

## 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.

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

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

As a care provider we will work in partnership with other agencies to ensure that needs of individuals with a sensory impairment can be supported with increase awareness and skills of our care providers.

We will also look at scoping current provision to identify strengths and gaps in current service provision.

(d) How will you make these changes?

Within Ayrshire there are plans to develop a Pan Ayrshire service which would include the 3 local authorities, NHS Ayrshire and Arran we are developing this alongside RNIB Scotland and Action on hearing loss.

There are current development plans to establish a care pathway that reflects that identified in the strategy whilst recognising that good links already exist between partners.

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?

All parties involved including professionals, service users and carers must be clear what the care pathway represents and how it will work in practice.

It is important that this pathway is outcome focussed for the service user.

Key elements include;

- Clear referral routes
- Clear recording of the number of service users who require a service as a result of their sensory impairment. It is important that we can capture these figures in order to plan and deliver services in an appropriate manner
- It is also important that service users have equal access to services
- Information in accessible formats

- Sensory impairment awareness training is vital if the needs of clients are to be recognised by staff members out with this field of sensory impairment and the clients are to be referred onto appropriate services.

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

Raising the standards of services given the current financial challenges we are experiencing. Although we welcome the recommendation for sensory screening and identification, this would have resource implications for anyone providing services to people with sensory loss. Following the screening, a commitment would have to be in place to refer to a dedicated sensory impairment service.

Issues of partnership working may flag up challenges in particular with I.T systems and issues around sharing information and confidentiality.

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

One of the key factors missing is recognising that British Sign Language (BSL) is recognised as a language in its own right and this has implications in terms of equalities.

I think it is important that the “Scottish Vision Strategy” document is referenced in this strategy and the “See it My Way” document, which gives clear outcome for people with a visual impairment.

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?

Carrying out an audit for all the spending on sensory impairment across Scotland would prove to be a challenge. Resources for people with a sensory impairment are often tied into spending for wider care groups in particular Older People. A cost benefit analysis of such an exercise should be considered.

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

A key area of action that will make a significant difference is the introduction of sensory impairment awareness training to front line staff across the care sector. The Vision 20/20 report highlighted that many eye conditions are treatable if they are diagnosed early. Early detection and treatment will help to prevent avoidable blindness.

Early intervention from the specialist sensory impairment workers i.e. habilitation and rehabilitation workers would reduce the need for dependency on other services and maximise individual’s independence in line with a preventative strategy.

A more general point is that services and support should be outcome focused. The service user should be at the centre of all planning with a personalisation approach being adopted.

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

It should also be strongly highlighted that the needs of children born blind or visually impaired are very different from adults who lose their vision later in life and have some visual memory. The training needs of children and adults are very different and this has to be properly emphasised in the document. Also a clear definition of habilitation and rehabilitation should be outlined and the difference of the two approaches. The significant importance of individuals receiving rehabilitation and habilitation at an early stage should also be highlighted.

A notification system is introduced between health and local authority (social Work Services and Education) to identify children who have a visual impairment to ensure an early intervention.

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.

NAC Sensory Impairment service comprises of;

Team Manager  
2 Social Work Assistants  
2 rehabilitation officers

Three of the social work assistants are also trained in British Sign Language which minimises use of a dedicated interpreting service and the rehabilitation officers are trained in adult rehabilitation and another in children's habilitation and deafblind communication.

The team provide a full assessment and care management service with an outcome focus and directly provide habilitation and rehabilitation service.

There is an accessible referral system whereby other departments, agencies and services users themselves can refer to our service direct. We also provide information, support and advice as part of our duty system and specific drop in support to deaf community.

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?

See response to 3c

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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?

If an increased screening program is implemented to identify sensory loss the result of this may have a significant increased referral rate to local authority services. This will have a significant impact on resources , as current research indicates that sensory loss is on the increase and this issue will have to be closely monitored and addressed.