

Appendix D – Whole Life Disability Strategy 2018-2023

Whole Life Disability Strategy Engagement process and outcomes

- 1.1. Initial engagement activities took place across Staffordshire to gather intelligence before writing the draft strategy, including a county-wide online survey aimed at parent and carers of children aged 0 to 25 years old who have Special Educational Needs or Disabilities (SEND) alongside a focus group with young people with disabilities, and further face to face sessions with adults who have a disability.
- 1.2. This process had responses from over 200 people.
- 1.3. During the engagement events to discuss the draft strategy we talked in person to 120 people through open meetings and focus group meetings, welcomed public scrutiny as part of a Joint Select Committee meeting, and encouraged public comment and feedback through an online questionnaire. Overall, we have received over 800 comments (60 via the online survey) which we have reviewed in order to produce a revised version of the draft strategy.
- 1.4. In addition, notification of opportunity to share views were sent to key stakeholders to share with colleagues and/or families including:
 - 1.4.1. Schools (via e-school bag),
 - 1.4.2. Carers Partnership Board,
 - 1.4.3. Chief Operating Officer of the CCGs,
 - 1.4.4. Day opportunities providers
 - 1.4.5. Supported Living Framework Providers,
 - 1.4.6. Health and Wellbeing Board,
 - 1.4.7. Healthwatch
 - 1.4.8. DEAFVIBE
 - 1.4.9. Cerebral Palsy user group
 - 1.4.10. VCSE/S3 (via Phil Pusey),
 - 1.4.11. AADP Chairperson,
 - 1.4.12. H&CSLT/Adult Learning Teams,
 - 1.4.13. SSOTP (Adults PD Teams via Jo Cowcher),
 - 1.4.14. Chair of SEND Strategic Partnership Board,
 - 1.4.15. SEND Family Partnership,
 - 1.4.16. Voice of Change
 - 1.4.17. Parent Carer Forum,
 - 1.4.18. Senior Leadership Team/
 - 1.4.19. F&CSLT Strategic Delivery
 - 1.4.20. Managers Children's Disability Teams,
 - 1.4.21. MPs,
 - 1.4.22. District CXOs and Leaders,
 - 1.4.23. County Council Members,
 - 1.4.24. Community Partnership Officers,
 - 1.4.25. Select committee chairs for healthy, prosperous and safer/stronger

1.5. On Social media:

- 1.5.1. Twitter posts driving people to find out more and submit views seen 18,364 times by Twitter users as of 25 May. 168 people directly engaged with these posts (likes, shares, comments or clicks)
- 1.5.2. Facebook posts reached 10,587 people as of 25 May. 285 people engaged with these posts.

1.6. In traditional Media:

- 1.6.1. Launch release covered by Express and Star online and in print. Very positive. Media score of 12.
- 1.7. Where people have shared their contact details, we are committed to remaining in touch and welcome the views of others who want to let us know their views on how services could be developed. This is particularly important if any changes are proposed.
- 1.8. Every group we met and many of the individual comments we received said that a lot of people want to contribute to the changes that may come about because of this strategy. The council has committed to publish a timetable which will show what changes are proposed in each service and how people can comment. The timetable will also explain how we are undertaking these pieces of work with the CCGs in Staffordshire and our other partner organisations. The specific pieces of work are set out as the “Plan on a Page” and referenced in the strategy itself.
- 1.9. In the engagement processes in the development of and following the publication of the draft strategy, these were the issue themes that arose and the responses to them

	Issue or comment theme	Response
1	Engagement process did not reach every interested party	Subject to cabinet approval, we will review our current services to ensure they are aligned with the key principles in the strategy. We will engage directly with those who may be affected by these proposals to ensure they are clear about what the proposals mean for them and to seek their feedback.
2	A number of parents and carers felt that early years services, such as Children’s Centres, do not offer support that is appropriate to their child’s needs	We need therefore to develop greater consistency across our Children’s Centre/early years support and help raise parents awareness of Children’s Centre services and support available.
3	A number commented that they have had to “fight” on their child’s behalf to	Response in the SEND strategy but included in the WLD strategy. Clarity

	Issue or comment theme	Response
	ensure that they receive adequate support.	of information to be improved and better training for staff.
4	Issues around communication and engagement with professionals	Training for staff required included in the Workforce Strategy
5	A number of parents and carers held the view that many professionals with mainstream settings had a very limited understanding and awareness; particularly relating to autism and needs on the autistic spectrum	Training for staff required included in the Workforce Strategy, Autism Implementation Plan to include some responses to this.
6	A number shared comments about instances where practitioners have gone to what the parents consider to be great lengths, in order to support their child, or secure or co-ordinate additional support from other agencies.	Good practice noted in strategy.
7	In the initial survey, many commented on the positive experience of moving from primary to secondary schools. However there were some experiences from people who were now at college that were less positive.	Include in the SEND strategy.
8	Support needed for the future was identified rather than just education and access to activities.	Included in the WLD strategy and others.
9	Bullying had been experienced by some but they felt that bullying had been successfully dealt with. In the later engagement sessions there were several people who experienced bullying that was not successfully dealt with.	Included in WLD strategy and key implementation plans.
10	General sentiments in the strategy were seen as appropriate but the “devil is in the detail”.	Implementation plans are referenced: Autism; Community Offer for People with a Learning Disability; Housing and Support; Preparing for Adulthood; Well Being Strategy; People Helping People, and the Carers Pathway. Links to existing strategies include Mental Health Strategy, Building the Right Support, and associated implementation plans.
11	The need for an understanding of entitlements, available services, and how to access them	Links included in Strategy.

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12	Support and care plans should be more long-sighted, and focussed on achieving long-term positive outcomes, not just short-term academic milestones.	Included in the WLD strategy and other implementation plans.
13	The role of the internet was important to service users, with the majority of them having access to it and most commonly used it for learning and finding information, social interaction, watching videos and playing games.	Include in workforce strategy and intention flagged in WLD strategy.
14	Access to activities is limited for those who are dependent on carers.	Include in p11revention, people helping people and Health and Well Being Strategy.
15	Having something to do in the day which developed new skills was important to the adults who responded.	Include in WLD, Health and Well Being Strategy, Community Offer.
16	Feeling safe in their homes and communities, being as independent as possible and having choice and control over the way they live their lives were identified as the three most important things by adults with a disability.	Included in WLD strategy.
17	Will our comments change anything?	Yes, we have revised the strategy as a direct result of the comments received. Where people have shared their contact details as part of the engagement process, we will share the analysis of the comments and issues raised.
18	Be Honest.	Undertaking in the strategy to only promise what we are confident we can do and to tell people whether we are doing it.
19	Attitudes of staff are not always positive.	Better training for staff on the aims of the strategy as well as their approach to all people in contact with services. Report through AAD Board.
20	People understand that finances are tight but they want to be involved in decisions about how money can be saved as well as what types of services may be better for them or their loved ones.	Engagement with people in receipt of services must continue and improve. No changes without an assessment of need and no changes without a discussion with the people affected by the change.
21	People who don't have eligible needs still may have needs developing.	There is a general issue about training of staff to undertake strength or asset based assessments to include an assessment of risk of needs developing. To be covered in

	Issue or comment theme	Response
		Workforce Development Strategy. Also covered in the Health and Well Being strategy.
22	People with disabilities are very different from each other. Is a single approach right?	Explain thinking more clearly in the revised strategy.
23	Even when people have needs met they can be lonely.	Well Being strategy one element of helping to combat loneliness. Wellbeing one of the important parts of the assessment of need.
24	Concern to be involved in any changes proposed in the implementation plans.	We will use the networks and contact details of people contributing to this phase of engagement and will contact people directly in the implementation phase.
25	Need to strengthen references to doing this jointly with NHS	More emphasis in the strategy on joint work with the NHS.
26	Other partnerships need to be encouraged.	Specific references enhanced on links with DWP, Police, housing authorities, transport agencies and others.
27	Bullying is identified but specific response required.	Specific response in implementation plans for Autism, the Community Offer, Carer's pathway, and SEND.
28	I am willing to use my own home to set up supported living.	Approach will be developed in the Housing and Support implementation plan.
29	Need to ensure appropriate balance between children and adults	More adults content in the need assessment and delivery parts of the strategy. Needs assessment included as a public document.
30	Can we see some financial information?	To be included currently in the Needs assessment.
31	What happens when I can't Care anymore?	The council will always meet its statutory duties to meet assessed eligible needs. In assessments of need, there must be a clear identification of needs that are met by a family carer and therefore that may need to be met when that carer is no longer able to meet them. Some response for emergency to be available.
32	Emergency response for carers not good enough.	Carer's pathway work to pick the emergency response element of services.

	Issue or comment theme	Response
33	We want some assurance about quality in Day services and housing.	To be included in community offer work and in the housing and support work.
34	Eligibility, entitlements and charging not referenced clearly	References to national guidance will be included. More commentary on fairer charging to be included.
35	Transport availability in communities is not universally available.	Recognise communities are not all the same, if transport is required to help someone meet their assessed needs, the council will have to help someone access transport but the aspiration will be to use what is available locally first.
36	Some localities do not have access to a range of services to meet need.	We recognise communities are not all the same; include a locality focus in next iteration of the Market Position Statement.
37	Community assets are not the same in each community.	Expectation is that communities will develop these themselves rather than rely on funding from the public sector. Well Being strategy and Public Health work to develop this theme in conjunction with Market Position Statement. This strategy will work with local suppliers to enhance community assets.
38	Assessment (finance and needs) process was reported as working in many places and for many individuals but there were several reports that people had not been assessed for several years and had not had copies of their assessment.	There will be a “dashboard” of indicators presented to the all Age disability Partnership Executive Board to improve the consistency of the assessment process. These will be available publicly.
39	Moving into adulthood process uneven.	Preparing for Adulthood is one of the implementation programmes in the Council. Timelines and engagement will be published within three months.
40	There must be services to support people to learn the skills needed to be independent. These have been reduced.	The council needs to manage this in the implementation plans. The council seems to be supporting as many people in the community as it has for several years, but we agree, the development of skills is really important to enable this strategy to work.
41	Special schools seen as providing a good experience for children with	The strategy is clear that more children attend special schools than

	Issue or comment theme	Response
	special Needs.	similar authorities and education attainment for children with SEND tends not to be as good compared to other authorities. There are still issues about acceptance and inclusivity that need to be addressed through the SEND strategies.
42	Manage change for people and support them through it.	The Strategy will make a commitment to manage change including engaging with interested groups and people.
43	Maintaining dialogue with providers is important	Market position statements will include routes for providers to engage in dialogue as well as through the implementation plans. Supporting the development of quality processes is key.

A full record of all comments received and responses is available here. [Whole Life Disability Strategy Webpage](#).