

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.

Not applicable

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

Not applicable

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

As an integrated Community Health and Social Care Partnership, West Dunbartonshire CHCP welcomes the development of the Strategy.

We have already clear and robust partnerships with key strategic services, voluntary and third sector organisations and as well as service users/patients. This includes our Public Partnership Forum whose scheme of establishment and representatives reflect both health and social care priorities, one of which is sensory impairment.

The CHCP has, through its long established Joint Sensory Impairment Forum, implemented services and strategic development which reflect the tenant of 'See Hear'. Clear pathways between specialist and generic community services have been developed to reflect the needs of blind, deaf and deafblind people as represented within our Joint Sensory Impairment Forum.

Key to this is integrated care across different support services within adults, older people and children and young peoples' services. Robust links to GP practices and across clinical practice (local audiology and optometry clinical leads) are also embedded, alongside well-established partnerships and innovative service delivery models with third sector organisations.

Our pathway reinforces the direct access routes to specialist services for those with a sensory impairment, and also the need for specialist assessment and care management services across West Dunbartonshire. Both are established in current pathways.

We are seeking to embed the pathway to reflect services where there is a likelihood of large numbers of people with a sensory loss e.g. community older people's services, hospital discharge services and children with disability services.

(d) How will you make these changes?

The CHCP has, through its long established Joint Sensory Impairment Forum, implemented joint services and strategic developments which reflect the tenant of 'See Hear'. The changes required have been agreed through our established joint governance routes; reflecting our model of community planning in practice within West Dunbartonshire through Integrated Health and Social care across adult, older people and children's services.

We have used learning from our implementation of Reshaping Care for Older People and the Early Years Collaborative to deliver consistent and robust joint services and test actions across service boundaries.

Partnership working across all community planning partners in West Dunbartonshire is well established. Within sensory impairment this includes the development of "See if we can help"; an award winning resource to support community pharmacists to focus on improving the patient experience. We would wish for this type of good practice to be rolled out across all community pharmacists with the support of national partners and this strategy.

Within West Dunbartonshire, key partners ensure local plans and strategies are agreed, progressed and monitored through the Joint Sensory Impairment Forum.

The main focus of which is to :-

- Review, monitor and develop local services
- Ensure national strategies and plans are incorporated into local planning
- Commission specialist services for people with a sensory impairment

We have a long running commitment to service user involvement and partnership working, reflected within our suite of commissioning strategies including the Commissioning Strategy for Rehabilitation and Enablement, and sitting below this our local Action Plan regarding Sensory Impairment. Both were developed with partners from the statutory and voluntary sector, local community groups and service users.

Within West Dunbartonshire, the established CHCP's status as a joint vehicle for the planning, allocation and management of WDC and NHSGGC health and social care resources (both strategically and operationally) is recognised as a clear manifestation of community planning in practice. As reflected within the published Care Inspection report December 2012 for the inspection of the CHCP.

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?

Clear support pathways are established across West Dunbartonshire Community Health and Care Partnership, and key partners. The Single Shared Assessment process, which is utilised across adult services, provides a consistent approach to assessment and care planning, which is a key aspect of the pathway.

West Dunbartonshire's suite of commissioning strategies explicitly models a single care plan across all care planning affecting all care groups.

The CHCP uses learning from other work streams e.g. older people's services and children's services, to support our transformational change approach. As a result specific pathways have been developed for older people affected by sight loss and dementia in partnership with third sector partners.

These lessons from health and social care integration across all services support partners to deliver:-

- Communications between organisations that are open, with a willingness to exchange information freely; often expressed through the use of a shared language
- A shared user focus across the agencies which underpins joint working
- Reduced barriers to partnership working
- Shared resources to ensure effective use of public monies

Social care for children focuses on vulnerable children and their families. These families are served by adult health and social care services and their children are served by specialist NHS community services and are also a core focus for NHS primary care and community services. Unified delivery of these services in a single Partnership improves quality, efficiency and effectiveness.

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

As an established integrated health and social care system, the challenge for us related to delivery pathways has been addressed at a local level. The challenge for West Dunbartonshire relates specifically to working effectively with national partners effectively whilst maintaining sensitivity to the needs of our local community.

Strategic planning for sensory impairment in West Dunbartonshire has been established for a number of years within the Joint Strategic Planning Partnership. The planning activity takes place within the Joint Sensory Impairment Forum with representation from statutory, voluntary and third sector partners as well as representatives with sensory loss.

It is essential for service planning for people with a sensory impairment to be part of this wider Partnership, and to recognise the need to work closely with other strategic groups and services, particularly those who may be addressing the needs of the same population. For example, the Joint Planning Groups for Acquired Brain Injury, Learning Disability, Physical Disability and Older People, as well as the Children with Disabilities Sub-group of the Children and Families Strategy Group Services. These links are embedded in our structures and practices.

We have an established commitment to ensuring robust arrangements for helping individuals through transitions, specifically with regard to moving from children's to adult services; with a specific partnership approach with third sector colleagues to meet the needs of young people with visual impairment and learning disability. The CHCP and partners are engaged in reinforcing this challenging area of work.

Whilst information sharing is robust, there are specific channels where challenges remain to ensure that there are established pathways pertinent information from all parties needs to be available.

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

Explicit links to Reshaping Care for Older People, specifically given the expected numbers of older people and prevalence of older people affected by sensory loss and the impact on their ability to participate and achieve good outcomes within a reablement and rehabilitation setting. There is a need to draw a line between See Hear and Reshaping Care for Older People.

Whilst supporting the transition between children's and adult services is crucial in a person's life, transitions has a wider agenda, from adult to older people's services, moving between services as need changes, housing transitions. Pathways planning should be explicit around this additional area of support, particularly where the numbers of older people are expected to rise and therefore the numbers of people affected by sensory impairment will also increase.

There is a need for dynamic workforce planning to ensure that key professionals are equipped to provide timeous and appropriate support. Workforce planning needs to reflect the range of specialists as well as generic staff working within our communities.

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?

The recommendations reflect much of the current practice in West Dunbartonshire.

We have joint recording systems and performance management frameworks across all services which are reported through the joint governance structures, supporting our planning processes. Data collection across the CHCP and strategic partners is already established and robustly monitored.

Robust service and strategic planning is in place and evidenced through reporting mechanisms. This links directly to a clear knowledge of local resources and our community planning partners, including our third sector interface. One challenge will be supporting joint working with national partners, requiring them to shift from a one size fits all model e.g. one stop shop for sensory impairment, to a more flexible locally sensitive approach which takes account of local planning and demographics.

All our strategies are subject to being Equality Impact Assessed, with EQIAs reported to committee as part of our established Joint Performance Management Framework.

Our integrated care pathways have specific provision for supporting visually impaired prescribing through the 'Let's see if we can help' guide, which recently won a COSLA Bronze award under the Tackling Inequalities and Improving Health category and has been adopted by other areas and agencies. The challenge will be to share and build on this good practice to support an improved patient experience within all communities.

West Dunbartonshire pioneered vision passport provision where an adult with dementia or learning disability are offered needs led modified assessments and

specialist support in partnership with third sector partners. These services are mainstreamed within CHCP services therefore the pathways are clear within the community; the challenge will be to ensure our acute colleagues are aware and familiar with the pathways.

Specific provision for sensory screening with vulnerable groups is established. The CHCP in partnership with the third sector led vision passport scheme, which supports adults with learning disabilities and those with early onset dementia. It is important that this type of work is shared with other workstreams e.g. the recently published Dementia Strategy and Same as You consultation and as part of the delivery of other key policies including self-directed services and when considering the promotion of the work of the Centre for Health and Care.

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

Providing more connectivity, at a national level, across agendas supports integrated and joint up service delivery which in turn improves the experience and outcomes of the individual and their carers/family. We will be using the strategy to sense check or joint delivery and ensure seamless support to our patients/clients.

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

We would seek clarity around what is meant by mandatory training on sensory impairment, many areas will already provide training to staff from a range of services and teams however there is no agreed national standards/practice around what is included within sensory impairment training, thus will there be more detail about what is expected within a mandatory training session.

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.

West Dunbartonshire integrated Sensory Impairment service provides assessment, advice and assistance to people of all ages who have a sensory impairment. In addition to providing direct help, the team supports other services that may have contact with people who have a sensory impairment and gives support to local groups. The Sensory Impairment service also provides advice, support and information to the carers of sensory impaired people and carries out assessments of carers' needs.

The team has a knowledge and understanding of the problems faced by people with a sensory impairment, and by their carers. They provide a service to all ages, from young children and their parents to older people, and to people who have sight, hearing difficulties or dual sensory issues but who also have other difficulties such as physical disabilities or mental health problems. They work along with people who have sight or hearing loss to identify ways to overcome difficulties, to assess the practical help they may need and to get support from other services. Experienced members of the team work together with other multi-disciplinary teams to assist people who have complex needs.

The service is also based around our partnerships with key local partners and joint working to deliver innovative and pioneering approaches to the issues affecting people with sensory loss.

The development of a Let's See if We Can Help resource for health and social care professionals to assist individuals with vision impairment to self-manage their medicines. This scheme has won recognition locally and nationally and is recognised by the Care Inspectorate as an example of good practice.

The vision passport service provided in partnership with the third sector provides eye health testing, along with significant support for carers and families and has been mainstreamed into CHCP services.

A ground breaking service to identify and support those with dementia and sight loss has recently come to the end of a one year pilot, due to the success of the outcomes for individuals has been extended and expanded across a range of community services.

Other partnerships include specialist services for deafblind children and young people, home support to those with sight loss, communication support to those with hearing loss, early intervention within the acute service and opportunities for group support who are coming to terms with their sensory loss.

The CHCP and the Council for Voluntary Service provides community development support to local self-help groups for people with sensory loss.

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

If required to undertake a wide scale scoping exercise there will be cost implications, where have a good awareness of services, based around our on- going strategy group and stakeholder involvement.

The Strategy provides the CHCP with a framework for work already underway, it provides an opportunity to map and self-assess our current practice (using PSIF), celebrate our success and build on our preventative approach to service planning and delivery.

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?

The Strategy refers to GIRFEC, however if GIRFEC is to establish as the national umbrella approach to all services impacting and working with Children and Young people, then more emphasis is required in this framework on the whole child/ person approach to assessment and care planning.

The framework indicates that "It is expected that all adult services working with parents and carers take this approach into account".

In order to achieve this, the framework requires more emphasis towards embedding GIRFEC into services. The current framework allows for layering GIRFEC on top of practice, instead of it being at the core.

This would require direct liaison with GIRFEC implementation processes across local authorities, CHPs and CHCPs, reflecting the different GIRFEC journeys currently on-going locally and nationally.

A “cradle to grave” framework cannot be homogenous and must reflect the differing needs of many different groups of clients, notable older people through the Reshaping Care agenda and young people via GIRFEC and the Early Years Collaborative agenda.

The framework does however establish good principles which link to Doran and GIRFEC:

- Early integrated assessment
- Involvement of parent/ carers
- Single point of access
- Information sharing
- Whole child aspect that all plans feed into a single child’s plan

Key aspects of those are reflected in this Sensory Impairment Strategy Consultation

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?