

Consultation Summary

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Northamptonshire Association for the Blind

Online and Easy Read Survey Response Summary

While the majority of respondents to the standard consultation survey were from interested members of the public, (52.75%), a cumulatively high number (60.99%) were from people who use NAB's services, carers of people who use NAB's services, work in the area, or represent views of a particular group, collectively providing a strong level of response (respondents may have ticked more than one box if they fall into more than one category which may have skewed this). Additionally, 5 of the 7 people who responded to the Easy Read Survey are in the latter category.

It is likely that there is a strong correlation between interested members of the public, and the 47.67% of people who have not accessed NABs services in the last 12 months, which strongly dictates that the significant majority of other respondents, those who the service is designed for, have accessed the service in the past 12 months. Additionally, 5 of the 7 people who responded to the easy read survey stated that they accesses NAB's services in the last 12 months.

Looking at specific comments from survey participants, builds a picture of the impact the NAB service has for respondents;

"While living at home my 96 year old mother made good use of the NAB services at Kingsthorpe. She has on loan a radio, we accessed the advice service on numerous occasions including home visits, made use of the shop at Kingsthorpe along with much advice and help. Mum now lives in a care Home but would not have been able to live at home until she was 93 without help and advice."

Comments also suggest the requirement from healthcare professionals for such a service and the potential financial impacts of losing this service, for example;

"I have not accessed them, but my patients have. Without such a service I see a possible devastating impact on the people, not only on their health, but wellbeing, social engagement; without replacing it the council is likely to be responsible to much worse health and wellbeing outcomes in people, with impact on demands for other services. This won't be cost saving except in the first few months. You will see costs rising quickly elsewhere making this not a saving, but a change that increases costs."

And;

"I am an NHS Eye Clinic Liaison Officer based at Hinchingsbrooke Hospital and we have many Northamptonshire patients attend our Low Vision Clinic, and my role is to then work with those patients to ensure they have support in their local area. That support currently comes from NAB. If NAB can't offer support Northamptonshire patients will have nothing local to them, it would be a very sad situation and an awful message to give to someone who is already dealing with sight loss, which is without a doubt a very awful situation"

While only 20 standard survey respondents regularly use NAB's services, this is significant given only 24 of the respondents 'use NAB's services for the Visually Impaired'. Therefore the significant majority of respondents who use the service, do so regularly. Respondents identified around 15 different NAB services which they access. The anomaly in these results was one respondent who noted that they 'wouldn't feel welcome'. Additionally, 4 of the 7 respondents to the Easy Read survey regularly use NAB's services.

Two responses noted the lack of bus services and funding as a barrier to attending services and independence.

Numerous respondents identified sight loss contributing illnesses including age related macular degeneration, stargardt's disease, sight loss following a stroke, COPD. There were frequent responses commenting on the contribution of visual impairment to social isolation leading to mental health issues, often stating that the NAB services helped to mitigate this negative impact.

50% of respondents stated that 'Information, Advice and Guidance' helped them the most, this can be accessed ad hoc throughout the year as required, and through specific groups. The second highest response was 'Support with accessing visual aids, specialist equipment or assistive technology' (36.67%) which provides more one-off tailored one-to one-support. This demonstrates the multifaceted offer from the service.

One respondent commented

"All the above services are essential to people living with sight loss. The Eye Health and Sight Loss Pathway lacks join-up, living with sight loss increases isolation and mental health issues, therefore the facility to access support groups, AIG, signposting is essential."

Further demonstrating the key links required between visually impaired people, services and health.

Respondents stated, on average on a scale of 1-5 (1 little, 5 big), a big negative impact of 4.26 (4.75 from the Easy Read response) would be felt if the NCC funding of around 10% of the current NAB service was cut. Two respondents commented on the impact this would have on NAB's ability to secure further funding. Other comments included but were not limited to the challenges of a rural county, the general under-resourced support for visual impairment, equal rights, growing demand for services, value for money, and the vital link NAB provides for the Health service. An anomaly amongst respondents was that two respondents commented that as blind, not visually impaired people, they did not feel welcome by NAB.

Respondents highlighted which aspect of the NAB service was most important to them, which resulted in a fairly even split across all NAB services, suggesting different aspects of the service are crucial to different service users at different times. None of the services offered were identified as not important.

Respondents identified NAB as the major provider of community groups they attend. Some respondents noted Blind Veterans UK and WRVS, however these are targeted at specific demographics, not all-age adults which NAB is. Only 12 respondents noted support from other services e.g. Adults Social Care/ Olympus. Overall there was little evidence of respondents accessing support other than that provided by NAB. There were only 3 references to respondents accessing services from Health professionals (Moorfields Eye Hospital, Oxford Eye Hospital and ECLO (Eye Clinic Liaison Officer)). Fifty-two respondents specifically stated that they do not receive support from anywhere else. All respondents to the Easy Read survey stated that they have accessed NAB's service in the past 12 months.

Suggestions for future needs if the service was to be cut were to; employ more specialists in visual impairment rehabilitation; provide alternative provision/ services; support alternative funding sources; have an ECLO in the Northampton Hospital Eye Clinic; have a national sight charity to provide support in Northampton; an equivalent to the current service (preferably keep NAB); redirect funds to Olympus care; invest £500k- £1m in a long-term visual impairment rehabilitation strategy with three sites in the county and 12-15 staff; social service support for visually impaired people; apply for funding from other sources, ref. East Northants; make users aware of other support routes; utilisation of voluntary services.

Alternative ways for the Council to support visually impaired people were; through Big Capital and Social Impact Bonds; share overheads with Hearing Impaired service or other service/ site; work closely with health/ third sector.

The majority of respondents were based in Northampton suggesting that this is where the greatest level of need is. However, there was a balanced spread of the remaining respondents from all other areas of the county.

Face to Face Consultation Events Summary Response

As with the responses to the questionnaire, there was a very strong theme of the significant impact cutting the NAB service would have on the health of visually impaired people, and the resultant increase in costs this could result in for the healthcare system. Comments included;

'Health professional continued] I am referring to NAB between 8 to 10 people every month. They provide emotional support which is needed, which saves people from developing depression and other mental health conditions. An in-depth study has been undertaken by the Anglia Ruskin University in Cambridge demonstrating the value of emotional support services to visually impaired people. This support service can prevent the unnecessary admission of users to care homes, which can be more costly to the Health and Social Care system'.

And;

'I was transferred from Kettering General Hospital to Cambridge. The paperwork took forever to get to Northamptonshire. There was a 2 month delay, which left me in limbo. I however found out about NAB by chance, and they offered advice and suggested things. eg. NAB would say "have you thought of this, have you thought of that, how do you relax?" etc. I was in floods of tears, but they helped. I joined the book club' Again there were also many comments referencing the potentially negative impacts to mental health if the funding for the service was to be removed;

'I would like to stress the emotional side. I was fully independent, and this was spontaneously gone. I barely left the house. I was clinically depressed and felt like I had lost my wife, but I started to get her back with NAB. My wife has been given more advice and support than anyone else. They put me in touch with others going through the same thing. I can't ever pay NAB back for what they have done.'

And;

'Some people can become desperate, depressed and even suicidal. We give emotional support and build confidence back. This can be ongoing especially for the most vulnerable.'

Many other comments were specific to all of the different aspects of the NAB service provision; from producing accessible leaflets for information, tailored signposting and advice, support with IT and assistive technology equipment, engagement through various groups and activities, opportunities to make friend and help with daily tasks.

A strong theme coming through is that there is nowhere else for people to go to when they receive a health diagnosis of visual impairment for both emotional and practical support. Additionally many respondents spoke of the significant value for money the service provides, and how the NCC funding is crucial as a baseline fund for NAB, in order to be able to levy in additional funding.

Other Supporting Evidence

NCC additionally received a written note from three parties, one being the service provided. The aforementioned themes again came through very strongly. NAB especially stressed the need for local authority funding as we transition to unitary authorities to ensure that this vital service is not lost as result of this transition.

An additional concern that was explicitly raised by NAB (and to a lesser degree at the events and in response to the questionnaire) were difficulties around the accessibility of the consultation process and a technical issue in the online questionnaire. NCC acknowledges these concerns. The technical glitch was as a result of an issue with the platform NCC uses for online consultations. NCC worked with NAB prior to the consultation to deliver as robust a consultation as was possible within the current financial and timescale constraints. NCC is grateful to the advice NAB provided in developing the consultation. NCC is of the view that to have directed more of the council's very limited resources on this consultation process would have been disproportionate to the size of the contract. The consultation received a good level of response through which NCC has been able to make a good level of analysis and a clear recommendation.

Notes

Stargardt disease is also called Stargardt macular dystrophy, juvenile macular degeneration, or fundus flavimaculatus. The disease causes progressive damage—or degeneration—of the macula, which is a small area in the centre of the retina that is responsible for sharp, straight-ahead vision.

Macular degeneration, also known as age-related macular degeneration (AMD or ARMD), is a medical condition which may result in blurred or no vision in the centre of the visual field. Early on there are often no symptoms.

Chronic Obstructive Pulmonary Disease (COPD) is an umbrella term used to describe progressive lung diseases including emphysema, chronic bronchitis, and refractory (non-reversible) asthma. This disease is characterized by increasing breathlessness.

Glaucoma is an eye condition where your optic nerve is damaged by the pressure of the fluid inside your eye. Most types of glaucoma have no symptoms, so a regular eye test is the only way to know you have the condition. Treatment with drops can often prevent glaucoma causing sight loss.