

SENSORY IMPAIRMENT



WHAT DO WE MEAN BY SENSORY IMPAIRMENT?

‘Sensory impairment’ or ‘sensory loss’ are umbrella terms used to describe loss of the distance senses i.e. sight and hearing.

▼ **There are three very different groups within sensory impairment:**

-  Sight impairment/Visual Impairment – used to refer to anyone who is blind or partially sighted.
-  Hearing impairment – there is no formal definition of hearing impairment but it is often used to refer to those with a partial or total inability to hear.
-  Dual sensory loss – the terms dual sensory loss, sensory impairment multi-sensory impairment and deafblind are often used interchangeably. The widely accepted definition of dual sensory loss is:

“ Persons with a severe degree of combined visual and auditory impairment, resulting in problems with communication, information and mobility ”

SOURCE

(Think Dual Sensory Report, 1995) - http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/gro ups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4014374.pdf



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-  Appropriate information, advice and assistance can help overcome the barriers experienced by people with sensory impairment, and can help change societal attitudes, allowing individuals to achieve a good quality of life. There will also be wider societal and economic benefits to this.
 -  Every local authority has a legal duty to maintain a register of people who have a “substantial and permanent” physical disability or sensory loss: a disability that has a significant effect on someone’s day to day life and is expected to last longer than a 12 month period. This register is maintained by Social Services.
 -  The purpose of this register is to ensure that local authorities know who in their area might benefit from services which are there to promote the welfare of disabled people. It can also help Social Services to plan ahead by providing estimates of the numbers of disabled people locally and what impairments they have.
 -  Registration is voluntary. Many people do not see the need to register as they can access benefits and concessions without going through the registration process. Therefore the number on the register is likely to be an underestimate of those with a physical disability or sensory loss.
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WHO IS AFFECTED AND HOW?

-  The largest cause of visual, hearing and dual sensory loss is the ageing process.
 -  It is estimated that 1 in 10 people over 65 have some degree of age-related macular degeneration (AMD).
 -  1 in 5 people aged 75 and over is living with sight loss.
 -  There are more than 11 million people in the UK with some form of hearing loss, that is one in six of the population.
 -  By 2035, it is estimated that there will be 15.6 million people with hearing loss in the UK - that's one in five of the population.
 -  There are more than 45,000 deaf children in the UK, plus many more who experience temporary hearing loss.
 -  There are approximately 250,000 people in the UK with both hearing loss and sight loss. Of these 220,000 are aged 70 or over.
 -  People with a sensory impairment will have experienced life with their individual impairment in a completely different way to others who may be classed as belonging to the same group. No two people will be exactly the same and services should not be delivered as if they were.
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<http://www.nhs.uk/conditions/Macular-degeneration/Pages/Introduction.aspx>

 <https://www.actiononhearingloss.org.uk/your-hearing/about-deafness-and-hearing-loss/statistics.aspx>



— SIGHT IMPAIRMENT

-  As many as 2 in every 1,000 children are estimated to have sight loss.
-  It is believed that people with sight loss are 1.7 times more likely to have a fall and 1.9 times more likely to have multiple falls. Of the total cost of treating all accidental falls in the UK, 21% was spent on the population with visual impairment.
-  Smokers double their risk of developing age related macular degeneration (AMD) a painless eye condition that causes the blurring and gradual loss of central vision (what you see when you look straight ahead). Smokers also tend to develop it earlier than non-smokers do. Smoking can make diabetes-related sight problems worse, and has been linked to the development of cataracts.
-  Obesity has been linked to several eye conditions including cataracts and AMD. Obesity also has a strong link with diabetes and an exacerbation of sight deterioration in diabetic retinopathy.
-  People from African/African-Caribbean populations are considerably more at risk of developing glaucoma and have higher risk of age-related macular degeneration. People from Asian populations are at higher risk of cataracts. Both groups are at higher risk of diabetic eye.
-  An estimated 60% of stroke survivors have some sort of visual dysfunction following a stroke. The most common condition is some loss of visual field which occurs in 30% of all stroke survivors
-  Uncontrolled high blood pressure can cause blood vessels in the eye (retina) to tighten and cause damage to the eye which causes vision problems.
-  Older people with sight loss are almost three times more likely to experience depression than people with good vision.
-  Adults with learning disabilities are far more likely to be visually impaired than the general population.

 <https://actionforblindpeople.org.uk/about-us/media-centre/key-statistics/>
<http://www.nhs.uk/conditions/Macular-degeneration/Pages/Introduction.aspx>



ESTIMATED NUMBER OF CHILDREN AND YOUNG PEOPLE WHO ARE BLIND OR PARTIALLY SIGHTED IN WESTERN BAY (RNIB - 2015)

AGE	BLIND	PARTIALLY SIGHTED	TOTAL	NUMBER WITH ESTIMATED ADDITIONAL NEEDS
0 - 16	49	147	196	97
17 - 25	31	96	127	-

Total Western Bay population estimated to be living with sight loss

	2015	2020	2025	2030
MILD	11,380	12,110	13,400	14,920
MODERATE	3,940	4,690	5,190	5,780
SEVERE	2,350	2,360	2,690	3,070
TOTAL	17,670	19,160	21,280	23,770

In the UK around 1 in 4 blind or partially sighted people of working age are in employment.

In Western Bay there are an estimated 3,422 people of working age living with some degree of sight loss.

<http://www.rnib.org.uk/knowledge-and-research-hub-key-information-and-statistics/sight-loss-data-tool>



As there is no requirement to register any disability and some historic reasons for registration, such as access to services/benefits no longer exist, disability registers are less useful as a measure of how many people in an area have a sensory disability.

The registers are reported annually to the Welsh Government. The data below shows a variety of changes over time across Western Bay. However, it seems likely that local factors and different recording methods are having an impact on registration.

2006-2007		2014-2015		2006-2007		2014-2015		2006-2007		2014-2015		2006-2007		2014-2015																	
Bridgend				Neath Port Talbot				Swansea				Western Bay																			
373				263				420				364				355				532				1,148				1,159			
97				106				123				132				67				160				287				398			
8				17				8				11				64				30				80				58			
1				3				-				1				8				2				9				6			

	Number of sight impaired people aged 65 Years + (SSDA900)		Number of sight impaired people aged 18 - 64 Years (SSDA900)		Number of sight impaired people aged 5 - 17 years (SSDA900)		Number of sight impaired people aged under 5 years (SSDA900)
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— HEARING IMPAIRMENT



The timing of the hearing loss can vary.

- ▶ Congenital hearing loss is present at birth.
- ▶ Acquired hearing loss happens later in life, either during childhood, the teenage years, or in adulthood, it can be sudden or happen slowly over time.



Babies will be at risk of failing to develop language skills and of low educational attainment if their hearing impairment goes undetected.



It is believed that prevalence of hearing impairment is higher in Black and Minority Ethnic (BME) communities, particularly in more recent migrants from countries with low levels of immunisation against conditions such as rubella.



There are environmental factors linked to a greater risk of a hearing impairment, for those people regularly subjected to loud noise. Also a direct head trauma can cause hearing loss.



People with hearing loss are also highly likely to have problems such as tinnitus and balance disorders which contribute as risk factors for falls and other accidental injuries.



Those who become suddenly deafened through trauma or infection are likely to experience emotional distress and find it difficult to cope with the sudden, negative impact on their health and well-being.



People with hearing loss may also have other additional disabilities or long-term health conditions that limit their daily activities such as arthritis and mobility problems. This often means that barriers to inclusion and feelings of isolation are worsened.

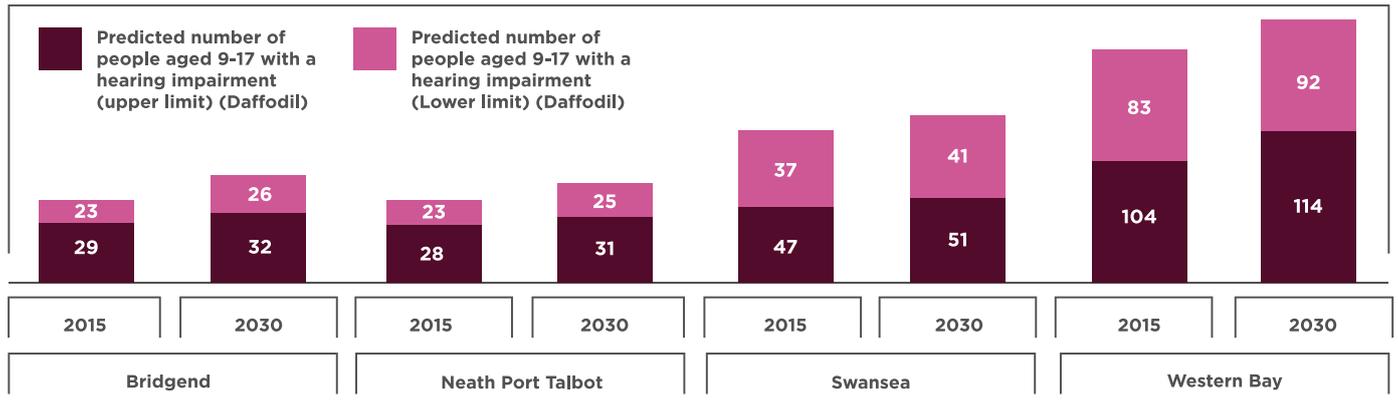


<https://www.actiononhearingloss.org.uk/your-hearing/about-deafness-and-hearing-loss/statistics.aspx>



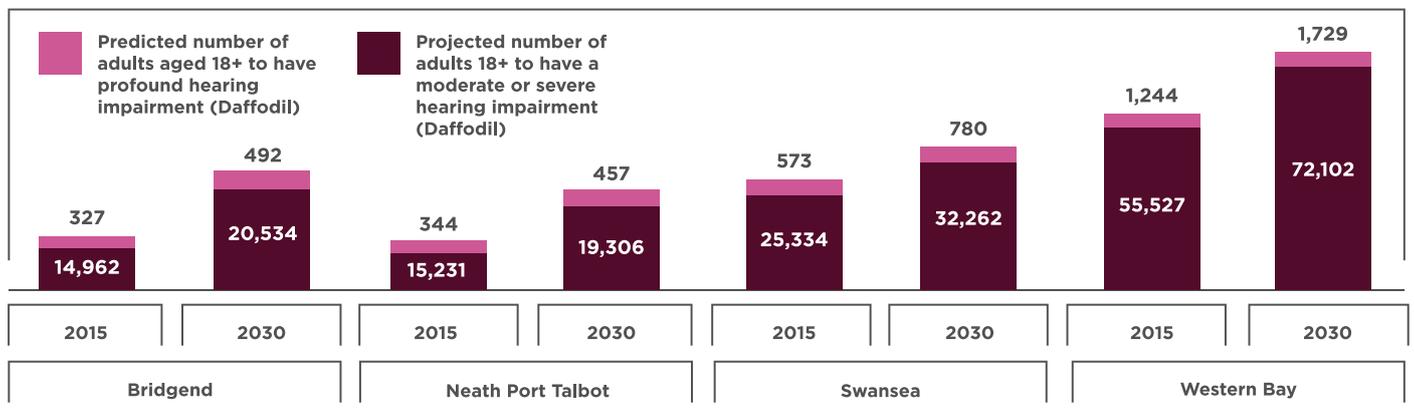
It is anticipated that the numbers of children with hearing impairment will increase slightly over time due to the projected modest increase in the number of people in younger age groups in the Western Bay area.

▼ Predicted Hearing Impairment Amongst Children



It is estimated that 4% of the working age population in Wales wear hearing aids or are profoundly deaf. The rate at which hearing impairment occurs, increases very significantly by age. The vast majority of people with hearing loss are elderly. The growth in the expected numbers of adults expected to experience a hearing impairment could be attributed to the growth in the population aged 65 and over.

▼ Predicted Hearing Impairment Amongst Adults



DUAL SENSORY LOSS

This form of sensory impairment can develop over time (acquired) or can be present from birth (congenital).

Number of people severely sight impaired with hearing impairment of all ages (SSDA900)

	2006 2007	2007 2008	2008 2009	2009 2010	2010 2011	2011 2012	2012 2013	2013 2014	2014 2015
Bridgend	58	63	55	60	55	45	49	44	39
Neath Port Talbot	57	60	71	71	65	65	67	68	70
Swansea	50	50	72	77	71	65	65	105	108
Western Bay	165	173	198	208	191	175	181	217	217

Based only on the registration figures the prevalence of sensory impairment is statistically greater in those over the age of 65 years which is consistent with the data below. However, these figures only capture those with severe sight loss (blind) with hearing loss and not those with a sight impairment (partial sighted) and hearing loss.

Number of people persons severely sight impaired with hearing impairment of all ages (SSDA900)

	2006 2007	2007 2008	2008 2009	2009 2010	2010 2011	2011 2012	2012 2013	2013 2014	2014 2015
Bridgend	52	57	52	53	48	38	45	40	35
Neath Port Talbot	49	54	65	65	57	60	61	61	61
Swansea	43	48	64	69	61	56	56	86	90
Western Bay	144	159	181	187	166	154	162	187	186





WHO IS RECEIVING HELP/WHAT SUPPORT IS AVAILABLE?

There is a gap in information for those with sight impairment in the age group 13 – 17. However, a study of children and young people accessing specialist mobility and independent living skills services (habilitation services) published in 2016 suggests the following:

▼ **Number of children and young people accessing habilitation services**

	Children and young people with a visual impairment with a Statement of Special Educational Need	Children and young people with a visual impairment without a Statement of Special Educational Need	Children and young people who have accessed habilitation services during the last 6 months	Percentage of children and young people who have received habilitation training during the last 6 months
0 - 4	9	32	11	27%
5 - 11	69	81	37	25%
12 - 16	46	74	24	20%
17 - 18	11	2	2	15%
19 - 25	0	18	2	11%



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-  Specialist support is available through health, social services and the third sector.
 -  Each local authority has a Sensory Support Team who provide support to children and adults, such as functional assessments, communication skills, practical skills, benefits advice, rehabilitation and habilitation. This service also provides equipment to enable independent living. The service also works closely with the 3rd sector and other professionals to ensure people are getting the right advice and information. The focus is on early intervention to promote independence and enable opportunities to learn new skills or enhance current skills.
 -  Education – specialist sensory teachers and pupil welfare workers.
 -  ABMU Health Board ‘Take Time for Yourself Team’ – an award winning team who promote the importance of making health care information and communication accessible to patients who are deaf, hard of hearing, blind, partially sighted or have dual sensory loss.
 -  ABMU Health Board Audiology and eye clinics provide assessment and rehabilitation for children, young people and adults.
 -  There are a number of third sector services for those with sensory impairment, for example: UCAN Productions, a drama group for sight impaired children and young people aged 7 to 14, South Wales Pythons, a swimming club for children with sensory loss or physical disabilities and Deafblind Cymru Support Group.
 - ▼ Resource Suite at Trem Y Mor Resource Centre (Bridgend)
 -  Braille classes – this is supported by members of the team but is a co-productive initiative. The facilitator for the class is an individual who has been blind from birth, retired from employment and wanted to share her knowledge with others.
 -  Environmental aids assessments and provision- Assessments are carried out in an environment similar to a person’s home.
 -  Individual equipment demonstrations – e.g. telephones, various aids to daily living and IT software e.g. iPads and computer software
 -  Peer support group sessions e.g. mobility workshop introduction, kitchen skills workshop.
 -  Also, in Bridgend there is a Hearing Impairment Team who provide weekly support groups for children with hearing loss and their parents/carers. Sight impaired children also attend on a fortnightly basis.





THINGS PEOPLE TOLD US THAT MATTER TO THEM

— PROFESSIONAL SERVICES

-  Train more people on how to communicate appropriately - communication should not be seen as the service user's problem. Explore the wider use of new and emerging technologies to improve communication
 -  Tailoring services better to meet the needs of people with sensory loss
 -  Act on the feedback received from consultations
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— PHYSICAL ENVIRONMENT

-  More needs to be done to ensure the design of all public services meets the needs of people with sensory impairment – e.g. street furniture, street crossings and temporary works
 -  More needs to be done to ensure public transport system is adapted appropriately
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— GOOD PRACTICE

-  Use specialist organisations such as the Royal National Institute for the Blind to help design good, accessible public services
-  Continue to promote the role of support workers in helping people to access services





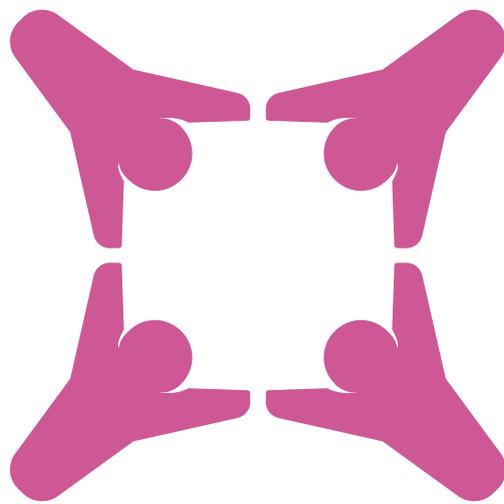
WHAT CHANGES DO WE HAVE TO PLAN FOR?

-  Meeting increasing levels of need – The data tells us that we will have to meet the needs of more people with a wider range of issues including people with sensory impairment alongside other long term, complex conditions, who will require higher levels of support. In particular, older people with dementia and BME communities which may require a different access to service arrangement.
-  Managing reducing resources - The financial resources we have available are reducing year on year and will continue to do so. We can deliver better outcomes and achieve savings by making better use of universal services and by promoting and supporting access to them rather than bringing people into formal service systems unnecessarily.
-  Delivering a new model of support - The Social Services and Wellbeing (Wales) Act has prompted the development of a new model of support for people with care and support needs. We expect to see a shift in the way people are supported away from traditional, formal services to more community based, preventative options. Our commissioning arrangements will adopt more coproductive ways of working and will be directed by the outcomes that have been co-produced locally.
-  The needs of children and young people should not be considered in isolation and further development of pathways between Education and Social Services in respect of children with sensory needs and the impact further explored, considering robust planning for the future and preparing young people for the workplace. However, further analysis needs to be undertaken on the complexity of the needs of children and young people as the figures show that they generally have more than one registration.
-  There is currently no data on the prevalence of sensory loss for people with learning disabilities, as people with learning disabilities are held on a different register. This is often an overlooked area.
-  Consideration needs to be given in developing a plan around the needs and outcomes for older people and also those of working age as this is where we are seeing a proportionate rise in registration.



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-  It is important that people with sensory impairment can access the care and support they need to enhance their well-being and to live independently.
 -  More work is required on prevention – stopping people losing their sight or hearing and preventing falls and emergency admissions in older population with sight problems
 -  The need to tackle the social isolation of people with sensory impairment by focusing on three clear priorities:
 -  Access to better range of information, advice and assistance in their care and support, such as direct payments and assistive technology, as well as support to carers, and that communication aids such as hearing loops are available at all main public access points including GP surgeries and hospitals.
 -  Creating communities that are inclusive and accessible to people with sensory impairment. Promoting professional and public awareness of the need for better lighting.
 -  Future commissioning intentions are developed through coproduction and engagement, and then made clear in that Western Bay publishes a ‘sensory plan’ aimed at improving health and well-being outcomes for local population. This should include a public health campaign, wellbeing interventions and preventative approaches to sensory impairment.
 -  There is a need to raise awareness of the impact sensory loss can have on mental health
 -  Any sensory plan would also need to consider the impact of dual sensory loss and encompass the local authority’s duty under the Social Services & Wellbeing Act 2014, for people who are deafblind, and linking with a communication strategy, providing information and advice to people with sensory loss, including information on the Welsh language, alternative formats and the promotion of information technology and how this can be facilitated further.
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WESTERN BAY

POPULATION ASSESSMENT REPORT

www.westernbay.org.uk