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.

VERY LITTLE
- THIS DOCUMENT READS AS A BUREAUCRATIC NIGHTMARE
- SPECIALISM IS A DYING ART. SERVICE PROVIDERS TEND TO HAVE A GENERAL KNOWLEDGE OF SI ISSUES NOT SPECIALIST
- INFORMATION SHARING IS A MANAGER'S NIGHTMARE. WHILST INFO SHARING IS AN ADMIRABLE CONCEPT IT HAS THE EFFECT OF "TOO MANY COOKS SPOIL THE BROTH"
- COLLECTING & FILING DATA IN ORDER TO EASE THE ABOVE POINTS POSES PRIVACY ISSUES FOR SI SERVICE USERS
- IT IS NOT IN THE AUTHORITIES INTEREST TO COMPLY WITH THE 2010 EQUALITY ACT.

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

COMPLETE AN AUDIT FIRST THEN RE-THINK THIS STRATEGY
INVOLVE SI SERVICE USERS FROM THIS POINT. LET SI
SERVICE USERS HELP YOU.

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

(d) How will you make these changes?

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?

SPECIALIST – ADEQUATE TRAINING FOR SERVICE PROVIDERS TO BE EXPERTS IN SI ISSUES
• MORE TRANSPARENCY AMONGST THE MEDICAL PROFESSIONALS REGARDS INFORMATION SHARING.

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

• INFORMATION SHARING – GETTING INFORMATION FROM MEDICAL PROFESSIONALS IS LIKE GETTING BLOOD OUT OF A STONE!
• DATA COLLECTING POSES A REAL WORRY. WILL SI USERS RIGHT TO PRIVACY BE ERODED?

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

YES - WHO IS GOING TO CO-ORDINATE ALL THIS ? - A
Government Body ILL-INFORMED ON SI ISSUES ?

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?

TRAINING OF FRONT LINE STAFF. WILL THEY BE EXPERTS
IN SI ISSUES OR WILL THEY BE 'JUMPED UP' &
SECRETARIES GOOD AT RECORDING DATA/WORKING ON
COMPUTERS ?

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

THE BIGGEST DIFFENCE IS THAT SI USERS ARE GOING TO BE SUBJECTED TO DATA COLLECTING OVERLOAD AND ABUSE OF THEIR PRIVACY RIGHTS.

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

DO YOU HAVE A SI SERVICE USERS ACTION GROUP ON BOARD TO HELP YOU SHAPE THIS STRATEGY TO BENEFIT ALL STAKEHOLDERS?
THE STRATEGY NEEDS TO BE MORE INCLUSIVE OF SI PEOPLE.

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.

AS A SI SERVICE USER I EXPERIENCED AT FIRST HAND THE LENGTHY TIME IT TAKES TO PROVIDE SI RESOURCES IN THE HOME AND WORKPLACE. THIS HAS A CUMUCATIVE EFFECT AND HAS LEFT ME DISHEARTENED THIS STRATEGY READS AS MORE OF THE SAME.

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

VERY LITTLE, TO ACCESS SPECIALIST WHO CAN HELP ME WILL BECOME HARDER. I WILL BE FACED WITH A COMPUTER AND AN ADMINISTRATOR SITTING BETWEEN ME AND WHAT I REALLY NEED AS A DEAF/BLIND PERSON.

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?

THIS POLICY/STRATEGY REFLECTS THAT OF A COUNTRY THAT IS SKINT!
IN TERMS OF GIRFEC AND THE DORAN REVIEW YOU MISSED OUT ONE CRUCIAL COMPONANT AND THAT IS 'CHILD PROTECTION.' HOW WILL YOU PROTECT THE YOUNG VUNERABLE SI CLIENT.

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?

TO GIVE THIS STRATEGY SOME CREDIBILITY INVOLVE SI USERS MORE. WE CAN HELP YOU MOVE THIS STRATEGY FORWARD IN A WORTHWHILE WAY.