access to a city centre shop front facility where equipment was available to buy was regarded as important. How expensive/complex does a piece of equipment have to be before an individual pays for it themselves? It was noted that 'essential' equipment was routinely offered at the point of registration, when many people tend not accept it (but then want equipment later down the line). In addition, it was sometimes provided as part of a programme of rehabilitation.

Access to information about support services: The focus group mentioned that there was heavy reliance on voluntary organisations such as YBPS. The council website was difficult to access unless people had the ability to download speech software onto their computer, a difficulty being that a sighted person is required to undertake the download in the first instance. Many people do not have a computer and are not computer literate. Access to information and advice outside of office hours was regarded as important.

What was absolutely critical in all of the above cases was the ability of people to return later down the line and to access all types of activity – Low Vision Assessments, Equipment, Counselling etc.

## Focus Group 2: Jorvik Deaf Connections (JDC)

The focus group again lasted for 2 hours and was attended by the Management Committee of Jorvik Deaf Connections (who had consulted with their 90 strong membership beforehand). Group members range from 16-60 and suffer from varying levels of hearing loss. A brief resume of key discussion points is set out below:

**Service Delivery Models:** Attendees strongly felt that sensory provision would be better delivered by strengthening voluntary sector arrangements. A shared city centre base for all sensory community organizations would be ideal - from which various forms of support, information and advice could be delivered to the community. It was felt that this would offer stability to organizations such as JDC, place them on a firmer footing moving forwards and enable them to reach out to more people with hearing loss. The key to success was to establish strong working relationships between different local voluntary organizations, which JDC felt would prove to be a significant challenge.

There is very heavy reliance on word of mouth and peer-to-peer communication amongst people with hearing loss; building the capacity of locally based user-led support groups is absolutely critical. The importance of emotional support and counselling was identified as being of paramount importance – more than access to equipment, sign language classes etc (although these were valued).

It is often the grassroots user-led groups, run on a shoestring with no paid staff, who people with hearing loss turn to for support on a day-to-day basis.

City of York Council Provision: CYC provision was felt to be limited. There were positive comments about the CYC social care worker for people with hearing loss but the worker was only part-time and therefore unable to fully address the needs of the community. Much of the CYC support was focused around access to equipment and how to use it.

Access to Information and Advice: Group members regarded City of York Council's customer contact centre in West Offices services as a key source of information and advice around practical issues - benefits, housing enquiries etc. particularly as it also accommodated other

agencies such as CAB. However, CYC has no specialist support for people with hearing loss - no instant access to a BSL interpreter for instance.

Some other authorities operate a nationally recognised online system in their customer contact centres, which allows instant real time access to a remote BSL interpreter via a screen. Group members has reported numerous instances of being allocated a ticket number at the contact centre, but not being able to hear the number when it was called out - thereby missing their allocated appointment slot.

CYC's website was regarded as being well designed and set out but there was no webchat chat or signing function that people with hearing loss could access in order to further understand web content. Deaf Sign Language users whose first language is not English would find it difficult to access the site.

Out of hours support was regarded as being important because many people with hearing loss are actively employed.

**General Point:** JDC reported significant levels of challenge faced by people with hearing loss, many of which are entrenched, longstanding difficulties - none are improving or being effectively addressed. JDC reported significant social isolation amongst its members, a feeling of being cut-off from the mainstream of society - often resulting in mental health issues, alcoholism, heavy smoking etc.

#### 5. Conclusion

Respondees repeatedly mentioned that support organisations should remain in touch with the service user. Service users may require a clinical reassessment of their eye/ear function, mental and emotional health, rehabilitation **at any time** (not just at the point of initial diagnosis). To know what support is available and to be able to quickly and easily access that support at any point in time is of paramount importance.

There was overwhelming customer support for provision to be based within the voluntary sector; and a strong degree of support for existing voluntary organisations within the City. It is clear that the provision of existing voluntary organisations was held in high regard by customers.

**ANNEX B** 

Greater co-ordination and collaboration within that provision would be welcomed; although not at the expense of losing the uniqueness that each individual voluntary organisation is able to bring to the table – this is particularly true of the local voluntary organisations supporting visually impaired people. The strengths of the sector were regarded as being very firmly based in the fields of social / emotional support and information / advice

CYC provision (social care workers and rehabilitation) was not regarded as in any way poor or unhelpful but limited in terms of the resource available. Demand significantly outstrips supply. Irrespective of who provides these 'traditional' services moving forwards it was regarded as important that they were operational from voluntary sector bases and community spaces.