

COMMITTEE: Health Scrutiny Committee

DATE: 20th November 2007

REPORT OF: Assistant Chief Executive (Strategy, Performance and Governance)

REPORT TITLE: Access to Services for People with Sensory Impairment
Scrutiny Review: Further Progress Update

1.0 Purpose

- 1.1 The purpose of these reports is to provide a further progress update on the *Access to Services for People with Sensory Impairment* scrutiny review taking into consideration issues and concerns expressed by Disability Stockport at the Committee's meeting on 28th August.

2.0 Background

- 2.1 The Committee considered a report providing an update on the previous scrutiny review *Access to Services for People with Sensory Impairment* carried out by the Social Care and Health Scrutiny Committee and completed in May 2004 at its meeting on 28th August.
- 2.2 The progress report was specifically requested by Disability Stockport in December 2006. Representatives from Disability Stockport, Stockport Council, Stockport Homes, Stockport Primary Care Trust and Stockport NHS Foundation Trust attended a meeting in July 2007 and provided the information contained within the report.
- 2.3 Mr Kieron McMahon and Mr Peter Rowe, representatives of Disability Stockport, attended the Committee's meeting on 28th August and submitted their views to the Committee. Although expressing their satisfaction that the review had been initially undertaken, they raised a number of serious concerns that the recommendations had not been carried out as envisaged.
- 2.4 As a result, the Committee resolved 'that the report be noted and that relevant officers compile a further report taking into consideration the various issues and concerns expressed (by Disability Stockport)'. (28th August Minute 6)

3.0 Issues and Concerns

- 3.1 The Committee has requested that Stockport NHS Foundation Trust, Stockport PCT and the Council respond to the key issues and concerns raised by Disability Stockport in relation to this reviews recommendations and responses of relevant organisations to these as set out below. Here the recommendations which concerns relate to are set out (in bold) with the comments made by Disability Stockport below. See Appendix One for recommendations made by this review in full.

3.2 **Stockport NHS Foundation Trust (see Appendix Two)**

- **Ensuring that in meeting the requirements of the Disability Discrimination Act they do not forget the access requirements of people with sensory impairment (Recommendation 1)**

Rather than making alterations in a piecemeal way, it would be better for stakeholders to have policies regarding inclusive access. The standards should be made known to anyone making decisions that may potentially enable or disable a VIP – for example about signage, fixtures and fittings, furnishings, or layout, whether designing, refurbishing or replacing.

Concerns re. use of tactile pavings and the pedestrian crossings. Also some of the Wheelchair accessible toilets are not accessible.

- **Local certification and registration scheme for people who are deaf or hard of hearing (Recommendation 2)**

In regard to the form to capture information on disability devised by the sensory loss team- It appears the Foundation Trust Audiology Manager spent 3 years to respond and has still not implemented a pilot scheme.

- **Ensuring that an appropriate and sufficient number of staff working in front line services receive training designed to increase their awareness of the needs of people with sensory impairment (Recommendation 5)**

The Foundation Trust has recorded only 28 people attending sensory loss courses in the last three years. This is an unacceptably low figure for a specialist provider.

- **Ensuring that an appropriate and sufficient number of staff from each front line service has received the appropriate training to gain an entry level British Sign Language (BSL) qualification (Recommendation 7)**

The fact that the Foundation Trust have achieved the IIP standards for 10 years (as has Disability Stockport) does not reflect on their ability to provide training in BSL. I believe this statement is made to deflect from the fact that they have no record of anyone doing this and no stated intention of ensuring it.

3.3 **Stockport Primary Care Trust (report to follow)**

- **Ensuring that in meeting the requirements of the Disability Discrimination Act they do not forget the access requirements of people with sensory impairment (Recommendation 1)**

Rather than making alterations in a piecemeal way, it would be better for stakeholders to have policies regarding inclusive access. The standards should be made known to anyone making decisions that may potentially enable or disable a VIP – for example about signage, fixtures and fittings, furnishings, or layout, whether designing, refurbishing or replacing.

- **Ensuring that an appropriate and sufficient number of staff working in front line services receive training designed to increase their awareness of the needs of people with sensory impairment (Recommendation 5)**

The PCT should be providing BSL training for their staff.

3.4 **Stockport Council (Adult Social Care) (see Appendix Three)**

- **Ensuring that in meeting the requirements of the Disability Discrimination Act they do not forget the access requirements of people with sensory impairment (Recommendation 1)**

Rather than making alterations in a piecemeal way, it would be better for stakeholders to have policies regarding inclusive access. The standards should be made known to anyone making decisions that may potentially enable or disable a VIP – for example about signage, fixtures and fittings, furnishings, or layout, whether designing, refurbishing or replacing.

- **Improving and consolidating existing registers and databases of people with disabilities and sensory impairment, perhaps by expanding the Stockport Disability Database (Recommendation 3)**

Was a scoping project carried out? Would it not be more helpful to recommend that the issue of resources be given priority and discussions held with the voluntary sector, this would also help with part of recommendation 6. It appears the answer is 'this would cost money -so lets forget about it'.

How can planning take place when there is not any data upon which to base the plans? A database might have assisted the council in not overspending by £3.6 million or what ever the figure was.

A report, Direct payments-A national survey of Direct payments Policy and Practice by Vanessa Davey et al, claims that only 42,000 of the 1,000,000 eligible for Direct payments receive them. Without the figures from a database how can SMBC fulfil their obligations?

4.0 **Next Steps**

- 4.1 Many of this reviews recommendations have now been implemented and given the time elapsed since review completion it is suggested that rather than continue monitoring of their implementation the Committee considers whether there are any issues that it wishes to make further enquiries on as a result of this further progress report and Disability Stockport views.

5.0 **Recommendation**

- 5.1 That the Committee consider and comment on the further reports provided by each of the relevant stakeholders and agree any areas for further enquiry.

Background Papers

Review Final report and Council Executive response <http://tinyurl.com/2pjf7m>
Progress on Access to Services for People with Sensory Impairment, Report to
Health Scrutiny Committee, 28th August

<http://interactive.stockport.gov.uk/edrms/committeeminutes/document.ashx?id=25636&pg=1>

Comments submitted to the Committee by Disability Stockport in connection with the progress report on recommendations made by this review received by the Committee on 28th August 2007 (circulated to Committee Members and available on request)

Further information

To discuss this report or for further information please contact Katy Spencer, telephone number 0161 474 3186 or by e-mail on katy.spencer@stockport.gov.uk

Appendix One

Access to Services for People with Sensory Impairment Scrutiny Review – Recommendations (May 2004)

Recommendation One

Stockport Council, Stockport PCT and Stockport NHS Foundation Trust should ensure that in meeting the requirements of the Disability Discrimination Act they do not forget the access requirements of people with sensory impairment. They should give particular attention to the layout, design and colour schemes of key public areas, such as reception areas, as well as key notice boards and information signs.

Recommendation Two

In the absence of a national certification scheme, Stockport Council, Stockport PCT and Stockport NHS Foundation Trust should develop an appropriate local certification and registration scheme for people who are deaf or hard of hearing, that will ensure that automatic referral between services takes place.

Recommendation Three

Stockport Council, working in partnership with Stockport PCT, Stockport NHS Foundation Trust and other service providers as appropriate, should improve and consolidate existing registers and databases of people with disabilities and sensory impairment, perhaps by expanding the Stockport Disability Database, that allows appropriate and useful information about people with deaf and blind (and other disabilities) to be recorded. This would benefit both individuals and service providers. The former in opening a gateway to information, advice and support. The latter through informing the planning, provision and resourcing of services. The benefits of registration should be advertised via suitable channels.

Recommendation Four

Stockport Council, Stockport PCT and Stockport NHS Foundation Trust should ensure that they each have suitable data recording mechanisms in place that capture and use information about how people wish to be communicated with on general matters such as council tax, elections, and appointments.

Recommendation Five

Stockport Council, Stockport PCT and Stockport NHS Trust should ensure that an appropriate and sufficient number of staff working in front line services receive training designed to increase their awareness of the needs of people with sensory impairment.

Recommendation Six

A full or part-time advisor post should be established through joint funding from Stockport Council, Stockport PCT and Stockport NHS Foundation Trust, to provide advice for people with sensory impairment. The post holder would be suitably qualified and trained, and would provide a signposting service to information and support services, as well as providing information and support directly as appropriate. The location of this post should be determined following consultation with relevant voluntary sector groups and organisations.

Recommendation Seven

Stockport Council, Stockport PCT and Stockport NHS Foundation Trust should ensure that an appropriate and sufficient number of staff from each front line service has received the appropriate training to gain an entry level British Sign Language (BSL) qualification.

Recommendation Eight

Stockport Council, Stockport PCT and Stockport NHS Foundation Trust should ensure that users of their services have access to BSL interpreters when required and that this service is publicised both within their organisations amongst employees and to externally to people who are deaf or hard of hearing.

The recommendations set out below were all felt to have been implemented at the time of the last progress report therefore this progress report did not focus upon these topics.

Recommendation Nine

The Greater Manchester Passenger Transport Authority should review its concessionary fare schemes to ensure that people with visual impairment do not have to choose either a bus pass or taxi vouchers.

Recommendation Ten

The Greater Manchester Passenger Transport Authority should revise the taxi voucher scheme to make it easier for people to use the vouchers. Currently people have to fill-in the voucher, which causes difficulty.

Recommendation Eleven

The Greater Manchester Passenger Transport Authority should use its influence over public transport providers to encourage them to develop staff training programmes designed to increase awareness of the needs of people with sensory impairment.

Recommendation Twelve

Stockport Council's Taxi Licensing department should pursue its plans to introduce compulsory disability-awareness training for all taxi license applicants.

Recommendation Thirteen

Stockport Council's Streetscene department should ensure that information about how to complain about obstructions to public highways is available in formats that people with visual impairment find useful. This should include liaising with Stockport Eyeline to disseminate this information to its members.

Recommendation Fourteen

Stockport Council's Community Services Marketing Department should, in its 'Diary' publication include information about performances and activities that are accessible to people with sensory impairment. This would include information about where loop systems are in place, as well as where sub-titled, signed or audio-described performances are showing. Asking venues and entertainment providers questions about these things will hopefully prompt awareness of this gap in their provision.

COMMITTEE: Health Scrutiny Committee

DATE: 20th November 2007

REPORT OF: Stockport NHS Foundation Trust

REPORT TITLE: Response from Stockport NHS Foundation Trust to the findings of the Scrutiny Review on 'Access to Services for People with Sensory Impairment'

1.0 Purpose

The purpose of this report is to update the Health Scrutiny Committee on the specific concerns raised with Stockport NHS Foundation Trust by Disability Stockport.

2.0 Information

A meeting was held on 18th September 2007 to discuss the issues raised by Disability Stockport relevant to the Stockport NHS Foundation Trust. The meeting was attended by Kieran McMahon, Chair, Disability Stockport, Peter Rowe, Vice-chair, Disability Stockport, Judith Morris, Deputy Director of Nursing and Vicky Stewart, Senior Personnel Manager, Foundation Trust.

The following issues were discussed under each recommendation of the original review. The concerns of Disability Stockport are shown in black, the trust response is shown in red.

1. **Ensuring that in meeting the requirements of the Disability Discrimination Act they do not forget the access requirements of people with sensory impairment (Recommendation 1)**

Rather than making alterations in a piecemeal way, it would be better for stakeholders to have policies regarding inclusive access. The standards should be made know to anyone making decisions that may potentially enable or disable a VIP – for example about signage, fixtures and fittings, furnishings, or layout, whether designing, refurbishing or replacing.

Concerns about the use of tactile paving and the pedestrian crossings. Also some of the Wheelchair accessible toilets are not accessible.

Concerns regarding DDA work around the site from Peter Rowe at Service Diversity Group meetings have been raised with the Director of Estates and a forthcoming audit of this work is due. This will take into account issues such as tactile paving, crossings and wheelchair accessible toilets.

Results of the current round of impact assessments of services will feed into the Trust's action plan for equality and diversity and will necessarily include adaptations around the hospital site for disabled access. In addition, the Director of Estates has

recently asked all senior managers to let him know of any areas where adaptations need to be made.

2. Local certification and registration scheme for people who are deaf or hard of hearing (Recommendation 2)

In regard to the form to capture information on disability devised by the sensory loss team- It appears the Foundation Trust Audiology Manager spent 3 years to respond and has still not implemented a pilot scheme.

The Trust will introduce this as soon as possible. The Audiology manager is working with Stockport MBC (Andy Davies) on this issue and has, thereby, clarified some queries.

3. Ensuring that an appropriate and sufficient number of staff working in front line services receive training designed to increase their awareness of the needs of people with sensory impairment (Recommendation 5)

The Foundation Trust has recorded only 28 people attending sensory loss courses in the last three years. This is an unacceptably low figure for a specialist provider.

Unfortunately the figures recorded in the report were not accurate and did not take into account those staff who had attended such courses outside the Trust. However the overall figure is still not representative of the trust workforce and an active drive has started for staff to attend such training and improve their practice as a result.

4. Ensuring that an appropriate and sufficient number of staff from each front line service has received the appropriate training to gain an entry level British Sign Language (BSL) qualification (Recommendation 7)

The fact that the Foundation Trust has achieved the IIP standards for 10 years (as has Disability Stockport) does not reflect on their ability to provide training in BSL. I believe this statement is made to deflect from the fact that they have no record of anyone doing this and no stated intention of ensuring it.

BSL training is being actively encouraged for key members of staff and is funded by the Trust. Arrangements for recording of this qualification have been put in place with the Trust's new electronic staff record. We will draw up a register of staff who are available to act as signers for patients, to complement the use of signers from the RNID.

It was suggested that in order to maintain their competence they could attend the Royal Schools for the Deaf as a refresher – this is being looked into.

3.0 Recommendation

That this report be received.

Further information

To discuss this report or for further information please contact Judith Morris telephone number 0161 419 4049 or by e-mail on Judith.morris@stockport.nhs.uk

Appendix Three

Access to Services for People with Sensory Impairment

Report of Corporate Director, Adults and Communities Directorate, Stockport Council

The Adults & Communities Directorate have been asked to respond to two recommendations, and the Disability Stockport comments about outstanding actions, arising from the review of services for people with a sensory impairment by the Social Care and Health Scrutiny Committee.

I would emphasise that the issues raised in the report are the responsibility of the Council as a whole and not just Adult Social Care. However we are pleased that the report was undertaken in the first place and understand the concerns raised by Disability Stockport that matters are not progressing as quickly as they would like. Kieran McMahon is aware of the services provided by the Adult Social Care in this field and is supportive in his willingness to work with the Sensory Loss service to continually move forward.

Recommendation 1 (comments below from Disability Stockport)

Ensuring that in meeting the requirements of the Disability Discrimination Act they do not forget the access requirements of people with sensory impairment.

Rather than making alterations in a piecemeal way, it would be better for stakeholders to have policies regarding inclusive access. The standards should be made known to anyone making decisions that may potentially enable or disable a VIP – for example about signage, fixtures and fittings, furnishings, or layout, whether designing, refurbishing or replacing.

With reference to Recommendation 1:

- I. I can confirm that the Service is mindful of the needs of people with sensory impairment in considering the Disability Discrimination Act and arrangements are made for people to be able to access our services in an appropriate manner. For example people who are Deaf do not have to refer via the Contact centre but can make contact directly with the specialist social worker who also provides a regular and open “duty / information and advice service to service users. Whilst accommodation is not always ideal the service is committed to making cost effective and reasonable adjustments whenever it is possible to do so. Rooms are looped and minicomms are in use when appropriate

- II. In terms of a corporate approach, the Disability Equalities Officer would be in a better position to respond on behalf of the Council as a whole.

Recommendation 3 (comments below from Disability Stockport)

Improving and consolidating existing registers and databases of people with disabilities and sensory impairment, perhaps by expanding the Stockport Disability Database

Was a scoping project carried out? Would it not be more helpful to recommend that the issue of resources be given priority and discussions held with the voluntary sector, this would also help with part of recommendation 6. It appears the answer is ' this would cost money -so lets forget about it'.

How can planning take place when there is not any data upon which to base the plans? A database might have assisted the council in not overspending by £3.6 million or what ever the figure was.

A report, Direct payments-A national survey of Direct payments Policy and Practice by Vanessa Davey et al, claims that only 42,000 of the 1,000,000 eligible for Direct payments receive them. Without the figures from a database how can SMBC fulfil their obligations?

- i. I am aware that Disability Stockport supports the idea of developing a database similar to that held by Children's services which provides information and regular newsletters to parent carers of children with a disability.

However I am unclear as to the evidence base used to suggest that Disabled adults would wish this to be provided for them. The issue of funding is only one element of this, the question remains that it is hard to see what added value Disabled people would gain from such a register. Mr Rowe refers to a database helping us to promote Direct payments but in Stockport these are offered as routine to anybody who has an assessed and eligible need for service, however not all people choose to have this method of service delivery.

- ii. I would also suggest that if we look at other authorities within Greater Manchester, we are not aware of any other area where a database of adults with a Disability is held and it would raise issues around the purpose of people registering and the fact that only some people would elect to register their disability on a database. Disability Stockport raise questions around how we can monitor demand and spend/ reflect direct payment data when there is not a database to use. Our response would be that we have a informed view of likely demographics through the work on profiling the user population in Stockport and that this work will be further enhanced by the Joint Strategic Needs Assessment which is currently underway. We believe that this will be a resource that is more likely to be accurate in a wider context than a

database which will only ever represent the proportion of the population that actively choose to register.

- iii. I believe that a suggestion has been made by Disability Stockport that a consultation exercise should be undertaken to ask people whether they would want us to develop a database. Any consultation in this area would have to be considered very carefully to determine who was undertaking this, the resources available, how the issue is presented to users and carers and being mindful not to raise expectations around the outcome of the consultation, particularly when there is a view that the database would not offer value to the service currently in place.
- iv. In conclusion, this proposal has not been developed due to our belief that this would not offer sufficient advantages to warrant the expenditure in this area.