CONSULTATION QUESTIONS

1. The strategy outlines a care pathway (page 10).

(a) If you are a service user and/or carer, please tell us what difference you believe the implementation of the pathway will make to the services you experience.

Deafblind Scotland hopes that the implementation of the strategy will give deafblind people automatic access to communication and mobility support and ensure that they receive support to access information in a format which is appropriate to them, be that alternative formats or human aids to communication. Also that the needs of deafblind people will be recognised on e-datasets across health boards and social services systems for the purposes of assessments, services and equipment.

(b) How can we best ensure that services and support meet your needs?

Providing information in formats that is accessible, ensure that services are accessible and that communication methods used are appropriate to the needs of the individuals.

(c) If you are a care provider, what changes will you need to make to implement the pathway?

Deafblind Scotland anticipates the need to recruit and train more staff who are appropriately skilled to support deafblind people in a person centred and inclusive manner. Thus ensuring deafblind people can have quality lives, feel safe; have things to do; are able to meet people; to stay as well as they can; to live where they would like; and not to have to deal with discrimination.

(d) How will you make these changes?

Through robust recruitment and selection of individuals who are skilled in British sign language. New recruits will also undergo specialist training in deafblind communication and guiding skills.

Workforce development must be at the heart of ensuring that the Sensory Impairment Action Plan is an effective strategy for ensuring a clear pathway of support is in place. Training on sensory impairment must become mandatory in workforce development strategic planning.

2. The strategy identifies key factors that need to be in place to ensure the pathway is successful (Page 11 para 6.7).

(a) Which of the key factors are most important for a successful pathway?

1. Appropriate communication support which takes into account the preferences of the individual.
2. Taking full account of Sensory Impairment in all assessments.
3. Screening for Sensory Impairment in particular dual sensory loss.
4. Deafblindness/dual sensory impairment is recognised as a discrete disability and recognition given that specialist support is needed for individuals to lead fulfilling lives, not an add on to existing services.

(b) Which are the most challenging to put in place?

Ensuing appropriate communication will be challenging due to the shortage of skilled workers and a lack of funding to finance the specialist communication support.

Ensuring deafblind people are able to access the Strategy will be hugely challenging for those who are fully deafblind and rely on human aids to communication will be time consuming.

The document and language used within the document has been challenging to put across in a meaning way to deafblind people.

(c) Do you think that any key factors have been missed?

Post diagnosis support and sign posting for those newly diagnosed with sensory impairment appear to be a vital but missing aspect of the strategy. A directory which is accessible across the private, public, third and independent sector needs to be developed, we need to be better at sharing information for the good of the people we support.

3. The strategy identifies areas for action that should be addressed going forward (Page 13-16)

(a) Which of the areas for action will be the most challenging to implement?

Implementing a “register” of hearing loss and dual sensory loss could be challenging, many Deaf people may not want to be included on a register.

A distinct register for VI, HI and DSI (Dual Sensory Loss) would be useful.

In order to make information accessible to those who have a dual sensory loss often requires human aids to communication on a one to one basis, each deafblind person’s needs are unique, a one size fit all approach cannot and does not work.

Screening for dual sensory loss is challenging, often one impairment can often overshadow the other, this can depend on which one came first.

Using transcription services such as RNIB may be economical but they are not always the most appropriate services for everyone.

(b) Which of the areas for action will make the biggest difference and why?

Appropriate person centred communication support. The person must be given choices.

(c) Are there any other areas for action that you would like to see included within the strategy?

Workforce development is a huge gap in this strategy.

4. Please comment on the current provision of sensory impairment services as either a service provider or service user. If you have any experience of sensory impairment services, please let us know what you think of them: this should include any experience of one-stop shops.

Current services within One stop shops include specialist organisations in single sensory impairment, no dedicated provision is available to support those with a dual sensory impairment within these settings.
Local services are good but for low incidence complex disabilities where low numbers of people are involved specialist services have specialist knowledge and are better able to meet needs.

5. What difference will the implementation of the strategy make to your life?

6. Does this strategy properly reflect the current climate and developments in policy and practice for children and young people particularly in relation to the Getting it Right for Every Child approach and the Doran Review?

7. Do you have anything you wish to add to the Sensory Impairment Strategy or any other general comments that have not been covered by the questions?

Mention is made at point 6.7 – both sensory impairments. No recognition of deafblindness/dual sensory loss as a separate disability

Two separate description paragraphs of deafblindness and dual sensory impairment does this mean they are being considered as two separate disabilities? It would be a concern to separate the two into distinct groups as based on the WHO definition **Sensory Impairment**

The World Health Organisation (WHO) defines impairment as: **"Any temporary or permanent loss or abnormality of body structure or function, whether physiological or psychological. An impairment is a disturbance affecting functions that are essentially mental (memory, consciousness) or sensory, internal organs (heart, kidney), the head, the trunk or the limbs"** **www.who.int**

The term sensory impairment is therefore often used when referring to damage that occurs to the structure of the eyes or ears affecting the normal functioning of our vision and hearing senses. Dual sensory impairment (or dual sensory loss) refers to a combined vision and hearing impairment (or loss). When we talk about deafblindness or dual sensory loss, the proprioceptive and vestibular systems can also be impaired and may be included as "sensory impairment" in reports written by professionals.

We would want the term deafblindness to include all degrees of dual sensory and not just those who are fully deaf and blind