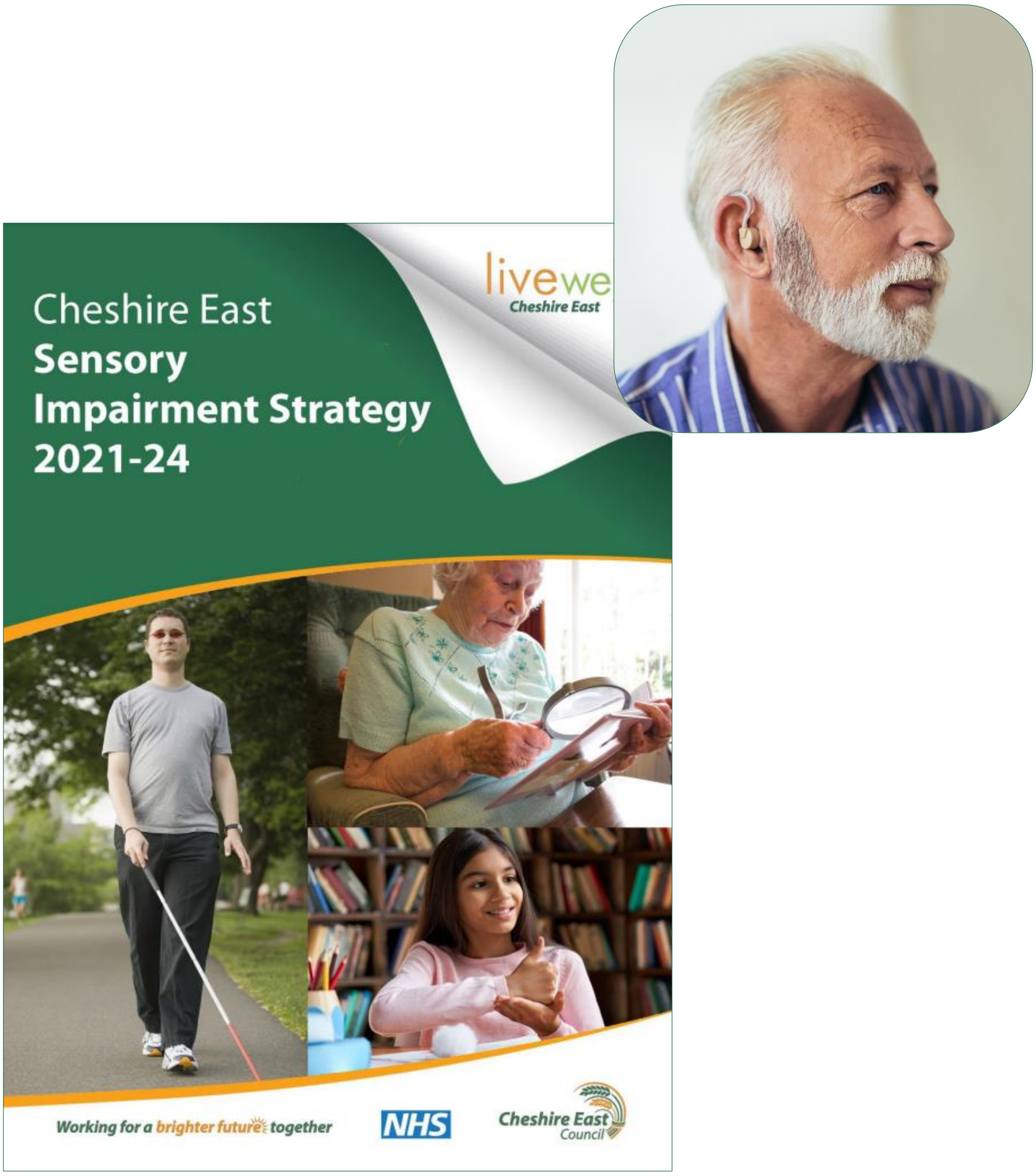
A summary of responses to Cheshire East Council's

Sensory Impairment Strategy Consultation



Cheshire East
Sensory Impairment Strategy 2021-24

livewell
Cheshire East

Working for a brighter future together

NHS

Cheshire East Council

Summary of responses

Consultation engagement and response

The consultation on the strategy was widely promoted on the council’s website, through partner organisations and on social media, with consultation feedback received in the following ways:

- 27 survey responses
- 6 email responses
- 1 telephone response
- 117 consultation video views
- Social media comments

The strategy being consulted on is a fairly niche document and large numbers of responses would not necessarily be expected – however care must be taken when interpreting results due to the low numbers of responses as they may not be wholly representative of all stakeholders who may have an interest in this issue.

It should also be noted the strategy was drafted after much engagement with a wide range of stakeholders.

The overall strategy

Whilst a very large proportion of respondents agreed the overall strategy is relevant (83%), slightly smaller proportions agreed the overall strategy is good (67%) and comprehensive (61%).

Some felt the strategy was lacking clarity and detail about how the strategy will be funded and resourced, while others felt it needed more focus on safeguarding and domestic abuse.

The vision

Large proportions of survey respondents felt the vision is:

- Relevant (89%).
- Appropriate (85%).
- Comprehensive (77%).

The priorities

Significant proportions of survey respondents rated each of the 6 priorities as good – from 78% rating the priority “Integrated service provision and improved co-coordination of care” as good, down to 65% rating the priority “emotional and peer support” as good.

Comments about each of the priorities were received, and are printed throughout this report.

Email responses

6 email consultation responses were also received, and these are printed verbatim towards the end of the report.

Contents

Report produced 4 October 2021 by the Research and Consultation Team, Cheshire East Council. Email RandC@cheshireeast.gov.uk for further information.

Introduction

Purpose of the consultation

Between 20 July and 19 August 2021 Cheshire East Council consulted on a newly drafted Sensory Impairment Strategy for 2021 – 2024, which had been drafted in partnership with Cheshire Clinical Commissioning Group (CCCG).

This strategy set out how both organisations will work in partnership to provide the right services at the right time for children, young people and adults living with sensory impairments.

The council consulted on the draft strategy to see what stakeholders thought of it, and to see how they felt it might be improved, before it is adopted by the council.

Pre-consultation research

The new Sensory Impairment Strategy for 2021 – 2024 had been drafted after much engagement with a wide variety of stakeholders, including:

- A survey for organisations including East Cheshire NHS Trust, Mid- Cheshire Hospital NHS Trust, voluntary sector, CEC (13 responses)
- Two Sensory Workshops held with health, social care, education and voluntary sector professionals (average of 35 attendees at each)
- A survey of adults with visual impairments (43 responses)
- A survey of children and young people with visual impairments (8 responses)
- A survey of adults with hearing impairments (49 responses)
- A survey of children and young people with hearing impairments (19 responses)
- A face-to-face interview with a deafblind current service users (1 response)
- Telephone interviews with adults with visual impairments (2 responses)
- Attendance in person at a walking group for visually impaired adults
- Attendance via Teams at visual impairment forum
- Attendance at the Children's Hearing Services Working Group
- Attendance at the Parent Carer Group

Consultation promotion and responses

The consultation on the strategy was widely promoted on the council’s website, through partner organisations and on social media, with consultation feedback received in the following ways:

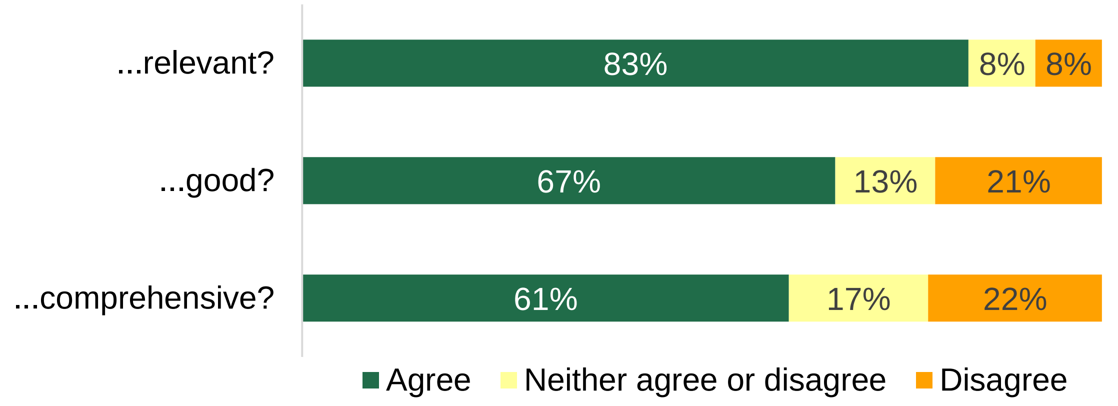
- 27 survey responses
- 6 email responses

- 1 telephone response
- 117 consultation video views
- Social media comments

Survey feedback – The overall strategy

Whilst a very large proportion of respondents agreed the overall strategy is relevant (83%), slightly smaller proportions agreed the overall strategy is good (67%) and comprehensive (61%).

How strongly do you agree or disagree that the overall strategy is…



Number of responses between 23 and 24

Comments on things that were felt to be missing from the strategy included:

- Clarity, priority and commitment are sadly absent. Cliche is well recognised but meaningless. Far too much public money has been wasted on initiatives designed for personal gain!
- General updates to systems, including ICT. How are you sending this out to the impaired community- nobody can access it which is a bit of a failure. Thank you to all that support in the community!
- How does anyone know if it is actually attainable in terms of cost and manpower?
- I have seen lots of these strategies and been asked to comment on them throughout my caring journey. I can't say any of them has made any difference to the daily lived experience of a person with sensory impairment. The funds expended on extensive "Consultants" and wordy documents could be spent subsidising public transport to enable people with sensory impairments to get out. It would also be better spent setting up peer support groups in localities where people live instead of signposting people to groups (voluntary groups) held at opposite ends of the county.
- I suspect very strongly that this initiative has more to do with saving money than improving the quality of provision for those with a sensory impairment.
- Impact on individuals Carers/family support stream. Very little mentioned, the role they play and impact of sight loss on them
- Independent work

- It would be helpful to reference Safeguarding and Domestic Abuse issues. Also please consider communities such as Gypsy Roma Traveller Communities.
- Many individuals rely on GPs for their care. Also phone calls to service users from Deafness Hub i.e. hear appointments, to ask if the appointment is still necessary or can it be cancelled is poor, so even though the strategy might be robust, there needs to be a better delivery mechanism. Especially if a person lives on their own, and is not mobile, as there is currently no outreach/home appointments, so service users will do without. As with most offers, there is a waiting list, and those with sensory impairments, will have reduced independence until equipment or re assessments can be carried out.
- Maximising opportunities for support with funding. Not thinking about whole person. Seeing disability and not ability. Focus on pointing out requirements rather than positives and working on strengths. Not signs of safety.
- People with sensory impairments are far more likely to experience domestic abuse (reference SafeLives spotlight report https://safelives.org.uk/sites/default/files/resources/Disabled%20Survivors%20Too%20CORRECTED.pdf) and the abuse suffered by people with impairments lasts longer and is more severe. Despite these statistics we see a very low number of referrals into specialist domestic abuse services and Marac (high risk forum) for people with sensory impairments and disability. It would be great to see some reference in this strategy to work in collaboration with domestic abuse specialists to address this and ensure people get the right support at the right time.
- Relevant, comprehensive? This isn't suitable for deaf people as they don't understand meaning of words. Make sure you use basic English or possibly smiley and sad faces or something that is more visual.
- That all organisations you contract with also make this commitment to accessible information. Accessible information is when it fits the individuals need e.g. not every visually impaired person can read braille. So there has to be a commitment to finding out what an individual needs rather than assumptions. With more and more services online like the livewell website, I believe there needs to be an alternative for those who are digitally excluded. Also correspondence by letter etc needs to be provided in large print etc as individual needs dictate. It is challenging so a true commitment to providing accessible information is very welcome.
- There is no review or understanding of the current situation – I am a Deaf sign language user with zero access to any information or services. I only found out about this strategy at the last moment.
- There is not enough emphasis on safeguarding and the importance of services being able to recognise safeguarding issues quickly and effectively. There is no mention of domestic abuse but disabled people are disproportionately affected by domestic abuse. The safe in the vision needs to track through to the strategy

and identify the critical issues such as domestic and sexual abuse and disability hate crimes that have such a huge impact on our lives

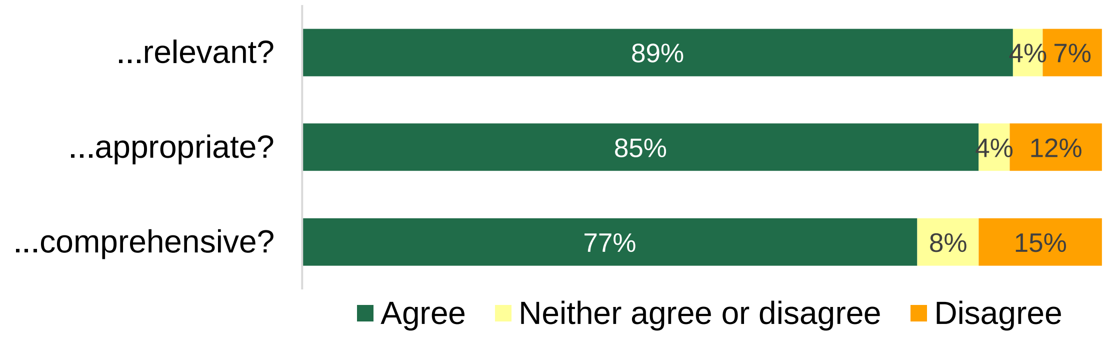
- Thinking about the whole person e.g. sensory impairment part of their life but so are other factors e.g. domestic abuse. How are these connected / joined up?
- Very doubtful that it will be implemented, in reality

Survey feedback – The vision

Large proportions of survey respondents felt the vision is:

- Relevant (89%).
- Appropriate (85%).
- Comprehensive (77%).

How strongly do you agree or disagree that this vision is…



Number of responses between 26 and 27

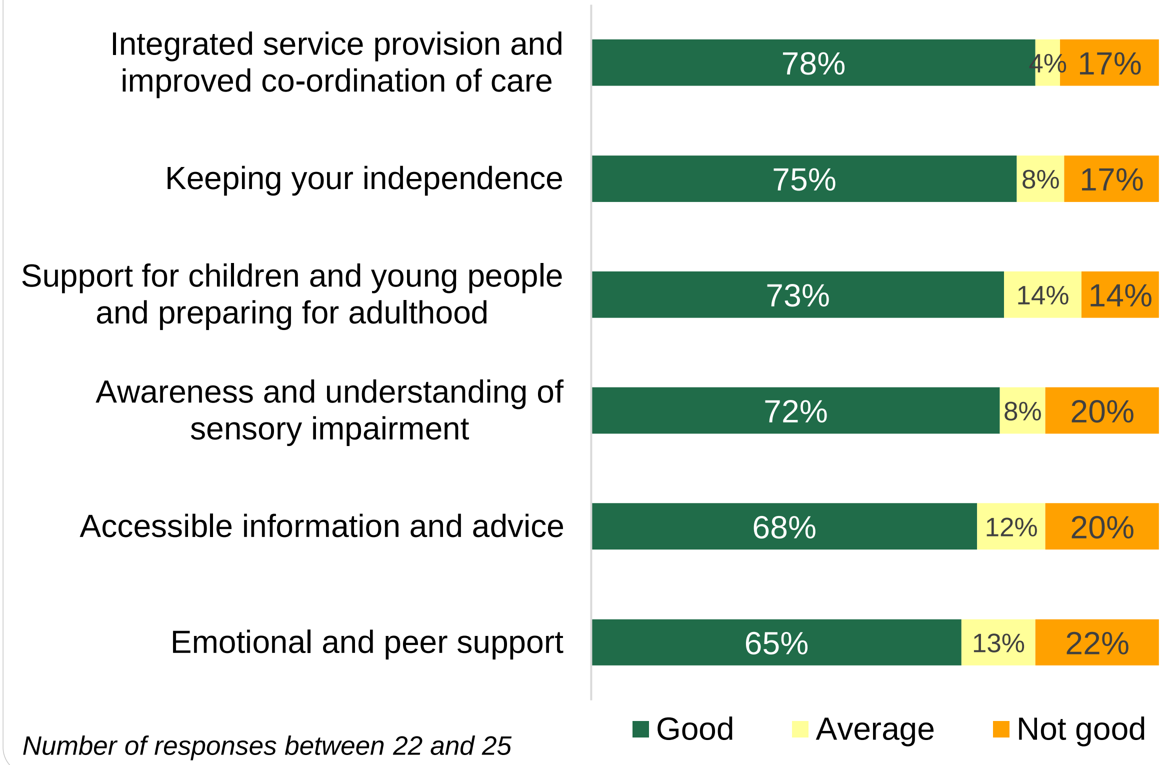
Survey comments received on the vision included:

- Comprehensive but unfocused, a muddled mixture of health and welfare without clarity or commitment.
- How this ambition is to be achieved will make the most impact and improvement in the lives of those with sensory impairment
- I am concerned that you do not have the resources to achieve this vision.
- I want my child to be as independent as possible and make normal life
- Maybe parents/children could be sent a newsletter or email regularly to inform them of new things and existing things available. Parents shouldn’t have to spent hours on the phone or computer search for help. For instance, I only saw the consultation because my sister saw it on your Facebook page. It should have been shared to parent carer groups etc.
- The "Vision" is rather woolly and vague including “best lives" and "should" instead of actual targets.
- The overarching vision is good. However, having read the Strategy there are no references to Safeguarding or Domestic Abuse. People with sensory impairment could require care and support services and experience abuse or neglect. This needs to be embedded into the strategy
- There is no information in sign language about the consultation or its aims. There is nothing for Deaf people who are working and need to engage / meet with others.
- This is fine on paper, the reality for peoples to receive this is another issue
- What is meant by comprehensive?

Survey feedback – The priorities

Large proportions of survey respondents rated each of the priorities as good – from 78% rating the priority "Integrated service provision and improved co-coordination of care" as good, down to 65% rating the priority "emotional and peer support" as good.

How do you rate each of these priorities?



Number of responses between 22 and 25

Survey comments received on each of the priorities are printed below verbatim.

Integrated service provision and improved co-ordination of care:

- Parents not being included is coordination of care and support. Limited contact from support agencies e.g. emails only. No phone calls, face to face visits / virtual meetings etc
- Ensuring each service is aware of and refers to others which is reliant on them understanding each other's provision
- Help for the elderly to access these if live alone and are not mobile
- make sure its accessible for Deaf people (nothing mention about making access to information easily?
- Need to include sign posting information re support with safeguarding or domestic abuse

- People with a sensory impairment experience disproportionately higher rates of domestic abuse, would it be possible ti include specific reference to integrated provision with specialist services for for people experiencing abuse
- Should be a priority.
- Those with sensory impairment do not need to be passed from ‘pillar to post’ but their enquiries and needs dealt with by one qualified, knowledgeable and person.
- We need Remark! Communities in Cheshire

Keeping your independence:

- Again reliant on timely intervention at time of needed
- Important to all.
- No information available about services
- Should be a priority
- Vital
- Where possible ,but care needs need to be in place
- With next to no public transport in Cheshire East particularly Macclesfield there is little opportunity for independence.

Support for children and young people and preparing for adulthood:

- Are these including deaf children?
- How does this link in with commissioned services and KPI's
- I have no understanding of what is currently available for young people. Things have changed a lot for the better I'm sure.
- limited opportunities for young people to be together
- Needs to be put in practice
- Remark! provide services for young people - we need this in Cheshire
- Remember that EHCP goes up to age 25. Good quality preparation for adulthood is very important
- The leap from being in school to adulthood is a huge one and there is a gaping chasm in the provision between children’s services and adult services.

Awareness and understanding of sensory impairment:

- Again this should be for all organisations you contract with, they should be able to evidence they have the skills knowledge and time to do this.
- Are they Deaf aware and aware of written English as not every Deaf person are able to under written English fully.
- Awareness of issues needs further work particularly in schools -having been told that my child who has hearing impairment doesn't have issues
- Cannot always adhere to on-line systems?? which individuals are always referred too

- Need to highlight how to report abuse
- Needs in practice
- This area needs improvement
- This is written from a negative - should be a more positive focus about the benefits that people can bring as well.
- Training and good quality training which involves practical experience is needed for all sectors.
- Very poor awareness especially in hospital reception staff or volunteers. Deaf Awareness training is available from Deafness Support
- Vitally important to aid communication and intervention when accessing any council, NHS service

Accessible information and advice:

- British Sign Language (BSL)
- Fine on paper, needs to be in practice
- Interestingly, this form didn't load with my accessible browser so a friend helping me to complete. Irony!
- It doesn't think about the whole person -what about other needs eg safeguarding and domestic abuse. How are these services linked in?
- Need to consider information re adult abuse or domestic violence
- not thinking about whole person, and involving parents eg Teacher of Deaf not providing reports directly to parents, only to schools. The schools then don't routinely pass this information on to parents. Delay
- Provision in a timely manner
- Seeing in action ,not just on paper
- There is no information about services available
- This is very time consuming and specialist. Will all organisations you contract with be able to offer truly accessible information too. All services should be accessible with accessible information, not just services about sensory impairments specifically.
- This needs to be widespread

Emotional and peer support:

- Accessibility key
- Awareness of issues re social inclusion for young people particularly in school, support with developing friendships with non hearing aid children. wider understanding and appreciation of hearing issues
- Is it fully accessible? and will an interpreter be provided?
- Needs in practice
- The only peer support for young adults with hearing impairment is in Chester DeafActive. this is provided by a volunteer run charity and there is no statutory

provision . The social opportunities are run by Deafness support and Cheshire East Council directories do not include organisations such as Cochlear Implanted Children's Societies. There are no support groups in this area. Schools with Hearing Impaired Units could do a lot more to bring deaf children together with other pupils in mainstream settings or ex-pupils as they are geographically dispersed.

- There is a need to include parents in this when working with children
- This area needs improvement

Email feedback

Anonymous response #1

In general I think [the Strategy] is good, however, I have commented on some aspects which may have been omitted – particularly around Safeguarding and Domestic Abuse. I couldn't see any references in the consultation – and also impacts on groups such as Gypsy Roma and Traveller Communities.

Anonymous response #2

[The group] welcomes the Draft Sensory Impairment Strategy document and supports the identified priorities. [We] are also grateful for the opportunity to be represented on the Group which worked on the development of the Strategy.

[The group] would like to make four observations regarding the Draft Strategy.

Firstly, [the group] has concerns at the effectiveness of this and earlier consultations and whether service users were given an adequate opportunity to engage given the difficulties, particularly for the visually impaired community, where material is presented in a visual format. What was the level of feedback at each stage?

Secondly, does the authority have sufficient appropriately qualified staff to meet the aims of the Strategy and its responsibilities under the Care Act?

Thirdly, although the document sets out a strategy there will be a need (which we understand will be addressed through an Action Plan or similar) to define how the identified priorities are to be met. What services are to be made available, who will be the providers, and how they will be funded.

Finally, the Strategy makes several references to the role of the voluntary/ charitable sector in meeting the needs of the sensory impaired community. The sector can often meet those needs in ways that are localised, accessible and economical. However, the sector cannot survive on goodwill and recognition alone. Both the local authority and the clinical commissioning group will need to identify what role they see played by the sector and enter into appropriate arrangements for financial and other support to allow service providers to operate sustainably to the benefit of service users.

Anonymous response #3

It [the Strategy] disappointingly does not reference safeguarding or domestic abuse.

Anonymous response #4

I am really passionate about raising awareness of hearing loss and getting people tested in the community due to the long term benefits it has in particular to those individuals who have care needs and develop later onset of dementia.

Anonymous response #5

Obvious working in the eye clinic we support and welcome the aims of this. There are several areas in our department where the service we provide is lacking for patients with visual impairment specifically:

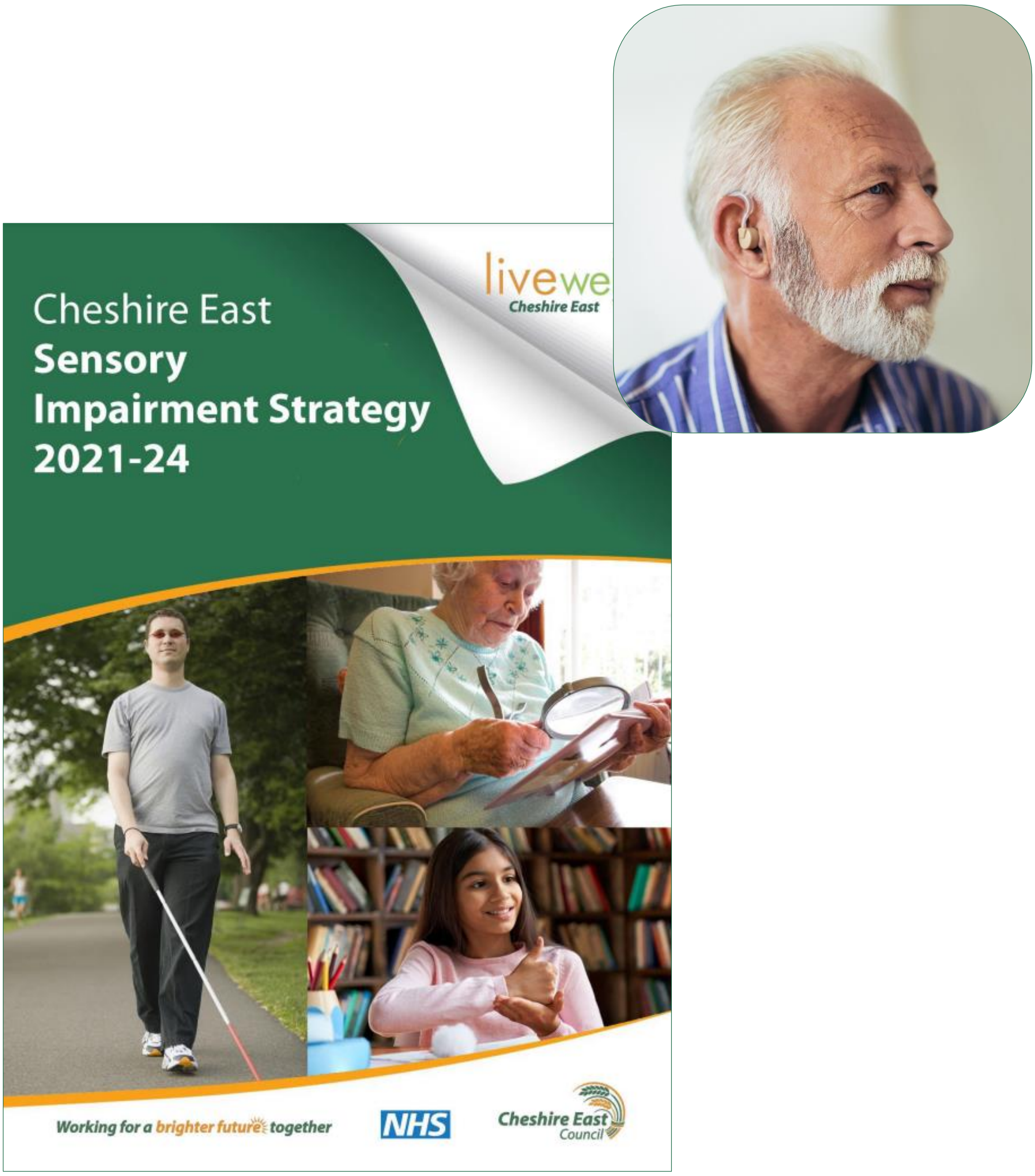
- no access to low visual aid service - the only support we have to direct our patients to is the IRIS centre
- no access to ECLO (eye clinic liason officer) - most eye departments have an individual they can refer patients to for advice and support related to visual loss. We do not have this facility.

Obviously one would hope this strategy document will lead to some changes on the ground to meet its aims I I would suggest investment in these 2 areas would significantly improve the service we provide to visually impaired patients.

Anonymous response #6 (notes from a telephone call)

General comments about difficulties of having a visual impairment. Finds it difficult to get out and about. Using the buses and being able to read the timetables is a real barrier. They also talked about how we are going to action and progress with the priorities outlined in the strategy.

Cheshire East Council



livewell Cheshire East

Cheshire East

Sensory Impairment Strategy 2021-24

Working for a brighter future together

NHS

Cheshire East Council