New study reveals the shocking truth of what Universal Credit means:

- 100,000 disabled children will suffer
- 230,000 severely disabled will suffer
- Up to 116,000 working disabled will suffer

A newly published report into how the 2012 Welfare Reform Act will affect the disabled makes ‘hard reading’ in the words of its author, Baroness Tanni Grey-Thompson.

The centrepiece of the Act is the introduction of Universal Credit, which will replace much of the benefits and tax credits system for people both in and out of work.

The former paralympian was asked by Citizens Advice, The Children’s Society and Disability Rights UK to examine what the biggest change in the benefits system since its conception over 60 years ago will mean. The report summarises the findings from three research reports based on evidence from surveys of almost 3500 disabled people and their families, as well as a parliamentary evidence session.

‘The evidence gathered clearly demonstrates that some of the decisions made by the Government on support for disabled people within Universal Credit did not fully take into account all the relevant issues,’ the report says.

‘Whilst many people may be better off under Universal Credit ... several key groups would lose financially.’ These groups are:

- 100,000 disabled children stand to lose up to £28 a week
- 230,000 severely disabled people who do not have another adult to assist them could lose £28 to £58 a week
- Up to 116,000 disabled people who work could lose £40 a week.

‘This means that around 450,000 disabled people could stand to lose out under Universal Credit once it is fully implemented.’

Continued on page 6
Third of families with disabled children ‘must borrow to pay for the basics’

Almost a third of families with disabled children have taken out loans in the past year to help them afford basic everyday essentials such as food and heating, new research has revealed.

For those families where parents are in work, one in six say they cannot afford to heat their homes. For those families where parents are not working because of their caring responsibilities, 32% have difficulty paying heating bills and 24% told the survey that the extra costs of bringing up a disabled child meant they occasionally went without food.

The survey of 2,300 families conducted by the charity Contact a Family, which supports families with disabled children, also shows that 58% fear their financial situation will worsen over the next year, with 73% saying they believe welfare reforms will make them poorer.

The charity’s Counting the Costs 2012 report gives a sharp insight into the extra financial pressures faced by families bringing up disabled children, at a time when changes to the welfare system, central and local government cuts and dwindling revenues for charities are making support harder to access.

Around 41% of families have fallen behind with payments for gas and electricity bills, council tax, rent and mortgage, the survey revealed. Some 86% said they had gone without leisure activities and days out because of financial pressures. Of those families who had been forced into debt, 20% had taken out high-interest internet payday loans.

The charity estimates that it costs three times more to raise a disabled child, usually because of the extra cost of transport and specialist clothing, food and equipment.

"In 2012, the need to reduce the budget deficit has created new pressures on vital benefits and services for families with disabled children already experiencing persistent poverty," the report states.

It also notes that parents are complaining of rising popular hostility towards people with disabilities.

A spokeswoman for the Department for Work and Pensions said: ‘This government is committed to supporting disabled people and continues to spend over £40 billion a year on disabled people and their services.

However, too many people have been systematically failed by the current benefits system. That is why we are driving forward our welfare reforms to simplify the system and offer more targeted support to improve the life outcomes for disadvantaged children.’ [From The Guardian]
Reversing from recovery

The UK car industry is beginning to show green shoots of recovery. Vince Cable, Minister for Business, Innovation and Skills, says long-term investment by major car manufacturers will play an integral role in Britain’s recovery. The latest new car registration figures are encouraging, but you may wonder what the car industry has to do with welfare reform...

Currently 1.8 million people of working age receive Disability Living Allowance (DLA). The controversial Welfare Reform Act lays out government plans to cut spending by 20% through the abolition of DLA and its replacement with PIP (Personal Independence Payment).

As PIP is introduced, up to 280,000 fewer people will qualify for the enhanced mobility element which provides eligibility to lease cars using the Motability scheme. It is estimated that 27% fewer working age disabled people, and 17% of disabled people overall, will be eligible for the Motability car scheme. This matters to the car industry. Whilst some Motability customers have recently been vilified by sections of the media, the reality for many people with severe walking difficulties is that their Motability car provides independence and enables them to get to work, attend medical appointments, and generally take part in daily life.

It is unclear if the Government has carried out robust financial impact risk assessments, or if it has alerted the car industry to the likely substantial loss of new car sales - rising to 31,450 annually by 2016.

Responding to a written question, Maria Miller, the Minister for Disabled People, gave no indication that the risk to the economy has been considered. The assurance given shows the Department for Work and Pensions is liaising with Motability to look after claimants, not the car industry.

There are cumulative threats to working disabled people, business owners, the car industry and the Treasury. The conservative estimate is a combined loss of more than £500 million, potentially significantly higher if other associated industries are taken into account. Nearly one in every thousand jobs in the UK is directly or indirectly generated by the Motability scheme, so the effect on the economy of reducing the size of the scheme is considerable.


This is a slightly shortened version of an article published by wearespartacus and written by Rob Parsons MA (Cantab), Jane Young LLB (Hons) PGCert (Disability Studies), B Morris and Sam Barnett-Cormack BSc MSc.

New dementia centres open in county

Drop-in centres for dementia sufferers and their carers have opened in Telford, Bridgnorth and at Bicton Heath on the edge of Shrewsbury - and staff are urging those who know about them to spread the word as widely as possible so that people who will benefit from the centres find out about them.

‘Living with dementia touches the lives of more than 5000 people in Shropshire and we want our Diamond drop-in centres to put a little sparkle back into their lives,’ said Heather Osborne, chief executive of Age UK Shropshire Telford & Wrekin. The charity raised £75,000 for the centres as part of Age UK’s Diamond Appeal to mark its 60th anniversary.

Age UK said: ‘A lot of people will know someone who might benefit from this service. We particularly want to help people who are caring for their loved ones but may be feeling isolated and in need of a little support.’ Age UK locally can be reached on 01743 233123.

[From Shrewsbury Chronicle]
Twitter! What is it? Why use it? What good is it?

By Ruby Hartshorn

Now for those who have never heard of Twitter or tweeting we are not talking here about those feathery friends that delight our gardens! No, we mean Social Media.

I hear a sigh and I can’t blame you because for someone who was going to be the last person in the world to have a computer in my house I understand.

How circumstances change. As a result of caring 24/7 for a close relative I purchased my first computer in 2001, and this was only after much persuasion by an agency care manager. I always had an excuse; never would I learn how to use one. Now it is a big part of my life and also my encyclopaedia.

This year I discovered that Social Media is part of how the world now does business and communicates: in the UK alone, there are 10 million people on Twitter. Social Media has become a critical part of the 21st century. This is no less true for Shropshire Disability Network than for anybody else, whether an individual or an organisation.

It is important to SDN because it brings people together and gives us a platform to build on by enabling us to get messages out quickly to a large audience. It is all about connections, making and building networks.

Twitter is about following others and being followed, enabling audiences to take an interest in what you are doing, whether it is fund-raising or engaging with others. For example, we can get news ‘hot off the press’ about The Hardest Hit Campaign or know about current topics and interviews on BBC Radio Shropshire.

Twitter can be thought provoking - as it works on the principle of using just 140 characters to say what you want to say. But with advice and support from SDN’s website expert Paul Nash (who, I might add, has recently been named by the Shropshire Star as one of the county’s finest tweeters) I have learned that links can be attached to your tweet so that your audience can, if they wish, go directly to a web page or website for more information.

Photographs can also be attached, which was a new venture for me after the Geoff Forgie Memorial Disability Challenge a couple of months ago.

Then there is the important etiquette of thanking your RTs, mentions and people who decide to follow you. Having targets is essential to tweeting, as well as making things interesting so that people will follow you and re-tweet your tweet - so engaging with an even wider audience.

Despite having records of how many followers you have and how many people you are following, it is much more difficult to establish how many people you are actually reaching.

So if you are a tweeter or thinking of opening a twitter account, look us up and see what we are doing and please tell others. To find our twitter account go onto our website and click on the Blue “T” which is under the wording Lottery Funding. Or search by using our Username which is shropdisnet-work

Looking out for you, give us a wave and we will wave back!

Health ‘personal budgets’
Patients will have the right to ask for a personal health budget under plans to extend choice and control revealed in the Government’s draft mandate for the NHS. The plans will see a massive extension to the scheme, which is currently being piloted, with patients given a cash budget by the NHS to spend on whatever they choose. [From Salix Newsflash]

ESA cancer rules eased
The Government says it intends to make it easier for people undergoing cancer treatment to qualify to enter the ESA support group. This will happen early next year, after consultation with groups such as Macmillan, to allow claimants to be treated as having limited capability for work. The six month rule for expected treatment will also be dropped and assessment made easier [From Social Welfare Training]
Shropshire ME Group hosted a national event in October, running a question and answer afternoon which drew a near-capacity crowd of about 200 to the Lord Hill Hotel in Shrewsbury.

On the panel were Dr Charles Shepherd, medical adviser to the ME Association; Dr Sarah Myhill from Knighton; Dr Nigel Speight, paediatric adviser to the ME Association; Jane Colby, executive director of the Young ME Sufferers Trust; and Simon Toghill of the Shropshire ME/CFS Service.

For those who don’t know (and that included YourVoice until a few minutes ago!) ME stands for Myalgic Encephalomyelitis. It is also known as Chronic Fatigue Syndrome (aka CFS), but calling it that can start an almighty row, and there is also Post-Viral Fatigue Syndrome.

Whatever you call it, the results can be extremely disabling and there was a lot of passionate discussion during the afternoon, plus a lot of medical input from the experts. For some reason there seems to be reluctance in parts of the medical profession to accept the seriousness - or even the existence - of ME. Just looking around the hall at the Lord Hill Hotel made it hard to believe that such attitudes can exist.

Peter Rubery from the Shropshire ME Group has decided to step down and the Q&A session was his last as a member of the local ME committee. He says he was very pleased to have ‘gone out on a high.’ Peter is pictured at far right in our photo, taken in front of the SDN display. At left is Dr Shepherd, and centre are SDN’s Ruby Hartshorn and James Moraghan, who were staffing the stall.

The meeting, which will be held at The Walker Theatre in Theatre Severn on Friday 9 November starting at 11.00am, is also a bit special for another reason, with the RCC using the occasion to reflect on its Golden Jubilee Year.

While some of Lord Hodgson’s recommendations are widely applauded, such as having a single process for registering with the Charity Commission and HMRC, others are more controversial, such as allowing larger charities to pay trustees. So an interesting presentation followed by a healthy debate can be assured!

The event is free for Shropshire RCC members, but as this is a rare chance to hear from an architect of the charity sector it is being opened up to anyone in the Voluntary and Community Sector who would like to attend. The cost is £15. Contact Julie Stedman on 01743 237871 or Julie.stedman@shropshire-rcc.org.uk to book. [From Shropshire Infrastructure Partnership Newsletter 12 Oct]

Let’s hear three cheers for Nevis - and for Tom!

Shropshire man Tom Kane and his hearing dog, Nevis, are sharing a moment of fame. When Nevis was nominated for a Hearing Dogs Award, Tom urged the county to get voting on his behalf.

People clearly did, because Tom wrote to the Shropshire Star recently to say: ‘I would like to thank everyone who responded to my request to vote for Nevis ... The judging panel selected us as one of three nominees for the Desmond Wilcox Award, for the volunteer of the year. We have been filmed and interviewed.’

Worth a minute ...

The link below will take you to a one minute video clip on YouTube.

It’s not a joke, it’s not religious, it’s not political, but it’s something that should have meaning for all of us - whether or not we have disabilities.

http://www.youtube.com/watch_popup?v=Hgzizim7oU&vq=medium
Universal discredit?

from p 1
Current benefit claimants who move onto Universal Credit will not see their benefit cut immediately.

However, they will have their level of benefit frozen with no increases to take account of rising prices. In addition they may see their support cut immediately if their household circumstances change.

Issues the Government did not consider:
• The impact of cuts to support for disabled children could be extremely severe, particularly for families receiving the mid-rate care component of Disability Living Allowance (DLA).
When families who may be affected were asked about losing £30 per week in support for disabled children they expressed widespread concerns about having to cut back on food or heating, and getting into (or further into) debt. Around one in 10 families expressed fears that they could no longer be able to afford their home.
• Severely disabled people who do not have another adult to assist them have additional costs not faced by other disabled adults and the present Severe Disability Premium (SDP) already only goes part-way to meeting these extra costs. Evidence suggested that without this financial support these disabled people would be unable to meet their most basic needs. The report also raises concerns that many disabled lone parents rely on their children to help with their care needs, and that the loss of the SDP could increase this burden of care.
• The evidence suggested that removing financial support for those who face extra costs in work would not only cause hardship for disabled people, but also risks being counter-productive, potentially preventing disabled people from being able to work.
Parents said that cuts would affect their whole family, not just the disabled child.
Families who are able to move into work may see an improvement in their income and as a result the cut in the support for their disabled child will have less of an impact. However, for the most vulnerable families this was not possible for two key reasons:
• Many would find it very difficult to find jobs with hours to fit in with caring for their disabled children. This was particularly true for lone parent families with children on the middle rate care components of DLA.
• Many faced high costs of childcare when they were in work. About one in seven said their childcarer charged more for disabled children.

The majority of non-working families expected to be out of employment for a substantial period of time due to these additional caring responsibilities. This appeared particularly true for families receiving the mid or high rate of the care component of DLA.

For those affected by the cut in disability additions under Universal Credit, the impact could be disastrous:
• Two thirds said that they would have to cut food expenditure
• More than half said it would lead them into debt
• More than one in 10 said they may find it difficult to afford their home.

Same gain but less pain...
The authors of the report identified a number of ways that the aims of Universal Credit could be achieved more effectively. ‘Whilst there will still be people who lose out, these recommendations would better support the most disadvantaged.’

1. Protect children on the mid-rate care component of DLA.
If it is not possible to protect the additional levels of financial support for all disabled children, then this particular group should be protected - by introducing a third rate of disability addition for disabled children.

2. Additional support for the costs of childcare
The Government should consider increasing the rate of support for families with disabled children to cover 80% of their childcare costs under Universal Credit.

3. Introduce a self-care addition to Universal Credit
The authors say: ‘We recommend that the SDP be retained in full. If this is not possible, we recommend the introduction of a self-care addition be paid to any disabled adult who does not have someone caring for them.’

4. Disability support in Universal Credit
This should be provided to working disabled people who are found to be fully ‘fit for work’ but are at significant disadvantage in the workplace.

From the Department for Work and Pensions: Abolishing the adult disability premiums and changes in the child rate would be ‘recycled’ into higher payments for more severely disabled people. The report was ‘highly selective and could result in irresponsible scaremongering’. Universal Credit would reduce the financial and administrative barriers to work that exist in the current system.
Have you heard the one about the deaf bloke who had something to say?

Recent controversy surrounding the voice of deaf footballer Daniel Ailey prompted an article in the Guardian pointing out that most people rarely hear deaf voices – and asking why that should be.

In Ailey’s case, the police were called to a non-league football ground when he was mocked by some sections of the crowd because of the sounds he uses to alert teammates to his presence on the pitch.

Further controversy followed a few days later when Tory donor John Griffin compared Ailey’s sounds to the sounds that female tennis players make, suggesting that Ailey should be silent on the pitch. He later apologised for his remarks, but Ailey is said to have been "introverted" since the incident.

The irony is that many deaf people spend years having speech therapy in order to improve their speech, yet later become reluctant to use their voices because of the responses they get from those around them.

It doesn’t help that society lacks the vocabulary with which it can respectfully discuss deaf voices, so the way they are described often demeans them.

Perhaps the problem is that we rarely hear deaf voices on television or radio programmes.

The few deaf characters who appear in dramas nearly always sound just like a hearing person (such as Eastenders’ Ben Mitchell), or if they use sign language, they’re often portrayed as being silent.

But there are several exceptions, such as the excellent 2006 BBC drama ‘Soundproof’, a series of radio dramas by deaf actor David Bower, (‘Four Weddings and a Funeral’) for Radio 4, and American actress Marlee Matlin, who won an Oscar for her role in ‘Children of a Lesser God’, playing a deaf woman who stops using her voice because of criticism.

SHROPSHIRE RCC CARERS SUPPORT SERVICE INVITES YOU TO A SEMINAR

CARERS RIGHTS: WHAT YOU MOST NEED TO KNOW

Friday 30 November 10.00 – 12.30
at Guildhall, Frankwell, Shrewsbury

Our keynote speaker will be Luke Clements, Professor at Cardiff Law School, Director of the Centre for Health & Social Care Law and a solicitor with Scott-Moncrieff Associates LLP (London). Luke represents disabled and older people and their carers as well as acting as an adviser for many of the UK’s leading charities.

He was involved in the drafting of the Bills that became the Carers (Recognition and Services) Act 1995 and the Carers (Equal Opportunities) Act 2000

Enquiries to Carers Support Service on 01743 341995
Places are limited so you need to book
The event is free for family carers
To book please call us on 01743 341995

Diagram explains new health care system

The Department of Health has produced a diagrammatic overview of the new health care system in England that will start to be introduced next April. It illustrates the statutory bodies that will make up the system, oriented around people and communities and where they receive their local health and care services. Find it at http://healthandcare.dh.gov.uk/system-overview-diagram [Health Information News, October 2012]

Work boost for young disabled

Access to Work is now available to support young disabled people who do voluntary work experience as part of the Youth Contract. This change will help thousands of young disabled people do voluntary work experience placement. Access to Work provides Employers and their staff with advice and support with the extra costs that may arise due to individual needs. [From Social Welfare Training]
Shrewsbury Market is home to a specialist in helping people with disabilities stay mobile. Martin Maley is this month celebrating the third anniversary of his business, Mobility Homecare.

Martin moved into mobility for the disabled after a 17 year career in quality engineering. He first worked with a firm of disability equipment manufacturers in Stourbridge, and that led him into product management for scooters. ‘By then I was finding the subject really interesting and the next step was into technical sales,’ he says.

‘After that I started in business for myself, working from home at first and using the motto “For all your mobility needs direct to your door” because I could understand that people who need mobility assistance can be deterred from having to visit a shop because of all the hassle involved for them.’

That is still his philosophy. ‘The way I work is that if I haven’t got what people want when they first approach me, then I will try my hardest to get it for them. The phone number is freephone 0800 634 9674 and I really want people to use it’

A member of SDN, Martin says he tries to sell things that will improve lives, and he encourages customers to give him feedback on products.

‘I sell a mix of low and high value items, with the lowest price in the shop being 75p - and that’s for a plug puller, a simple but brilliant little thing that simplifies pulling out electric plus.

‘I don’t advertise more than I can help because that sort of thing is all added cost, and one way or another the customer loses out through higher prices. That’s also one of the beauties of being based in Shrewsbury Market, the low overheads help me stay competitive.

‘Word of mouth is the best possible advertisement, and it’s also free. I think the fact that I’ve been here three years and in that time have expanded my floor space must prove my philosophy works for customers.’

Martin is in the shop four days a week and spends two more doing servicing and deliveries.

Martin is also the author of the disability mobility tips which appear in YourVoice. His column will return in the next issue.

Advertising agency finds benefit claimants a good joke

The advertising agency Iris, which received millions of pounds of taxpayers’ money to launch the employment and support allowance and for designing the mascot for the Paralympics, has now published a company benefits brochure which mocks sick and disabled claimants.

The brochure, ‘Iris on Benefits’, advertises the benefits provided by the company to its employees. These include yoga and massage, a fitness instructor, private healthcare and 50% pay for up to five years if you are off sick.

Highly paid Iris employees dressed up as tabloid stereotypes of benefits claimants to do a photo-shoot for the brochure. [From Shropshire ME Group newsletter Oct 2012]
A device to improve access and information for blind or partially sighted customers is now operating at Wellington Library. The PenFriend is a simple pen shaped audio labelling system from the Royal National Institute for the Blind.

Telford & Wrekin Council’s library services consulted with visually impaired customers about the scheme in June and began preparing stock. Initially the service is only be available at Wellington Library but there are plans to expand it to other branches over the next 12 months.

Councillor Arnold England, cabinet member for leisure and well-being, said he was delighted that PenFriend was now permanent. ‘It is important that we are able to provide assistance to all our customers and this scheme will really benefit blind and partially sighted customers.’ For more information about the PenFriend scheme contact 01952 382924 or 01952 382994.

The Foundation for People with Learning Disabilities has launched ‘Connecting People’, a new approach to connecting services designed to offer people with learning disabilities and their families an improved quality of life. Research shows that people with high support needs rarely get the right help to make strong enduring relationships in their community.

Connecting services, which work with individuals and those close to them to find out their strengths, talents and interests and connect them to opportunities in their area, are now more accessible through Connecting People.

For information go to: http://www.learningdisabilities.org.uk/our-news/120917 [From VCSA Newsletter]

Over a fifth of those trained as approved mental health professionals want to quit the role, a state of the profession survey has found.

Of 504 approved mental health professionals who responded to a survey, 22% no longer wanted to continue in their role. A further 18% were unsure if they wanted to continue.

The study, the first of its type since approved mental health professional status replaced the approved social worker role under the Mental Health Act 2007, also exposed ‘unacceptably high’ stress levels. Some 40% of respondents reached the threshold for depression and anxiety disorders.

Social workers who led the study said the findings highlighted the need for employers and professional bodies to step up support.

The wide-ranging survey also revealed a shortage of hospital beds for clients and lack of availability of ambulance, police and doctor support for Mental Health Act assessments had also led to delays and late working.

One mental health social worker said of the findings: ‘Frankly given the conditions we now have to operate in I am surprised that only 22% want to quit.’ [From Community Care]
Council survey on adult social care services

Shropshire Council has conducted a wide consultation with a range of stakeholders on the transformation of adult social care services and says that as a result it is at a stage where it can explore alternative options to traditional ‘buildings-based’ services.

The council says it wants to ‘incorporate and promote a more personalised approach to the support provided to meet people’s assessed eligible needs using individual budgets’. It wants to focus on outcomes for individuals ‘which support independence, resilience and community connectivity, whilst at the same time delivering considerable cashable efficiencies in the region of £2 million by 2015.’

It is just concluding a ‘soft market testing survey’ on future provision across a range of services that it currently provides. The council says the survey will help it determine the best option for future delivery of services and also help shape future commissioning intentions. [From VCSA]

Trust’s new card for disabled

The National Trust has a policy of admitting a companion or carer free with a disabled visitor who is paying to visit one of its properties, but now it has gone one better. To save having to request free entry for a companion, an ‘Access for All Admit One Card’ can be issued by the NT’s Supporter Service Centre.

This card is made out in the name of the disabled person, not the companion, so there is not a restriction to taking the same person on each visit.

To request a card, email the Supporter Service Centre (address on website) or phone them on 01793 817634. All they need is the name and full postal address of the disabled person.

The Trust says most properties have a good degree of access.

Properties have adapted WCs, unless stated otherwise, and many provide manual wheelchairs for loan. Self-drive and volunteer-driven powered mobility vehicles are available at some larger gardens and parks.

The Trust admits users of powered wheelchairs and similar vehicles to its historic buildings wherever possible, subject to physical limitations. Most properties offer Braille and large print guides, and many are developing sensory information. Induction loops have become increasingly available and the NT still practises the principles of the sympathetic hearing scheme previously administered by Hearing Concern.

It’s well worth checking out the Trust’s website for details of properties.

Funding given for new learning opportunities

Omega, the National Association for End of Life Care, has secured funding of £39,060 to deliver new and creative learning opportunities in the West Midlands.

The Skills Funding Agency has awarded the grant to the Shrewsbury-based charity as part of the new Community Learning Innovation Fund. The money will be used to encourage peer-support and self-help and address the pressing individual learning and information needs of isolated family care-givers.

Omega will work closely with the City of Wolverhampton College, Skills for Life and other community partners; together they will make it possible for family carers to attend a range of friendly learning taster sessions.

Ups and downs of online medical data

Surveys show that about 70% of people believe online access to medical data has made them better informed as patients.

Poll findings also show that most people are not only turning to the Internet to find answers to their medical questions, but are confident about the information they find and are using it successfully to self-diagnose.

But there is another side to the story.

Online health information is of variable and often low scientific quality. In particular, elderly less-educated people are known to struggle in accessing quality information. Little is known about how their online behaviour differs from that of younger, better educated, and more-frequent web users, and how the older population may be supported in accessing good-quality information.

Skilled web users effectively filter information according to search intentions and data sources, while less-skilled users are easily distracted by unrelated information.

Intentions also vary. While skilled web users search online to inform themselves, the less-skilled users search to confirm opinions that they already hold.
People affected by long-term conditions need information that is timely and relevant, enabling them to make decisions about their care and treatment and to live with their condition. Most Acute Trusts in England are supporting a programme for implementing ‘Information Prescriptions’ (IPs) for cancer patients, supported by the National Cancer Action Team in partnership with Macmillan Cancer Support, Cancer Research UK and the major specialist cancer charities.

The IP System is a freely accessible ‘tool’ for providing quality information on 2000 conditions and treatments, at the right time, in the right amount, which is personalised, reliable, understandable and evidence-based.

It also includes information on financial and psychological support, and local resources can be uploaded and shared nationally.

It features in the Department of Health’s recently published strategy The Power of Information.

‘This is an invaluable resource not only for patients but also for professionals, in both assessing and meeting the individual information needs of patients and accessing an invaluable resource to support their own practice,’ according to the Health Information News.

Libraries have a vital role to play in the sustainability of IPs by continuing to develop healthcare professionals’ awareness of and skills in using them. ‘This is an opportunity for information professionals to play a key part in supporting the Informed Patient,’ says the magazine.

The programme can be found at http://ncat.nhs.uk/our-work/improvement/improving-patient-information#

Peer support guidance
Organisations involved in peer support for people with long-term conditions can find new guidance from the Mental Health Foundation ‘Peer Support in Long Term Conditions: the Basics’. http://www.mentalhealth.org.uk/publications/187654

[Health Information News October 2012]

Scottish campaign forces Atos rethink

The dirty work of Atos in England is not being tolerated in Scotland – at least, not quite so much. Once you get out of HMG’s clutches there are glimmers of decency and honesty to be seen.

Atos had been set to profit by some £40 million of Scottish taxpayers’ money performing the same dirty tricks it carries out in England and Wales, but after a press campaign it has agreed to subcontract the work to an NHS social enterprise, which ploughs profit back into patient care. Atos will pay it £22 million for the contract.

But Atos will continue to carry out ‘work capability assessments’ in Scotland for employment and support allowance – and refuses to say how much profit it will make. It also remains holder of the overall contract for the assessments.

An Atos spokeswoman said the deal was ‘a new approach, working in partnership’ – so here in England we might well ask: if Scotland can have a ‘new approach’ why can’t we?

Different rules...

While Atos rakes in many millions of pounds in public money and suffers no penalty whatsoever for making errors, from 1 October claimants on poverty incomes who make entirely innocent mistakes in a benefits claim will be subject to a £50 fine on top of having to pay back any overpayment.

The DWP’s own statistics reveal that 20% of all Atos decisions between 2008 and 2011 were overturned. Of those one in five wrong decisions, a significant proportion were claimants who were eventually found to be eligible for the support group. [From Shropshire ME Group newsletter Oct]

Your address can affect appeal success chances

It seems that where you live can have a dramatic effect on whether your ESA or DLA appeal succeeds. In 2011-12, success at DLA appeals ranged from 43% in Coventry to just 24% in Kidderminster. For ESA appeals, whilst only 32% of Birmingham claimants succeeded, in Worcester it was 43%. [From Shropshire ME Group newsletter Oct]
NHS changes are part of wider ‘localism’ agenda

The Health and Social Care Act approved by Parliament means that the NHS is undergoing a significant restructure.

Strategic Health Authorities at regional level and Primary Care Trusts at local level are being abolished and in their place - by next April – we will have local Clinical Commissioning Groups. These will be groups of GP practices working with other health and care professionals, and with local communities and councils to commission most of the NHS services for their local population.

A national NHS Commissioning Board will oversee the local clinical commissioning groups, and will commission specialist or national services. Giving local GP practices budgets and commissioning powers is meant to ensure that decisions about patient care and services are placed as close as possible to the patient.

Another expected benefit is that a diverse provider market will be created, in which NHS, private, voluntary and not-for-profit providers compete for contracts to improve quality and choice of services for patients and the public.

The NHS reforms are part of a wider government ‘localism’ agenda, the intention of which is to shift power to local communities and put them at the centre of service delivery, local planning and decision making. Public services are to be opened up for delivery by local communities, charities, social enterprises and employee-owned co-operatives, via a ‘right to challenge’ local authorities and commissioning bodies about their existing provision. Volunteering and social action are to be encouraged, plus a social enterprise sector.

The NHS Commissioning Board will also host both clinical networks and new ‘clinical senates’ formed of doctors, nurses and other professionals. Clinical networks will bring together experts on particular conditions and service areas.

- Provide national leadership on commissioning for quality improvement. It will develop
- Local authorities will have a bigger role in health, assuming responsibility for public health and health improvement. They will have a duty to establish health and wellbeing boards, which will be responsible for overseeing the health and wellbeing needs of the local community and for co-ordinating commissioning.

Councils will also be responsible for establishing and funding local HealthWatch organisations, which will take over from LINKs and other organisations presently responsible for public involvement and representation in health.

HealthWatches are to ensure that the views from patients, communities and carers are an integral part of local commissioning, and also to provide advocacy and support to help people access and make choices about services, plus supporting people who lack the means or capacity to make choices.

A national body, HealthWatch England, will provide advice, support and leadership to local HealthWatches. The NHS constitution sets out the rights and responsibilities of patients, the public and NHS staff, giving a clear picture of what standards of care should be expected. One of its most important principles is: NHS Services must reflect the needs and preferences of patients, their families and their carers. Patients should not be seen as passive recipients of treatment, but as partners whose individual needs and preferences should be taken into account.

We recently reported on the reforms in local government that could give disability groups more power over their own destinies. But this is just part of wide-ranging changes which will see the disappearance of traditional landmarks in health and care. If you don't understand what is going on, you’re not alone. Happily, we came across this article, which sheds some light on what’s happening, and when.

You are not alone

Going to our site is all it takes to meet others who understand what you are going through:

www.shropshire.gov.uk/community.nsf

Shropshire Self Help Groups
Telephone
01691 656882

Sponsored by Shropshire Council, Telford & Wrekin Council, and the NHS
Finding out what PIP will involve

At the SDN Annual Meeting one of the guest speakers, Rob Price, talked about the implementation of PIPs - Personal Independence Payments. He is Team Leader for the Benefit Options Team at Shropshire Council. As PIPs will start replacing the Disability Living Allowance from next year and as a lot of people are unclear about what is involved, here is a summary of what Rob said.

First time claimants from next June will get PIPs, not DLAs. Between October 2013 and March 2016 DLA recipients will be ‘invited’ to claim a PIP instead.

PIPs consist of Daily Living and Mobility components, and both can be either Standard or Enhanced. The category a claimant gets depends on points scored: 8 points for Standard, 12 points for Enhanced.

There are only two ‘daily living’ components, rather than the current three in DLA.

The points scoring system is based on activities, with 11 activities measured. Each has a range of points available. The number in brackets after each activity is the maximum number of points available.

**Daily Living component activities**

1: Preparing food and drink (8)
2: Taking nutrition (10)
3: Managing therapy or monitoring health condition (8)
4: Bathing and grooming (8)
5: Managing toilet needs or incontinence (8)
6: Dressing and undressing (8)
7: Communicating (12)
8: Engaging socially (8)
9: Making financial decisions (6)

**Mobility Component**

1: Planning and following a journey (15)
2: Moving around (15)

The activities should be able to be done:
-- Safely: unlikely to hurt the person or others
-- Reliably: in an ‘acceptable way’
-- Repeatedly: as many times as needed in a day
-- In a timely fashion: no more than twice the time taken by a person without a disability.

Independent healthcare professionals (from Capita Business Services Ltd in the Midlands) will look at claims and ‘most people’ will have a ‘face-to-face’ consultation. As with the Employment and Support Allowance, the decision still lies with the Department for Work and Pensions.

Blue Badge and Motability schemes are expected to continue much as they do now.

**Appeals process**

This is intended to be the same as now, but ‘improved notifications’ and ‘greater engagement with claimants’ are expected to lessen disputes and appeals.

‘Conversion’ will start upon either renewals or changes in circumstances after June 2013, or between October 2013 and March 2016.

Claimants will receive written invitations to claim. Strictly speaking, it is not a conversion process as a new PIP claim will need to be submitted.

Points scoring in PIPs can be found at http://tinyurl.com/7jgZlb8

Some case studies are found at http://tinyurl.com/726ec7k, page 16 onwards.

The SDN helpline is 01743 258922, available during normal office hours 9-5 Mon-Thurs, 9-4 Fridays, and often after hours. We can give general advice to anyone living in the Shropshire Council area.

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Compact Week, the annual celebration across England to promote and recognise the Compact, is running from 5-9 November. This year’s theme is ‘Valued Partners: Making Best Value Meaningful’. New partnership structures are emerging in areas such as health, and changes to how services are delivered with the impending introduction of the Social Value Act, which comes into place in January.

This year, Compact Voice will focus on how it can help to ensure that the vital role of the voluntary and community sector is recognised in this new landscape. In Shropshire we would like to showcase the valued partnership work that is already taking place locally. Take a moment to share your valued partnership experiences with us via mary.cobbett@shropshire.gov.uk [From VCSA Newsletter]
If your organisation or cause is not listed here please let us know. Email the editor at newsletter@shropshire-disability.net or write to him: Peter Staples, 8 Gorse Lane, Bayston Hill, Shrewsbury, SY3 0JJ


A4U Disability Advice Centre - Guildhall, Frankwell Quay, Shrewsbury SY3 8HQ; 01743 251518; advice@a4u.org.uk

Autonomy - self-help and social for Aspergers in Shropshire, Telford and Borders - autonomy@shropshire.co.uk

Care Farming West Midlands - www.carefarmingwm.org.uk; stewart.scull@carefarmingwm.org.uk or Mobile:07957 839634

Carers Direct - 0808 802 0202 www.nhs.uk/carersdirect/Pages/CarersDirectHome.aspx

Community Council of Shropshire - www.shropshire-rcc.org.uk/ 4 The Creative Quarter, Shrewsbury Business Park, Shrewsbury, SY2 6LG; 01743 360641; fax: 01743 342179

Community Directory for Shropshire, Telford & Wrekin http://www.shropshire.gov.uk/community.nsf

Disability Arts in Shropshire -01743 272939/271676; www.dasharts.org.uk


Disability Football Directory 01952 407198 http://www.disabilityfootball.co.uk/Madeleysports.html


Disability Resource Centre, Lancaster Road, Shrewsbury, SY1 3NJ 01743 450 912; robin.durham@shrophshire-cc.gov.uk www.the-svab.org.uk. RNIB: www.info.mib.org.uk/exe/Agency/Details.pl?6480


Enable - supported employment services for people with disabilities in Shropshire and Telford. 01743 276900; ss-enable@shrophshire.gov.uk; www.shropshire.gov.uk/enable

Headway Shropshire (brain injured and families) Holsworthy Park, Oxon Business Park, Shrewsbury, SY3 5HJ 01743 365271; www.headwayshropshire.org.uk/

Landau - supported employment services for people with disabilities, 5 Landau Court, Tan Bank, Wellington. TF1 1HE, 01952 245 015, admin@landau.co.uk


Parent & Carer Council Shropshire www.paccshropshire.org.uk/parent-and-carer-groups

PACC provides an index of support groups for children with disabilities in Shropshire. The following groups are listed on the PACC site. Where possible we list direct contacts, but refer to the PACC site for full details) Allsorts (South Shropshire, for behavioural conditions) 07813043841 www.paccshropshire.org.uk/parent-and-carer-groups/71-allsorts Bridgnorth Buddies (Parent-led, Special Needs) 07968 544182 or 07790 789631; email Buddies20@yahoo.co.uk www.paccshropshire.org.uk/parent-and-carer-groups/72-bridgnorth-buddies

Haughton School, Telford, drop-in for parents of pupils with more complex special needs) 01952 387551 or 01952 387552; www.paccshropshire.org.uk/parent-and-carer-groups/83-haughton-school-drop-in

Onevision (visual impairment) 01952 385269 www.paccshropshire.org.uk/parent-and-carer-groups/77-onevision

STACS (Aspergers,16+) 01952 254594 or 01939 260273; email louise.griffiths@carerscontact.org.uk

www.paccshropshire.org.uk/parent-and-carer-groups/76-stacs

Autistic Supporters (If you suspect your child is autistic, or has recently been diagnosed) 01743 356298 www.shropshireautisticusers.co.uk?q=node/2

Deaf Children’s Society 01952 770019; email: nat4sdc@aol.com www.ndcs.org.uk

Down’s Syndrome 01743 233802, 01948 880110 or 01588 640319 www.dsa-shropshire.org.uk

Dyslexia Association 01743 231205; www.thesda.org.uk

Wheelchair Users 01952 350460 or 01952 252243

SKID (Shropshire Kids Insulin Dependent, associated with Diabetes UK) 01743 873724 or 01743 864366; email: home@morkot.go-plus.net

SPECTRUM (Autistic Support group) email: netgriffiths@fsmail.net www.spectrum.183.net/

Telford STAAS (supports parents/carers of children with ASD, ADHD, and challenging behaviour) 01952 457439 or 01952 617758; email: julie@parentpartnership-shropshireandtelford.org.uk or lesley@parentpartnership-shropshireandtelford.org.uk

Steps (help for parents/carers, lower limb abnormalities) 01743 355363

PODS (Parents Opening Doors - Telford, forum for views on services) 01952457439; email: julie@parentpartnership-shropshireandtelford.org.uk

Marches Community Enterprise 01584 878402 or 07891094901

ME Connect - Helpline 0844 576 5326 between 10.00-noon, 2.00-4.00 and 7.00-9.00; meconnect@meassociation.org

Motor Neurone Disease Association - MND Connect 08457 62 62 62 mndconnect@mndassociation.org

Multiple Sclerosis Society - 01952 250038; www.mssociety.org.uk/telford

NHS Choices - www.nhs.uk/Pages/HomePage.aspx

Omega (National Association for End of Life Care) - www.omega.uk.net/

Parent Partnership Service - www.parentpartnership-shropshire-andtelford.org.uk/#/useful-links/4551168089

PODS - independent forum in Telford for families of children with disability or additional need; Jayne Stevens 0777 534 2092 or 07824 631 297; info@podstelford.org.uk; www.podstelford.org.uk

Primary Care Trust www.shropshire.nhs.uk/Get-Involved/

Scope (Cerebral Palsy) - www.scope.org.uk/services/shropshire

Shrewsbury Dial-a-Ride - Sundorne Trade Park , Featherbed Lane, SY1 4NS. Enquiries 01743 440350; Direct Line 01743 440744; Mobile 07891094901, linda@shrewsbydialairde.org.uk

Shrewsbury Hard of Hearing Club - URC Church Hall, Coleham Head, Shrewsbury, SY3 7BJ; Contact Erica Horner 01743 873540, erica-horner2@googlemail.com

Shropshire LINk - EarlyWorld House, Darwin Court, Oxon Business Park Shrewsbury, SY3 5AL; 01743 343223; www.shropshirelink.org.uk; info@shropshirelink.org.uk

Seleway

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Dementia conference set for Birmingham

A national conference on dementia will be held in Birmingham on 5 December. The organiser, Public Service Events, has already held ‘Dementia: a National Crisis’ in Manchester, where it was a sell-out, and is now bringing it to the West Midlands.

There are currently 800,000 people living with dementia in the UK and it is predicted that by 2021 the number will be more than a million. Dementia costs society more than £23 billion a year, twice the cost of cancer.

Public Service Events says ‘an array of expert speakers will outline the challenges faced in combating this spiralling condition and how better outcomes can be achieved. ‘This is an event for anyone involved with or affected by dementia who wishes to hear all the latest developments. Delegates will have the opportunity to listen, digest, debate and then reflect on the information that can make a difference to their professional or personal situations.’

Speakers will include Jeremy Hughes, chief executive of the Alzheimer’s Society; Peter Hay, strategic director of Adults and Communities at Birmingham City Council; Philly Hare, programme manager of the Joseph Rowntree Foundation; Andrew Cozens, chairman of the Carers Trust; and Toby Williamson, head of development and later life at the Mental Health Foundation.

For further information about the conference, visit the Dementia: A national crisis page on the Public Service Events website - http://www.publicserviceevents.co.uk/237/dementia-birmingham

Ticket prices are a bit eye-watering, ranging from £295 plus VAT for the charity sector through to £895 plus VAT for the private sector. But discounts are available; details from the delegate sales team on 0161 831 7111.

PODS outings

Thanks to its own fund-raising and to support from ASDA and Severn Trent Water, PODS in Telford has been able to extend its opportunities to local families to include a trip to this year’s panto at Oakengates Theatre, The Place, on 13 December.

The event is open to the whole community of Craven Arms and those from further afield. Organisations are invited to come along to promote the services they offer. For more information contact Susan Mellor-Palmer, Practice Manager, 01588 672309 or email cravenarms.practicemanager@nhs.net

The disability advice service A4U has moved and is now located at the Guildhall, Frankwell Quay, Shrewsbury, SY3 8HQ. The new contact number is 01743 251518 or email advice@a4u.org.uk
Self Care Week
Self Care Week (12-18 November) is an annual national awareness week that focuses on support for self-care across communities, families and generations. This year’s theme is ‘Self Care for Life - growing older healthily’. Local organisations can use a range of national resources freely available from the Self Care Forum website. There are many ways to support Self Care Week, so it’s worth visiting the website for information. http://www.selfcareforum.org/?page_id=539 [From Health Information News Oct 2012]

Info and aid for carers
The Department of Health has published a review of the service arrangements for providing information and advice to carers. ‘Carers Direct’ consists of an online information point, and a phone advice line for personalised advice and support for carers. For further information, go to: www.dh.gov.uk/health/2012/08/review-ofcarers-direct/ [From VS Newsletter Oct 2012]

Dementia awareness campaign
The Department of Health, with support from the Alzheimer’s Society, has launched a dementia awareness campaign which aims to increase early diagnosis rates by tackling the public’s fears of talking about the condition. The campaign - ‘A Day to Remember’ - is part of the Prime Minister’s Challenge on Dementia. It will encourage people to have that first ‘difficult conversation’ with a friend or family member when they spot the signs of dementia, and encourage them to visit their GP. [From Health Information News October 2012]

Changing face of the NHS
(and see page 12 of this issue)
The National Care Forum and Voluntary Organisations Disability Group have produced a briefing to increase awareness of the health and social care changes happening right across the NHS and local government. These changes will alter the way all providers, elderly and disabled people and their carers work with and are supported by the health and wellbeing system in the future. The briefing can be downloaded from here: www.vodg.org.uk/members/vodgpublications.html

Connecting People
The Foundation for People with Learning Disabilities recently launched Connecting People, a new approach to connecting services designed to offer people with learning disabilities and their families an improved quality of life. Research from the Foundation has shown that people with high support needs rarely get the right help to make strong enduring relationships in their community.

Community connecting services, which work with individuals and the people close to them to find out their strengths, talents and interests and connect them to opportunities in their area, are now more accessible than ever through Connecting People. For further information about the Connecting People Programme go to: http://www.learningdisabilities.org.uk/our-news/120917 [From VCSA Newsletter]

Unfair pressure from the press
There is increasing evidence of the witch hunt against benefits claimants by the media and the effect it is having. Disability Rights UK has released the results of a survey (at http://tinyurl.com/c6fmdwy) in which more than 75% of participants cite negative press articles about disabled people but only some 33% can cite a positive story. Some 91% of participants said there was a link between negative press portrayal of disabled people and rising hostility or hate crime. [From Shropshire ME Group newsletter Oct 2012]

Diabetes programme warning
Diabetes UK has published ‘The NHS Health Check programme: Let’s get it right’. More than half of people with diabetes are not having their cholesterol levels adequately controlled, according to its new study. Thousands of people with Type 2 diabetes are missing diagnosis because of the failure to properly implement the NHs Health Check programme. During the last financial year, only 40% of people who could have benefitted from an NHS Health Check, which tests people aged 40-74 for risk of Type 2 diabetes, heart disease, stroke and kidney failure, actually had one.

Men's Health
Men’s health is unnecessarily poor. Too many men still die prematurely, with just 66% reaching the age of 75. Men are more likely than women to die from heart disease, cancer and suicide, to be overweight, to smoke and to drink alcohol excessively, yet men are less likely to use a wide range of health services effectively or to take part in health improvement programmes. For more information visit http://www.rsphs.org.uk/en/training-solutions/index.cfm/id/407313F7-F97E-4C31-AB75F280F2B369D8 [Health Information News October 2012]