

LEICESTERSHIRE  
*together*

# LEICESTERSHIRE JOINT STRATEGIC NEEDS ASSESSMENT



## **YOUNG DISABLED ADULTS - PHYSICAL DISABILITY**

SEPTEMBER 2009



## TABLE OF CONTENTS

1.1	INTRODUCTION	4
1.2	DEMOGRAPHY	6
1.3	CHAPTER LINKS	16
1.4	FACTORS RELATED TO DISABILITY	17
1.5	LOCAL SERVICE / BENEFIT USE	18
1.6	PERSPECTIVES OF PEOPLE RECEIVING SERVICES	22
1.7	VALUE FOR MONEY	24
1.8	KEY FINDINGS	24
1.9	FUTURE SERVICE AREAS.	26

## TABLES

Table 1:	People aged 18-64 predicted to have a moderate disability, projected to 2025. ....	7
Table 2:	People aged 18-64 predicted to have a serious physical disability, projected to 2025. ....	8
Table 3:	People aged 18-64 predicted to have a moderate or serious personal care disability, projected to 2025 line Leicestershire. ....	8
Table 4:	Total numbers of people with a physical disability using PANSI set against the Ethic Breakdown of Leicestershire Population. ....	9
Table 5:	Population aged 18-64 predicted to have a serious personal care disability estimated by ethnicity from 2008-2025. ....	9
Table 6:	People predicted to have a physical disability and be permanently unable to work, by gender and age, projected to 2025. ....	10
Table 7:	Incidence and prevalence of some neurological conditions in the UK against the current population of Leicestershire of 644,600. ....	11
Table 1.3.8:	LLR NHS prevalence of neurological conditions. ....	11
Table 9:	Leicestershire Projections of Adult Population Impacted by Hearing Loss (period 2009-2029). ....	12
Table 1.3.10:	People registered as deaf or hard of hearing, year ending 31 March 2007. ....	13
Table 11:	The number of people predicted to have significant sight loss in Leicestershire. ....	14
Table 1.3.12:	The number of people predicted to have significant sight loss in Leicestershire. ....	15
Table 1.6.1:	Number of new assessments for people aged 18-64 with a physical disability (RAP data). ....	18
Table 14:	Number of service users receiving a service - 1 <sup>st</sup> April 2007 and 31 <sup>st</sup> March 2008. ....	19
Table 1.6.3:	Frequency of use by service type for physically disabled people 2006/7- 2007/8. ....	20
Table 16:	People aged 18-64 with a physical or sensory disability, helped to live at home, or in care homes, projected to 2025. ....	20
Table 1.6.5:	Total number of people in Leicestershire claiming disability living allowance. ....	21

Table 1.6.6: Total number of blind or deaf people in Leicestershire claiming disability living allowance. August 2008 by age group.....22

## 1.1 INTRODUCTION

This chapter focuses on the needs of younger physically disabled people.

The Leicestershire County Council Adult Social Care Service and Leicester, Leicestershire and Rutland NHS support a number of younger people (aged 18-64) who have a range of physical disabilities. This includes people who have had physical disabilities from birth such as cerebral palsy, and people who have acquired the disability through a condition or illness such as neurological conditions or have had a traumatic injury such as head or spinal injury.

The Disability Discrimination Act<sup>1</sup> defines a disabled person as someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities. The main focus of this chapter is to analyse the needs of physically disabled people in Leicestershire within this definition and within the guiding principles of the Social Model of Disability<sup>2</sup>. The chapter also includes information about the numbers of people with sensory impairments which predominately affect people aged 65 and over.

In order to understand the needs of young physically disabled people a range of information and data will be presented. Where local information is not available national prevalence rates are applied to local population figures. The main sources of information that has been used is Projecting Adult Need and Service information System<sup>3</sup> (PANSI). There is a lack of good quality local information pertaining to this particular group of people and more detailed need analysis would benefit local strategic commissioning and is highlighted through out the chapter.

### 1.1.1 Policy context

The policy context for this chapter has two key themes; access to support, and choice and control. Ensuring disabled people have greater access to housing, transport, health, employment, education and leisure opportunities and that they can participate fully in family and community life is a key priority locally and nationally. Also, ensuring disabled people who need support to go about their daily lives have a greater degree of choice and control over how that support is provided is a priority.

In 2006 the Government issued specific guidance to support the commissioners of services across all commissioning and provider sectors called *“Improving the Life Chances of Disabled People”*<sup>4</sup> and this covered six main outcomes which are highlighted below:

- Ensure that families with disabled children benefit from improvements to childcare provision and early education, and put the needs of children, young people and their families at the centre of service design and provision.

- Tackle the discontinuity in service provision as disabled children move into adulthood.
- Improve the support and incentives for disabled people to get into and stay in employment.
- Move progressively towards independent living through individual budgets for disabled people, drawing together the services they are entitled to and giving them greater choice and control over the mix of support they receive.
- Put in place arrangements to encourage cross-government working and involve disabled people in decision making.
- Develop an approach based on improving outcomes for disabled people rather than one focused on processes and structures, and ensure that progress can be measured.

In 2005 the Government had also introduced a specific *National Service Framework (NSF) for Neurological Conditions*<sup>5</sup> focusing on the commissioning and providing of local services. It had the following key requirements.

Services need to demonstrate improvements in:

- Person centred support.
- Early recognition, diagnosis and treatment.
- Emergency and acute management.
- Early and specialist rehab.
- Community rehabilitation and support.
- Vocational rehabilitation.
- Equipment and accommodation.
- Personal care and support.
- Palliative care.
- Support for families and carers.
- Care during admission to hospital or other health or social care setting.

A number of government White Papers, in particular “*Our Health Our Care Our Say 2006*<sup>6</sup>” and the *High Quality Of Care For All (Darzi)*<sup>7</sup> complement the *National Service Framework (2005)* and state that all Local Authority and Health Services providers should seek to increase the quality of services and personalised service support for all disabled people.

In 2008, the Government also publishes the *Independent Living Strategy 2008*<sup>8</sup>. This is a cross government strategy, specifically set to improve disabled people’s opportunities for independent living and states that:

- Disabled people will have greater access to housing, transport, health, employment, education and leisure opportunities. They should also be able to participate in family and community life.
- Disabled people who need support to go about their daily lives will have greater choice and control over how support is provided.

In February 2008, the Royal National Institute for the Blind launched the *UK Vision Strategy*<sup>9</sup> on behalf of the United Kingdom and in response to the international 2020 Vision Resolution<sup>10</sup>. It recommends that all health and community sectors:

- Improve the eye health of the people of the UK.
- Eliminate avoidable sight loss and deliver excellent support for people with sight loss.
- Improve Inclusion, participation and independence for people with sight loss.

## **1.2 DEMOGRAPHY**

### **1.2.1 Young disabled people**

There are estimated to be 3,210,201 younger people in England between the ages of 18 and 64 living with a moderate to serious physical disability which equates to approximately 10% of the population of 18 to 64 year olds.

Currently in Leicestershire, it is estimated that there are 42,113 physically disabled people between the ages of 18 and 64 with a moderate or serious physical disability. This number is set to rise to 45,786 by 2025 which is an increase of 3,673 or 8.7%.

On average there are three times as many people with moderate physical disabilities than serious disabilities in Leicestershire.

### **1.2.2 Moderate physical disability**

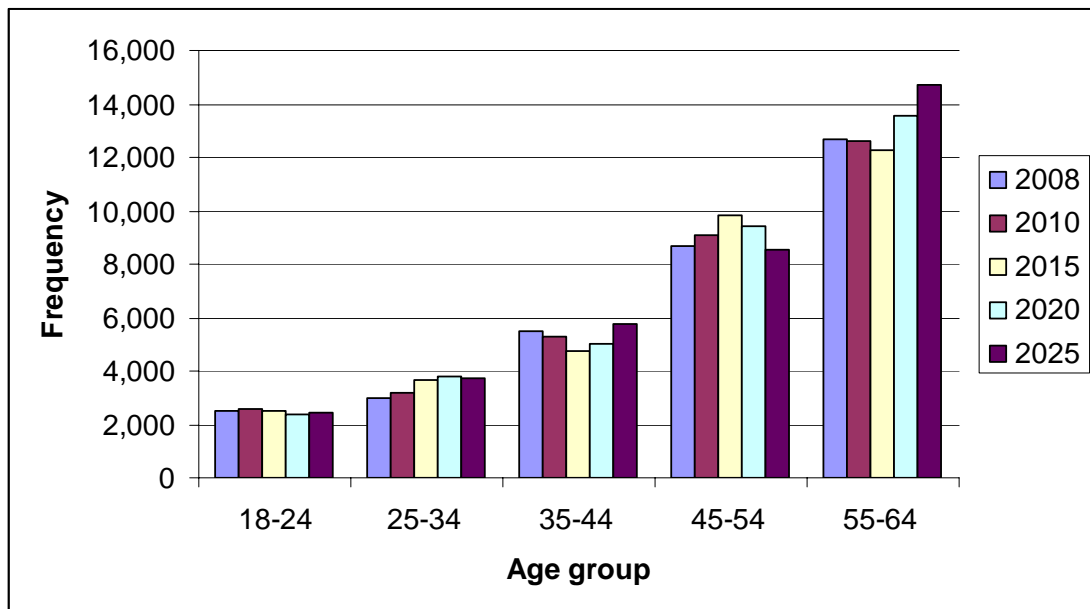
Amongst the 18-24 age group, the incidence of moderate physical disability is projected to increase between 2008 and 2010, then fall away sharply up to 2025, whilst the 25-34 and 35-44 age groups shows steady increases from 2008 up to 2025. In the 45-54 age group figures rise sharply from 2008 to 2015, and then fall away again by 2025 to the pre 2008 level. In the 55-65 age group figures decrease slowly between 2008 and 2015 but then have the highest overall rise of all the age groups by 2025. Across Leicestershire, there is projected to be an increase in the net number of people with moderate physical disabilities of 2,799 people between 2008 and 2025 and this is illustrated in Table 1. This increase is weighted towards females, with 1,428 projected to develop moderate physical disabilities compared to 1,371 males<sup>11</sup>. Although this is purely down to increases in the number of females projected in the population.

**Table 1: People aged 18-64 predicted to have a moderate disability, projected to 2025**

	2008	2010	2015	2020	2025
<b>18-24</b>	2,530	2,591	2,513	2,366	2,431
<b>25-34</b>	2,986	3,158	3,683	3,822	3,700
<b>35-44</b>	5,460	5,258	4,715	4,995	5,729
<b>45-54</b>	8,672	9,089	9,816	9,438	8,565
<b>55-64</b>	12,680	12,605	12,292	13,574	14,691
<b>Total</b>	32,328	32,701	33,019	34,195	35,116

Source: [www.pansi.org.uk](http://www.pansi.org.uk)

**Figure 1: People aged 18-64 predicted to have a moderate disability, projected to 2025**



Source: [www.pansi.org.uk](http://www.pansi.org.uk)

### 1.2.3 Serious physical disability

The numbers of people with serious physical disabilities are relatively small. Projections of the estimated number of people with serious physical disabilities in the future mirror demographic changes. Across Leicestershire, between 2008 and 2025, there is projected to be an increase in the number of people with serious physical disabilities of 884. See Table 2 for further details.

**Table 2: People aged 18-64 predicted to have a serious physical disability, projected to 2025.**

	2008	2010	2015	2020	2025
<b>18-24</b>	494	506	490	462	474
<b>25-34</b>	284	301	351	364	352
<b>35-44</b>	1,658	1,596	1,431	1,516	1,739
<b>45-54</b>	2,414	2,530	2,732	2,627	2,384
<b>55-64</b>	4,936	4,907	4,785	5,284	5,719
<b>Total</b>	9,786	9,841	9,792	10,253	10,670

Source: [www.pansi.org.uk](http://www.pansi.org.uk)

#### 1.2.4 Personal care needs

The definition of personal care used by PANSI is a person's ability to get in and out of bed, getting in and out of a chair, dressing, washing, feeding, and use of the toilet. A moderate personal care disability means the task can be performed with some difficulty. A serious personal care disability means that the task requires someone else to help.

PANSI estimates that in 2008 there were 16,063 physically disabled people who have some difficulty with personal care tasks and 3,546 people who require someone to help them with personal care in Leicestershire. This is set to rise to 17,560 and 3,850 respectively by 2025, a rise of approximately 9%. The age related information illustrated the variation in numbers by generation. See Table 3 for further details.

**Table 3: People aged 18-64 predicted to have a moderate or serious personal care disability, projected to 2025 line Leicestershire.**

	2008	2010	2015	2020	2025
<b>Moderate personal care disability</b>					
<b>18-24</b>	370	379	368	346	356
<b>25-34</b>	995	1,053	1,228	1,274	1,233
<b>35-44</b>	2,828	2,723	2,442	2,587	2,967
<b>45-54</b>	4,381	4,591	4,959	4,768	4,327
<b>55-64</b>	7,489	7,445	7,260	8,017	8,677
<b>Total</b>	16063	16191	16270	16992	17560
<b>Serious personal care disability</b>					
<b>18-24</b>	247	253	245	231	237
<b>25-34</b>	284	301	351	364	352
<b>35-44</b>	585	563	505	535	614
<b>45-54</b>	983	1,031	1,113	1,070	971
<b>55-64</b>	1,447	1,438	1,403	1,549	1,676
<b>Total</b>	3,546	3,586	3,603	3,749	3,850
<b>Total population - moderate or serious personal care disability</b>	19,609	19,777	19,873	20,741	21,410

Source: [www.pansi.org.uk](http://www.pansi.org.uk)

### 1.2.5 Black and minority ethnic physically disabled people

There are predicted to be a total of 4,843 black and minority ethnic people with physical disabilities currently living in Leicestershire. This figure is set to rise to 5,265 by 2025. The figures in Table 4 and Table 5 assume a constant 88.5% white population and a 11.5% black and minority ethnic population between the years 2008 and 2025<sup>12</sup>

**Table 4: Population aged 18-64 predicted to have a physical disability estimated by ethnicity**

	2008	2010	2015	2020	2025
<b>Total population aged 18-64</b>	42,113	42,542	42,811	44,448	45,786
<b>White population aged 18-64</b>	36,006	37,649	37,887	38,003	40,521
<b>Black and minority ethnic population aged 18-64</b>	4,843	4,892	4,923	5,115	5,265

Source: [www.pansi.org.uk](http://www.pansi.org.uk)

In terms of serious personal care needs PANSI predicts there were 408 people from black and minority ethnic groups with serious personal care needs in 2008, and this is predicted to rise to 443 by 2025

**Table 5: Population aged 18-64 of physically disabled people predicted to have a serious personal care disability estimated by ethnicity**

	2008	2010	2015	2020	2025
<b>Total population aged 18-64</b>	3,546	3,586	3,603	3,749	3,850
<b>White population aged 18-64</b>	3,130	3,172	3,189	3,318	3,407
<b>Black and minority ethnic population aged 18-64</b>	408	412	414	431	443

Source: [www.pansi.org.uk](http://www.pansi.org.uk)

### 1.2.6 Employment

Fifty percent of those with a disability are able to work.<sup>13</sup> In Leicestershire this means that an estimated 21,056 of the total physically disabled population (42,113 people) are able to undertake employment. This number will continue to rise in line with the predicted population increases. There is no local data available which evidences the numbers of people with physical disabilities in employment.

The following data is summarised from the report *Policy Agenda – Leonard Cheshire Disability*<sup>14</sup> and gives an indication of national issues for physically disabled people in securing and staying in employment.

National prevalence

- 50% of those with a disability are able to work.
- On average 78,000 people leave employment after acquiring a disability<sup>15</sup>.

- The proportion of disabled employees who are considered low paid is around 10% higher than the proportion of non disabled employees.

### 1.2.7 People permanently unable to work

Conversely approximately fifty percent of people with a physical disability are predicted to be unable to work and this is illustrated by age and gender in Table 6. This group are more likely to need the assistance of statutory services due to lack of income and a increased likelihood of benefit dependency. For Leicestershire, the projections suggest that by 2025, there will be an additional 1,556 people who are disabled and permanently unable to work, weighted towards males (989 compared to 567 females), although this may simply mirror working arrangements.

**Table 6: People predicted to have a physical disability and be permanently unable to work, by gender and age, projected to 2025.**

	2008	2010	2015	2020	2025
<b>Males</b>					
<b>18-34</b>	715	751	819	820	812
<b>35-44</b>	1,498	1,429	1,279	1,373	1,591
<b>45-54</b>	3,192	3,349	3,591	3,413	3,099
<b>55-64</b>	5,684	5,657	5,549	6,129	6,575
<b>Total</b>	11,088	11,185	11,238	11,735	12,077
<b>Females</b>					
<b>18-34</b>	640	663	717	720	711
<b>35-44</b>	1,245	1,210	1,091	1,137	1,293
<b>45-54</b>	2,622	2,752	2,993	2,905	2,646
<b>55-59</b>	2,215	2,111	2,215	2,556	2,639
<b>Total</b>	6,722	6,736	7,016	7,317	7,289
<b>All people</b>					
<b>18-34</b>	1,355	1,414	1,536	1,540	1,523
<b>35-44</b>	2,743	2,639	2,370	2,510	2,884
<b>45-54</b>	5,814	6,101	6,584	6,318	5,745
<b>55-64</b>	7,899	7,768	7,764	8,685	9,214
<b>Total</b>	<b>17,810</b>	<b>17,921</b>	<b>18,254</b>	<b>19,052</b>	<b>19,366</b>

Source <http://www.statistics.gov.uk/> (data supplied up to 64 for males and 59 for women to reflect working age differences.)

### 1.2.8 Neurological conditions

Approximately 10 million people across the UK have a long term neurological condition, accounting for 20% of acute hospital admissions. It is estimated that 350,000 people in the UK need help with the activities of daily living because of a neurological condition and 850,000 people care for someone with a neurological condition<sup>16</sup>. Data<sup>17</sup> also suggests that in an average general practitioner's case list of 2000, 40 people will have a disabling neurological condition and 10 of these will need help with daily living.

Based on the national estimates detailed in the *Long-term Neurological Conditions National Service Framework* it can be estimated that 12,200 people with a disabling neurological condition are living in Leicestershire, with 3,050 needing help with daily living.

The most accurate information about people with neurological conditions can be found in the joint data collected by Leicester, Leicestershire and Rutland NHS on the current cases known to their services.<sup>18</sup> Where there are no specific local figures or there is an estimate that builds on the local data then the NSF Annex 4<sup>19</sup> has been used.

The data in Table 7 suggests that the most prevalent neurological conditions is migraine, followed by core brain injuries or young stroke. Motor Neurone Disease is the least prevalent condition. LLR NHS estimate that there are 4,300 to 10,000 cases of epilepsy.

**Table 7: LLR NHS prevalence of neurological conditions**

Condition	New cases per year	Current prevalence
<b>Headache/migraine</b>	4,000( incidences)	150,000
	2,300 (admitted in an emergency per year).	12,000
<b>Epilepsy</b>	240 to 580	4,300 to 10,000
<b>Parkinson's disease</b>	200	2,100
<b>Multiple sclerosis (MS)</b>	60	1,400
<b>Motor neurone disease</b>	22	54

Source: Programme Delivery Strategy Directorate Leicestershire and Rutland PCT

Table 8 gives estimates of other neurological conditions not covered in Table 7.

**Table 8: Incidence and prevalence of some neurological conditions in the UK against the current adult population of Leicestershire of 410,600**

	Approximate UK population.	Cases per 100,000 of population	Estimates within Leicestershire
<b>Traumatic brain injuries leading to long term problems</b>	420,000 up to 65 years	1,200	4,927
<b>Cerebral palsy</b>	110,000	186	764
<b>Spinal cord injuries</b>	36,000	50	205
<b>Spina bifida and congenital hydrocephalus</b>	14,000	24	98
<b>Huntington's disease</b>	6,000-10,000	13.4	55

Source- NSF long term (Neurological conditions) 2005). Annex 4

Both tables indicate that overall, the numbers of people affected by neurological conditions is small in relation to other long term conditions, for example diabetes, chronic obstructive pulmonary disorder and cardiovascular disease analysed in Chapter 10 of the Joint Strategic Needs Assessment . Levels of disability and the impact on daily living varies from individual to individual and condition to condition, for example people with motor neurone disease may need higher levels of care in the later stages of the condition, where some people with diabetes will be able to self manage their condition. Therefore, whilst the prevalence rates give an indication of the numbers affected by neurological conditions they do not enable us to understanding patterns of current services use nor enable us to identify gaps in service delivery or design.

### 1.2.9 Deaf and hearing Loss

The total population of the United Kingdom (UK) is approximately 60 million. In the UK, deafness affects approximately 9 million people, or one in seven of the population. Approximately 8.3 million people are hard of hearing. Many of these people will benefit from using hearing aids. There are approximately 123,000 deafened people in the UK. These are usually people who were not born deaf and who became profoundly deaf as teenagers or adults. Approximately 20,000 deafened people are under 60 years of age<sup>20</sup>. Hearing loss increases sharply with age. About one third of people between 61-70 years of age have a significant hearing loss. Three quarters of people over 70 have a significant hearing loss.

Using Royal National Institute for Deaf People<sup>21</sup> predictions it is estimated that 4,697 adults in Leicestershire are profoundly deaf and this is predicted to increase to 4,934 by 2025. The total number of adults affected by hearing loss (of any severity) is somewhat higher at 120,839. This is predicted to increase to 128,419 by 2025.

**Table 9: Leicestershire projections of total population impacted by hearing loss (people aged 18 and over)**

		2010	2015	2020	2025
<b>Leicestershire population</b>	<b>Prevalence rate</b>	410,600	416,900	426,300	436,600
<b>Hard of hearing</b>	<b>14.7%</b>	60,358	61,284	62,666	64,180
<b>Mild – moderate Deafness %</b>	<b>13.6%</b>	55,841	56,698	57,976	59,378
<b>Severe - profound Deafness</b>	<b>1.13%</b>	4,610	4,711	4,817	4,934
<b>Leicestershire</b>		120,839	122,693	122,459	128,419

Source –[www.pansi.org.uk](http://www.pansi.org.uk) and Royal National Institute for Deaf People

The RNID report that approximately 71.1% of over 70s have some form of hearing loss, Table 10 given below indicates the number of people this would

be when the prevalence rates are applied to Leicestershire. The Prevalence rates of mild, moderate, severe and profound deafness are also given in Table 10.

**Table 10: Estimated numbers of people who are deaf or hard of hearing over 70**

	Prevalence rate	Frequency
<b>Age group 70+</b>	-	80,700
<b>Some kind of hearing loss.</b>	71.1%	57,377
<b>Mild hearing loss</b>	26.7%	21,546
<b>Moderate hearing loss</b>	36.8%	29,698
<b>Severe hearing loss</b>	6.3%	5,084
<b>Profound hearing loss</b>	1.3%	1,049

Source: Royal National Institute for Deaf People statistics

According to Adult Social Care data there were 5,790 people registered as deaf and hard of hearing in Leicestershire at the end of 2007, of which 615 were registered as deaf. The information given in Table 11 indicates that the numbers of people who are register as deaf or hard of hearing (5,790) is different to the numbers of people predicted to be deaf or hard of hearing (120,839) as indicated in Table 9. Some of this difference can be attributed to older people who are hard of hearing and are unlikely to be registered. Regardless of the potential inaccuracy of the Royal National Institute for Deaf People estimates it is a fact that 5,790 people are registered as deaf or hard of hearing and many more are affected by significant hearing loss.

**Table 11: People registered as deaf or hard of hearing, year ending 31 March 2007**

	Registered as deaf or hard of hearing	People registered as deaf by age				
		All Ages	0-17	18-64	65-74	75 or over
<b>Leicestershire</b>	5,790	615	25	405	55	125

Source: Adult Social Care Service Stats - Council tables: People registered as deaf or hard of hearing by age group.

### 1.2.10 Blind and partially sighted

The UK Vision Strategy launched in February 2009 states that 3.5 % of the national population (approximately 2 million) have significant sight loss. 50% of these people are thought to have preventable or treatable conditions. Sight loss increases with age when people are less likely to access treatment and support. Sight loss has a significant impact on the economy overall, similar to

that of cancer, arthritis and dementia and estimated to cost £4.9 billion per year.

Using *UK Vision Strategy* predictions it is estimated that in Leicestershire there are 14,550 adult's who are blind or partially sighted and this figure is predicted to increase to 15,281 by 2025, with 1,673 and 1,757 respectively being from Black and Minority Ethnic communities. The ethnicity estimates are based on a constant 88.5 % white and 11.5% Black and Minority Ethnic estimate through out this period.

**Table 12: The number of adults predicted to have significant sight loss in Leicestershire**

	2010	2015	2020	2025
<b>Leicestershire total population</b>	410,600	416,900	426,300	436,600
<b>Significant sight loss - prevalence rate 3.5%</b>				
<b>Black and Minority Ethnic (11.5%)</b>	1,673	1,678	1,715	1,757
<b>White (88.5%)</b>	12,876	12,913	13,204	13,524
<b>Total</b>	14,550	14,591	14,920	15,281

Source: *UK Vision Strategy* and [www.pansi.org.uk](http://www.pansi.org.uk)

Approximately 6.5% of those aged 65-74 have moderate to severe visual impairment. This increases to 12.4% for the over 75's. Table 13 provides local estimates of the numbers with moderate to severe visual impairments according to locality (based on the stated prevalence rates).

**Table 13: Visual impairment in the 65's and over**

	Age 65-74	Age 75+
Area	Leicestershire population	Leicestershire population
<b>Harborough</b>	426	818
<b>Hinckley and Bosworth</b>	543	1042
<b>North West Leicestershire</b>	442	880
<b>Charnwood</b>	734	1488
<b>Blaby</b>	482	930
<b>Melton</b>	252	508
<b>Oad and Wig</b>	302	657
<b>Leicestershire</b>	3,181	6,323

Source: *POPPI*

In February 2009 the blind and partially sighted register showed that a total of 3,526 people were registered as blind or partially sighted, of these 1,533 were registered as partially sighted, and 1,993 blind. Black and Minority Ethnic groups account for 192 or 5.5 % of the registered total. See Table 14 for further details.

**Table 14: The number of people registered as having sight loss in Leicestershire 2009**

<b>Ethnicity</b>	<b>Blind</b>	<b>Partially sighted</b>	<b>Total</b>
Black and Minority Ethnic Groups	108	84	192
White	1,885	1,449	3,334
<b>Total</b>	<b>1,993</b>	<b>1,533</b>	<b>3,526</b>

Source: Leicestershire blind and partially sighted register hosted by VISTA.<sup>22</sup>

In terms of gender we can see that there are more women than men on the register. See Table 15.

**Table 15: The numbers of people registered as having sight loss by gender**

<b>Gender</b>	<b>Blind</b>	<b>Partially sighted</b>
<b>Male</b>	703	604
<b>Female</b>	1,290	929
<b>Total</b>	<b>1,993</b>	<b>1,533</b>

Source: Leicestershire blind and partially sighted register hosted by VISTA.

The register shows the majority of people registered as blind or partially sighted are over 75, followed by the 65-74 age group. See Table 16 for further details.

**Table 16: Numbers registered blind or partially sighted in Leicestershire by age**

<b>Leicestershire</b>	
<b>Blind register</b>	
<b>Under 65</b>	<b>418</b>
<b>65 – 74</b>	<b>149</b>
<b>75 +</b>	<b>966</b>
<b>Total</b>	<b>1,533</b>
<b>Partially sighted register</b>	
<b>Under 65</b>	<b>412</b>
<b>65 – 74</b>	<b>185</b>
<b>75 +</b>	<b>1396</b>
<b>Total</b>	<b>1,993</b>
<b>Total register (blind and partially sighted)</b>	<b>3,526</b>

Source: Vista register

There is a substantial difference between the predicted numbers of people with sight loss in Leicestershire (14,550) and those on the blind and partially sighted register (3,526), most of these people will be over the age of 75 years.

The UK Vision Strategy states many people with sight loss do not access support information or advice about their sight loss and that 50% of people with sight loss could have benefited from early intervention and treatment.

The UK Vision Strategy also makes reference to the Royal National Institute for the Blind vision study “The Prevalence of Visual Impairments in the UK 2005”<sup>23</sup>, which states that people are more at risk of sight loss if they are from a more socially excluded group, such as older people in residential care, people from low income families, people with more than one impairment and people from Black and Minority Ethnic communities.

### 1.2.11 Supported housing

Disabled people have indicated the need for better access to accessible housing and housing support in order to promote independence and quality of life<sup>24</sup>.

The 2005-10 Supporting People Strategy, Leicestershire County Council<sup>25</sup> indicates that more research is needed to understand the needs of physically disabled people. In 2004, 33 physically disabled people aged 18-65 received housing related support compared with the following groups; 115 people with learning difficulties and 111 with mental health needs.

Housing Authorities are being asked by central government to promote the Life Times home standard<sup>26</sup>. This will encourage new build homes to have improved standards of accessibility for all people. More information about District and Borough County’s readiness for these standards is required in order to analysis future housing implications for physically disabled people.

Physically disabled people are the main users of major adaptation grants which are provided through the Disability Facilities. This grant is administered by District Councils and further information and analysis would be helpful in understanding current local need and how services are used.

Leicester and Leicestershire Strategic Housing Market Assessment 2007/8<sup>27</sup> states that there is likely to be between 18 to 50 physically disabled young people requiring special / supported housing in Leicester and Leicestershire, approximately 60% of this number are likely to be resident in the county. The market assessment however states that this figure is purely about young disabled people moving into adulthood and does not take into account needs arising from disabled people already in adulthood for example, housing needs arising from acquired disabilities later in life through accidents, conditions or illnesses. This suggests the number of physically disabled people requiring special/support housing is likely to be higher.

## 1.3 CHAPTER LINKS

Disabled people have a higher likelihood of experiencing social exclusion than the non-disabled working population.<sup>28</sup> Therefore, there needs to be links

made to *JSNA* chapters which cover employment, access to housing, housing related support and transport need.

There is a substantial number of people aged 65 who have sensory impairments and will be affected by the issues and data analysed within the older persons' chapter.

#### 1.4 FACTORS RELATED TO DISABILITY

This section is a summary of the *Policy Agenda – Leonard Cheshire Disability* which brings together national evidence relating to the social model of disability. Local research is needed to understand the impact of these factors on physically disabled and sensory impaired people.

- Health care early intervention, rehabilitation, managing dual or complex needs, particularly for people in hospitals, is important in ensuring disabled people have quality of life and increase their chance of recovery or managing their condition.
- Social care support - access to services and fair access to care <sup>29</sup> eligibility criteria has an impact of the way people with low and moderate needs use Adult Social Care Services.
- Employment is more difficult to gain, which is often of lower pay and retaining employment after acquiring a disability can be difficult.
- Poverty - disabled people are more likely to be dependant on state benefits and in addition to this may have the added cost of managing an impairment.
- Education - disabled people are more likely to leave school with fewer or no qualifications.
- Transport - disabled people are less likely to be able to use public transport leading to reduced access to work, leisure and social contact.
- Housing - disabled people are more likely to live in social housing and have less chance of living independently than non-disabled people. Also, they are more likely to need major adaptations and minor adaptations to their housing in order to live independently,
- Mental health - there is an increased risk of mental health needs for physically and sensory disabled people.

The *State of Social Care in England*<sup>30</sup> report published in January 2009 states that “people are not always getting quality personalised support, particularly those with multiple and complex needs”. This is in line with other evidence<sup>31</sup> that suggests people with neurological conditions need high quality joined up services but national anecdotal evidence suggests that services and service responses can be fragmented. There is also evidence that many people with registered sensory disabilities have other physical disabilities that may increase their risk of inequalities<sup>32</sup>.

## 1.5 LOCAL SERVICE / BENEFIT USE

### 1.5.1 People accessing services from the Leicestershire County Council Adult Social Care Service

Table 17 shows that 641 assessments of physically disabled people were conducted. This is an additional 121 assessments in 2007/2008 than 2005/2006. However, as Table 17 highlights there had actually been a reduction in the number of assessments between 2006/2007 to 2007/2008.

**Table 17: Number of new assessments for people aged 18-64 with a physical disability (RAP data)**

	05/06	06/07	07/08	% change 05/06 - 06/07	% change 06/07 - 07/08	% Change 05/06- 07/08
<b>18-64</b>	520	682	641	31.2%	-6.0%	23.3%

Source: Adult Social Care Service SSIS (Social Service Information System).

The overall numbers of young physically disabled people using the Adult Social Care Service in 2007/8 was 1,886; out of this number 93 people were supported to live in the community. Of all service users (1,793 people) who are supported to live at home 94 had a sensory impairment. Many people with a sensory disability will be over 65 and are likely to appear in the numbers of older people the Adult Social Care Service support but may not be identified as having sensory impairments as their primary need.

The information in Table 18 shows that the majority of physically/sensory disabled using Adult Social Care Services aged between 18-64 are receiving community services (1822 people) rather than residential/nursing services (97 people). Of those who receive residential services, the majority receive independent residential care in comparison to local authority homes. This is likely to relate to the fact that there are no local authority homes registered to take people under 55.

**Table 18: Number of service users receiving a service - 1<sup>st</sup> April 2007 and 31<sup>st</sup> March 2008**

<b>Primary Client Type; 18-64 only</b>	<b>Total of Clients</b>	<b>Community -Based Services</b>	<b>Local Authority Residential Care</b>	<b>Independent Sector Residential Care</b>	<b>Nursing Care</b>
<b>Physically disabled people</b>	1,792	1,733	3	55	15
<b>Physical disabled people with frailty and/or temporary illness</b>	299	285	1	10	7
<b>People with Hearing impairment</b>	72	72	0	0	0
<b>People with Visual impairment</b>	16	12	0	4	0
<b>People with Dual sensory loss</b>	6	5	0	2	0
<b>Total</b>	<b>1,886</b>	<b>1,822</b>	<b>4</b>	<b>71</b>	<b>22</b>

*Source- 2007/08 Adult Social Care Service RAP returns (Referrals Assessments & Packages of Care).*

Table 19 shows that there has been little change in the number of physically disabled people receiving home care and day care services. However, there has been a slight increase in the use of short stays and equipment and adaptations and a slight decrease in the use of the home meals service. The largest increase has been in the use of Direct Payments.

**Table 19: Frequency of use by service type for physically disabled people 2006/7- 2007/8**

Service	Frequency 2006/7	Frequency 2007/8
Home care	564	576
Day care	217	219
Meals	57	48
Short stay	42	59
Direct Payments	206	290
Equipment/adaptations	1,318	1,351

Source: Adult Social Care Service SSIS (Social Service Information System).

Projections of future care requirements, based on current patterns of demand, show that by 2025 there will be an estimated additional 102 physically/sensory disabled people at receiving support to remain at home, this is an increase of 7.8%. In terms of residential/nursing care placements there will be an estimated increase of 7% by 2025, see Table 20 for further details. This is assuming that no new strategic changes impact on people needing services in this time-frame, for example, new technologies, new treatments, new preventative services and new legislation regarding eligibility criteria for Adult Social Care.

**Table 20; People aged 18-64 with a physical or sensory disability, helped to live at home, or in care homes, projected to 2025**

	2008	2015	2020	2025
People aged 18-64 with a physical or sensory disability helped to live at home	1,295	1,334	1,364	1,397
People aged 18-64 with a physical or sensory disability in residential and nursing care during the year, purchased or provided by the CSSR <sup>33</sup>	92	94	97	99

Source - PANSI which is based 2006/7 RAP returns.

### **Equipment and minor adaptations**

Equipment and minor adaptations are measured against the national indicator Performance Assessment Framework D54 for people 18 and over, which requires councils to indicate the number of equipment items delivered within seven working days. Performance in Leicestershire has exceeded 90% since the inclusion of this indicator in the Performance Assessment Framework. The target for 2008 - 2009 is 92% and current performance stands at 91.2%. A user experience survey conducted earlier this year as required by the Department of Health showed that 96.3% of people who responded felt the quality of their lives had improved after the receipt of

equipment and that 85% of respondents were satisfied with the services they received.

### Advocacy services

Less than 5% of the independent one to one advocacy services commissioned by Adult Social Care Service are for physically disabled and learning disabled people. Between October and December 2008 there were 45 people receiving advocacy support from this service, which was running at its full capacity<sup>34</sup>. Although not all people will want or need advocacy support, the numbers of people using advocacy appears to be very modest compared with the 3, 546 physically disabled people predicted to have a serious personal care need.

### 1.5.2 Benefit claimants - Disability Living Allowance

Table 21 indicates that there were a total of 15,270 people claiming Disability Living Allowance in August 2008 that had disabilities connected to their physical health. A straightforward comparison between the population predictions in PANSI and the Disability Living Allowance figures needs to be read with caution as they categorise disability differently. However, as there are an estimated 19,609 physically disabled people with a moderate or serious personal care need, an assumption can be made that there are an additional 4,000 physically disabled people that may be eligible to claim Disability Living Allowance.

**Table 21: Total number of people in Leicestershire claiming Disability Living Allowance**

Total	Age								
	18-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64
15,270	360	270	360	570	790	1,020	1,220	1,800	2,560

*NB – does not include people with mental illness, learning disabilities, deafness or blindness, as of August 2008.*

*Source- ONS Crown Copyright Reserved [from Nomis<sup>35</sup> on 27 March 2009].*

Table 22 indicates that 450 blind and 190 deaf people claimed Disability Living Allowance in August 2008. As there are 5,790 people registered as deaf or hard of hearing, and 3,526 people registered blind or partially sighted, only a small proportion are claiming Disability Living Allowance. Further research is needed to understand the factors that contribute to the low numbers of people with sensory disabilities receiving Disability Living Allowance.

**Table 22: Total number of blind or deaf people in Leicestershire claiming Disability Living Allowance August 2008 by age group**

	Age group									
	Total	18-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64
Blind	450	40	20	40	40	60	50	60	70	70
Deaf	190	40	20	10	30	20	20	20	20	20

*Source-ONS Crown Copyright Reserved [from Nomis on 27 March 2009].*

## 1.6 PERSPECTIVES OF PEOPLE RECEIVING SERVICES

In February 2009, the newly formed Force4Change were asked to comment on the potential key issues within this Chapter. The following is a summary of their discussion which was written by the facilitator of the meetings and is quoted in full:

The discussion is summarised below.

Housing was one of the topics of discussion; it was concluded that there should be an adequate supply of affordable and “accessible” housing. This would include wide doorways and passage ways. The bathroom and toilet must be easy to use, even when in a wheelchair. The light switches should be within easy reach. Similarly, there should be access to public buildings. Not just for the physically disabled, but also for those with sensory impairments.

The fact that needs were means-tested, provoked a lot of heated discussion, as did the subject of obtaining information. It was strongly felt that information should be “volunteered” and that service users shouldn’t have to seek it out - “What services do I want? How do I know?” Plus, there is little point in providing information, if it is all jargon. Plain English is what we should have. Instead we are continually “being baffled by science”.

There should be a change in the attitude of “upstairs management”. Decisions and support “must” be based on the social NOT the medical model. The council have to recognise that “different disabilities” do not have the same needs. “We do not fit neatly into pigeon holes”. The whole of this area requires disability awareness training, by disabled people.

“Disabled people need to be educated too”. This comment raised the problem experienced by disabled adults trying to either receive support for learning or returning/starting to work.

Sensory disabilities are often overlooked. Social Care leaves them out in the cold when it comes to accessible information. “Computers are not accessible or desired by all.”

Finally, these three comments sum up what the forum would like to see. There should be:

- A more recognised social care pathway.
- A key worker across all disabilities.
- Better service for all.

### 1.6.1 “Spotlight on Deafness”

#### “Report on Services Provided to Deaf, Hard of Hearing, Deafened & Deafblind Service Users” February 2008

The report was commissioned by Leicestershire County Council and Action Deafness to look at the needs of Deaf, Hard of Hearing, Deafened and Deafblind people in Leicestershire.

The report is intended to inform the strategic planning of community services, improve partnership working and raise awareness. The report consulted with a range of people, including people receiving services.

The report looked in detail at the needs of Deaf, Hard of Hearing, Deafened and Deaf blind people. It sought to engage and listen to the views of such people about every aspect of their lives and the day to day issues they face. It sought to identify what worked well for such people and what prevented them from having equal access to services and support.

The study found that there was a strong cultural link between Deaf, Hard of Hearing, Deafened and Deafblind people and their community and they had a desire for improved accessibility and support so that they can remain in their area. They wanted to be able to access more community and cultural activities. There was a clear need to influence what happens within their locality and to help improve and shape the future.

The research found that a lack of accessible information presented barriers to gaining the support needed. It was therefore recommended that the provision of a wide range of comprehensible information in different formats and improved methods of communicating is made available. To support this process, the provision of interpreters, advocacy and language support would need to be improved. To support deafened and hard of hearing people, there needs to be improved access to community equipment, communication courses and community support programmes.

It was recommended that in order to create high quality needs-led provision, people who receive services also need to be involved and engage in the design and review of services. Providers therefore need to encourage individuals to actively participate and voice their needs.

In addition, deaf people expressed a wish to make a positive contribution to society through employment, for example, by accessing training, employment and developing career progression. In order to do this deaf people would

need to be provided with the necessary skills which develops their learning potential through communication support.

The implementation of the recommendations in this report will start the process of realising the vision that has been created by deaf people and will enable them to have access to a full range of services.

## **1.7 VALUE FOR MONEY**

Direct Payments has become the most significant area of spend for people receiving services from the Adult Social Care Service, with residential care the next highest spend. Within the NHS work is underway in developing a resource for people with neurological conditions. Financial information relating to services for physically disabled and sensory impaired people can be obtained from the respective commissioning bodies.

## **1.8 KEY FINDINGS**

The Leicestershire County Council Adult Social Care Service and Leicestershire County and Rutland NHS support a number of younger people (aged 18-64) who have a range of physical disabilities.

The population of moderately to seriously physically disabled people aged 18-64 is set to rise from 42,113 in 2008 to 45,786 in 2025, a rise of 8.7%. This reflects the increase in the overall numbers of people aged 18-64 we expected to see in the future. The biggest population increase is expected to be in the 55-64 age group.

On average there are three times as many people with moderate physical disabilities than serious disabilities.

There were 4,843 physically disabled people from black and minority ethnic groups in Leicestershire in 2008, which is set to rise to 5,265 by 2025.

Of the total number of physically disabled people, there is predicted to be 3,546 people who will need assistance with personal care. This figure is set to increase to 3,850 by 2025, a rise of 8.5%. The number of people from black and minority ethnic groups with serious personal care needs in 2008 was 408, which is set to rise to 443 by 2025.

In 2008, there was a total population of 21,056 physically disabled people who were unlikely to be able to work. By 2025 there will be an additional 1,556 physically disabled people permanently unable to work.

There is a substantial difference between the predicted numbers of people with sight loss in Leicestershire (14,550) and those on the Blind and Partially Sighted Register (3,526).

There is a substantial difference between the predicted numbers of people who are deaf or hard of hearing in Leicestershire (120,839) and those on the Deaf or Hard of Hearing Register (7,283). The majority of those on the Deaf or Hard of Hearing Register will be aged over 60.

Physically disabled people have a higher likelihood of experiencing social exclusion than the non-disabled working population. Local research is needed to understand the impact of access to: health and social care support; employment; education; transport; housing and mental health support for physically disabled people, particularly those with complex needs.

Currently, there is a substantial difference between the estimated number of people who have a moderate/severe physical and sensory impairment and as a result have a serious personal care needs (3,546 people) and the number of people receiving Leicestershire County Council Adult Social Care Services (1,886 people). The reasons for these differences need further analysis.

The Adult Social Care Service data shows that there has been an increase of 118% in the use of direct payments by physically disabled people since April 2006.

The number of community care assessments completed by Adult Social Care Service with physically disabled people has increased by 31.2% between 2006 and 2008 and can be expected to continue to rise in line with population increases.

Of the 1886 physically disabled people receiving Adult Social Care Service support in 2007/8, 95% were receiving community services and 5% were receiving residential and nursing home care.

Based on current prevalence rates there is likely to be a slow increase in the need for long term residential care and an increase of 7.8% in the need for community based Adult Social Care Service.

The service commissioned to support independent advocacy by Leicestershire County Council Adult Social Care Service appears to be very modest in size compared with the numbers of disabled people with higher levels of social care needs.

In order to identify the needs and preferences of those with physical disability a number of consultations have taken place with physically disabled people. Consultation with disabled people indicates there is a need for:

- A more recognised care pathway
- A key worker across all disabilities
- Better services for all

Consultation with deaf and hearing impaired people indicates:

- There is a strong cultural links with their community and a desire for improved accessibility and support to social care
- All agencies need to work together to improve communication and raise awareness of their issues
- Lack of accessible information presented barriers to gaining the support needed
- Service users also need to be involved and engaged in the design and review of services

## **1.9 FUTURE SERVICE AREAS.**

National evidence suggests that younger people who are physically disabled and all adults who have a sensory impairment are less likely to have equal access to health services, housing, employment, leisure, social care support, and independent advocacy. This chapter predominantly uses national prevalence rates and translates these to local population projections. Key strategic partners need to consider the need for further local research that builds on the prevalence rates and informs future commissioning more accurately.

### **1.9.1 Personalisation of services**

Younger physically disabled people have indicated through consultation and through their direct commissioning of services that they need and want community based services which meet their individual needs. Therefore, there is a case for supporting the development of self-directed support through individual budgets and specifically Direct Payments. Most people have used direct payments in order to employ personal assistants and workforce development is a particular area that needs to continue to develop. There needs to be continued high quality engagement and involvement with disabled people in strategic commissioning and service development.

### **1.9.2 Preventative services**

Younger physically disabled people would benefit from better access to information, communication support, advocacy and early intervention. In terms of preventing sensory problems it would be of benefit to the local population to promote better understanding of eye care and treatment, as indicated in the *UK Vision Strategy* for all people.

### **1.9.3 Employment support**

In Leicestershire in 2008 there were 21,056 physically disabled people either in or able to undertake employment, which will rise in line with local working age population increase. Further development is needed to build more accessible employment opportunities with local employers. However, it is recognised that within the current economic recession that unemployment is likely to continue to rise and this may impact adversely on disabled people's employment opportunities.

#### 1.9.4 Supported living and accessible housing

Younger physically disabled people need better access to accessibly designed or adapted housing which would lead to increased quality of life and independence. There needs to be a considered cross-agency approach to understanding the housing needs of physically disabled people and the specific development of accessible housing across the county, particularly in the provision of major adaptations, housing allocations, housing related support and the introduction of the *Lifetime Home Standards*. This is of particular importance in order to meet the requirements of the cross-Government *Independent Living Strategy 2008*.

---

<sup>1</sup> [http://www.opsi.gov.uk/acts/acts1995/ukpga\\_19950050\\_en\\_1](http://www.opsi.gov.uk/acts/acts1995/ukpga_19950050_en_1)

<sup>2</sup> The Social Model of disability says that people with impairments are disabled by physical and social barriers. Disability results from social structures and attitudes, rather than from a person's impairment or medical condition and this is key to understanding and implementing the Disability Equality Duty

<sup>3</sup> PANSI, Projecting Adult Need and Service information System created by the Care Services Efficiency Department (CSED) on behalf of the DH.

<sup>4</sup> [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4101751](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4101751)

<sup>5</sup> <http://www.dh.gov.uk/en/Healthcare/NationalServiceFrameworks/Long-termNeurologicalConditionsNSF/index.htm>

<sup>6</sup> [http://www.dh.gov.uk/en/Healthcare/Ourhealthourcareoursay/DH\\_072550](http://www.dh.gov.uk/en/Healthcare/Ourhealthourcareoursay/DH_072550)

<sup>7</sup> <http://www.dh.gov.uk/en/Healthcare/Highqualitycareforall/index.htm>

<sup>8</sup> [www.officefordisability.gov.uk/docs/ilr-summary.pdf](http://www.officefordisability.gov.uk/docs/ilr-summary.pdf).

<sup>9</sup> [www.vision2020uk.org.uk](http://www.vision2020uk.org.uk)

<sup>10</sup> World Health Assembly VISION 2020 resolution to reduce avoidable blindness by the year 2020 and to improve support and services for blind and partially sighted people.

<sup>11</sup> [www.pansi.org.uk](http://www.pansi.org.uk)

<sup>12</sup> Office of National Statistics. Table 3: 2006-based sub national population projections by sex and quinary age, Local authorities and counties within East Midlands, West Midlands and East GORs. Office of National Statistics. June 12 2008.

<sup>13</sup> Office of National Statistics. Labour force Survey. 2007. [Online]. Available from: URL: <http://www.statistics.gov.uk/statbase/Source.asp?vlnk=358&More=Y>

<sup>14</sup> <http://www.lcdisability.org/?lid=8716>

<sup>15</sup> [www.poverty.org.uk](http://www.poverty.org.uk)

<sup>16</sup> see 6

<sup>17</sup> DoH Sept 2001

---

<sup>18</sup> Courtesy of Associate Director - Programme Delivery, Strategy Directorate  
NHS Leicestershire County and Rutland

<sup>19</sup> See 5.

<sup>20</sup> Royal National Institute for Deaf People curtsey of Spot Light on Deafness  
report 2008.

<sup>21</sup> Royal National Institute for Deaf People. Information and resources:  
statistics. [Online] Available from URL:  
[http://www.rnid.org.uk/information\\_resources/aboutdeafness/statistics/statistics.htm#deaf](http://www.rnid.org.uk/information_resources/aboutdeafness/statistics/statistics.htm#deaf)

<sup>22</sup> VISTA. Leicestershire blind and partially sighted register hosted by VISTA.  
[Online] 2009. Available from: URL: <http://www.vistablind.org.uk/>

<sup>23</sup> Tate, R., Smeeth, L., Evans, J., Fletcher, A., (2005) The prevalence of  
visual impairment in the UK; A review of the literature,  
[www.rnib.org.uk/xpedio/groups/public/documents/PublicWebsite/public\\_prevalencereport.doc](http://www.rnib.org.uk/xpedio/groups/public/documents/PublicWebsite/public_prevalencereport.doc)

<sup>24</sup> Independent Living consultation- Government response  
<http://www.officefordisability.gov.uk/docs/ils-consultation-08.pdf>

<sup>25</sup> [http://website/index/social\\_services/general\\_information/sc\\_plans\\_policies/  
supporting\\_people\\_strategy.htm](http://website/index/social_services/general_information/sc_plans_policies/supporting_people_strategy.htm)

<sup>26</sup> Office of the Community and Local Government (2007) - The Future of the  
code of sustainable homes- Making a rating mandatory  
<http://www.communities.gov.uk/documents/corporate/pdf/Makingaratingmandatory.pdf>

<sup>27</sup> Leicester and Leicestershire Strategic Housing Market assessment.  
[http://www.blinesehousing.info/LeicSHMA/report\\_sections/Leicester\\_and\\_Leicestershire\\_SHMA](http://www.blinesehousing.info/LeicSHMA/report_sections/Leicester_and_Leicestershire_SHMA)

<sup>28</sup> <http://www.lcdisability.org/?lid=8716>

<sup>29</sup> Fair access to care services- the eligibility criteria for adult social care  
services.  
[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4009653](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4009653)

<sup>30</sup> State of Social Care In England 2007-8  
<http://www.info4local.gov.uk/documents/publications/1131748>

<sup>31</sup> The national Neurological Alliance.  
<http://www.neural.org.uk/campaigning/our-purpose>

---

32

[http://www.ic.nhs.uk/webfiles/publications/Social%20Care/Blind%202008/Blind%20Commentary%202008\\_final%20v5.pdf](http://www.ic.nhs.uk/webfiles/publications/Social%20Care/Blind%202008/Blind%20Commentary%202008_final%20v5.pdf)

<sup>33</sup> CSSR-Council with Social Service Responsibility.

<sup>34</sup> Contract monitoring information Adult Social Care Service.

<sup>35</sup> NOMIS official labour market statistics. [Online] Available from URL: <https://www.nomisweb.co.uk/default.asp>,