

City of York Council

**Strategy for the Development of Services to Support
People with a
Physical and/or Sensory Impairment**

November 2008

Chapter 1

Executive summary

This will be the first strategy to take a long-term view of the services that people with physical and/or sensory impairment will need in York. Most of the data and messages presented in the strategy relate to people age 18 to 64 years, though we recognise that older people, people with mental health problems and people with learning disabilities will access services that people with physical and/or sensory impairments use. This document begins to identify the priorities to deliver the vision of services that people with physical and/or sensory impairment want.

Changing services takes time: time to plan; to identify investment opportunities and funding; and time to develop new models and pathways. If we can identify now the changes needed over the next 10-15 years, we can give clearer messages to providers to enable them to take up the challenge, and we can plan the best way to change and invest in our resources. And we can work with people with physical and/or sensory impairment so that they can continue to shape the services for the future.

Prevalence studies show that the increase in the number of people with physical and sensory impairment amongst adults aged 18-64 over the next 20 years will not be significant, though this may be affected by social life-style changes that lead to more people being affected by long term conditions.

Alongside this, the number of children surviving with complex conditions is rising, but there is limited detailed national and local data available about children specifically with physical and sensory impairments.

As more people with learning disability live longer into adulthood this will have an impact on sensory impairment assessment and support services, as there is increased prevalence of sensory impairment amongst this group. Demographic changes and prevalence studies show a marked increase (approximately 49%) in the number of older people aged 65 and over with a sensory impairment.

The Independent Living Review was set up in 2006 to help implement the government's aim that all disabled people should have the 'same choice, freedom, dignity and control over lives as non-disabled people'. The Review informed the draft Independent Living Strategy (ILS) issued by the government in March 2008.

Disabled people told the Review that one problem they faced was a lack of understanding of what independent living actually means. To help overcome this, the ILS offers the following definition:

Independent living does not mean doing things for yourself or living on your own. Instead it means:

- *Having choice and control over the assistance and/or equipment needed to go about your daily life*
- *Having equal access to housing, transport and mobility, health, employment and education and training opportunities.*

This is something we need to be sure that we understand to ensure future services are developed to fit in with this definition. We also need to ensure we incorporate the messages from the national Independent Living Strategy consultation into this strategy as they emerge.

This strategy looks at how services need to change and develop to fulfil the aspirations of disabled people.

Making changes at a local level will demand a culture shift across all sectors - statutory, voluntary, community and commercial. This is to ensure that people who have a physical and/or a sensory impairment have support that promotes independence and inclusion, and does not create dependence and/or institutionalisation.

Chapter 2 identifies whom this strategy is for and what its overall aim is.

Chapter 3 looks at the strategic context, and the national and local policy drivers, which will help shape services.

Chapter 4 begins to describe the current and projected population of people with a physical or sensory impairment.

Chapter 5 begins to review the quality and quantity of current support and provision and identifies where services need to change.

Chapter 6 begins to identify the gaps in services and to consider what future services might look like, and gives some indication of the initial actions to move in that direction.

Chapter 7 is a suggested format for an action plan, which identifies the priority areas for development.

The strategy still has some gaps:

- At this stage the strategy is not council wide, nor is it a joint strategy with local health services, though this is an ambition for the future. Nevertheless, colleagues from the wider council and local health services have been involved in the development of the strategy. A Partnership Board approach has been proposed to bring agencies and representatives of disabled people together in a formal framework for future planning.
- There are information gaps which will require us to think about what information we need to start and collect and how.
- At this stage there is no formalised route for further consultation across the whole community of people in York who have a physical or sensory impairment. However there will be feedback available from social care customers and the wider consultation may be rectified through the work being undertaken within the Council to establish a Disabled Person's Forum.
- The strategy will need to be developed to form specific commissioning and service plans within the corporate framework for delivery over the more traditional 3-5 year timescales. These plans will influence and support the development of the right services across all sectors.
- At this stage we have not been able to include very much information about those people who use or provide neurological services. Links with the implementation of the

neurological long-term conditions activity will be made as this strategy develops.

Key messages from needs analysis

Having looked at what we know about the needs and aspirations of people with a physical and/or sensory impairment we have concluded the following:

- Clear, concise and up-to-date information about the local disabled population is difficult to get hold of
- In the 2001 Census, 12,506 people of working age (i.e. 16-64 inclusive for men and 16-59 for women) in York consider they have a health problem or limiting long term illness (this figure includes all impairments, not just physical and sensory impairments)
- The most commonly reported impairments for both men and women are problems of the back or neck, the heart or circulation, legs or feet, or breathing problems
- 6 Wards in York have above the national average of people who consider they have a health problem or long-term illness: Fulford; Guildhall; Heworth Without; Huntington and New Earswick; Osbaldwick; and Westfield
- Nationally the majority (85%) of people with sight problems are aged over 65. Numbers are set to double over the next 25 years due in part to the ageing population, but also to an increase in underlying causes such as diabetes
- Nationally there is an estimated 9 million deaf and hard of hearing people in the UK, about 688,000 of these are severely or profoundly deaf. Approximately 41% of all over 50 year olds have some kind of hearing loss, this increases to approximately 71% of over 70 year olds
- Nationally there are about 24,000 people in the UK who are dual sensory impaired. These figures do not take into account the large number of older people who are losing both their sight and hearing

- Further work is required to develop our understanding of local need across agencies, in particular to understand whether people are already getting the help and support need they need from low level, preventive services in the community
- We should share what we know about the local disabled population to influence the development of universal services which promote independence

Key messages from service mapping

We have looked at some of the services that are currently available in York specifically for people with a physical and/or sensory impairment:

- We have a good range of low level, preventive services in the City, provided mainly by the voluntary sector
- There has been a steady increase in the number of direct payment recipients over the last five years enabling more service users to have choice and control over their social care services.
- Traditional, building based council day services have ceased and have been replaced by individually tailored packages of support facilitated by Direct Payments or individual budgets
- We need to better understand the needs of those disabled people who want to access learning and employment opportunities
- We need to better understand the needs of parents with a physical and/or sensory impairment.
- We need to ensure that where an informal carer contributes to helping a person with a physical and/or sensory impairment to live at home that we support the carer as well as the cared for person
- We recognise that people may well be getting the help and support they need from universal services

Changes needed over the next 10-15 years

We have begun to identify some of the improvements that will need to take place over the next 10-15 years:

- The way we collect and analyse information will need to change to allow us to understand more about local needs to ensure we deliver services that provide 'best value'
- A range of council and NHS services will need to change to ensure that the needs of people with a physical and/or sensory impairment are addressed
- We need to increase the number of opportunities for self-directed support
- Where we know a condition can be best managed by early intervention we should target resources to achieve better outcomes in these situations
- A greater focus on employment support will be required
- Improvements investment to adapt the home environment will support greater numbers of individuals to achieve independence.

Plans for delivery

To achieve these changes we will need to agree priorities with our partners and make clear plans for the future.

The proposals to strengthen the local infrastructure by establishing a disabled person's network or forum, a partnership board and a centre for independent living will support this in time.