

KEY POINTS FROM SUBGROUP WORKSHOPS HELD ON 22 APRIL 2015 AT 1.00 PM

DAY OPPORTUNITIES SUBGROUP

<p>Lakeview attendees Dermot O’Hara, Manager, Destined (Lead) Margaret McDaid, WHSCT Community Access Worker (Note taker) Clare McMonagle, Gortilea Social Farm Lorraine Gallen, Foyle Down Syndrome Trust Emma Bradley, Daycare Staff, Maybrook Roisin Kielty, Education Authority Angela McDonald, Moving on Up Davy Crichton, Daycare staff, Evergreen Roisin Doherty, Destined Angela McCafferty, Destined Adel Darby, Service User, Destined Christy O’Donnell, parent/carer, Destined Brian Hasson, Day Opps staff, Lilliput Theatre Amanda Kelly, Glenshane Care</p>	<p>Omagh attendees Joanna Clarke, Positive Futures, (Lead) Patrice Curran, WHSCT Community Services Mgr (Note taker) Geraldine McKenna, Staff, Omagh Centre Malachy Dolan, SOFAB Cllr Victor Warrington, Fermanagh/Omagh Council Gillian Morrison, Fresh Focus, Killadeas Day Centre Pearse McCloskey, Skyzadalimit Mary Lynch, Something Special Anna McGurn, Campbhill, Clanabogan Kerry Mallon, Positive Futures Martin McLaughlin, Something Special Caroline Kelly, parent/carer</p>
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Q1 What works well – a) List what works well;

Client:	Family/Carer:	Community:	Any other comments
<ul style="list-style-type: none"> • Positive Futures – individualised package of support • Social Farming – have a base in the community, meets the needs of individuals with challenging behaviours & forensic history • Provided client with autism as way forward as not allowed to pursue education • Choice • More control over their lives • Learn new skills; socialisation; independence 	<ul style="list-style-type: none"> • Young people getting involved in activities take pressure off parents • Promotes independence • Encouraging parents to let go • Works well to have parents working with the organisations in partnership – stat/vol/independent • Skills and advocacy necessary to achieve outcomes • Less pressure on family • Respite • Support 	<ul style="list-style-type: none"> • Based in heart of village – part of community • Day opportunities give choice • Good partnership working 	<ul style="list-style-type: none"> • From a transition point of view, inductions work well, not being thrown in at deep end

Client:	Family/Carer:	Community:	Any other comments:
<ul style="list-style-type: none"> • Structure to the day; with no structure boredom can set in • Age appropriate; tailor what is out there to suit clients' needs • Working in partnership • Clients not being set up to fail; gaining confidence • Staff consulting clients as to what they would like to do • Ability led and needs led activities • Peer support helps with age spread in groups • Person centred planning; monitor progress and develop progress; • Not just 9-5 activities; evening and weekends • clients not being set up to fail; gaining confidence • Staff consulting clients as to what they would like to do • Individual work diaries to monitor progress • Having ownership; having a voice 		<ul style="list-style-type: none"> • 	

b) areas of service that need to develop;

Client:	Family/Carer:	Community:	Any other comments:
<ul style="list-style-type: none"> • Assessed need – levels of dependency – high levels to day care • Age appropriate • Working in partnership • Develop IT skills for those clients who do not have verbal skills 	<ul style="list-style-type: none"> • Self directed support – find that niche! • Respite • Childrens’ desires to be socially included • Families have fears about letting their son/daughter take risks • Risks associated with clients being in the community • Families are key; parental support from a young age; support parents of young children 	<ul style="list-style-type: none"> • Open out into the community to raise awareness; Community needs to understand the risks • Need to go back and work with Education to build skills in term of preparing the clients, eg travel independently etc • Families taking responsibility • Communities need to develop in terms of public attitudes, awareness training would be useful • Public - fears or no experience of learning disability • Important to increase visibility of people with a learning disability in public life • Society needs to take responsibility for social inclusion – not just the Trust’s responsibility 	

c) Suggestions of how to achieve new developments if financial investments are not met

<p>Client:</p> <ul style="list-style-type: none">• Use the resources that are out there and piggyback on other organisations/ community groups• Organisations need to work together – community, statutory and voluntary• Learning disability is mainly a hidden disability – need to build on capacity and awareness in communities, employers and service providers	<p>Family/Carer:</p> <p>See under Client</p>	<p>Community:</p> <p>See under Client</p>	<p>Any other comments</p> <ul style="list-style-type: none">• More networking amongst organisations would be great – to share information and work collaboratively to achieve funding and increase services
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Q2 – Choice

List examples of choice provided & discuss how greater choice could be provided

Client:	Family/Carer:	Community:	Any other comments
<ul style="list-style-type: none">• Camphill offer clients several choices• Fresh Focus• There is good general choice out there but people need awareness as to what is available• Risk assessments can hinder choices- but we need more positive risk taking• Get people to think earlier regarding choices that they have• 14 year olds don't always want to engage• Encourage people to make choices and it's important that they are able to say 'no' as well• Enable people to exercise choice	<ul style="list-style-type: none">• 'social hubs' for families would help parents to 'let go'• Reinforce importance of giving young children choices• As parents we want choice• Would be good to have 'open days' for parents and potential clients to see around Trust facilities	<ul style="list-style-type: none">• No central resource or directory of services and this would be useful• Risk adverse• Where a person lives influences choices regarding day care or day opportunities• Raising awareness of the ethos of day opportunities	<ul style="list-style-type: none">• Not a care Farm – not providing care – need outcomes that are financially viable• Community and voluntary sectors are hard to monitoring?? – depending on funding opportunities• Direct payments are not being monitored properly – safeguarding of the person• Challenge RQIA - not registered services they are day opportunities• Dealing with very vulnerable people

Q3 Challenges (both groups grouped a & b together)

a) List top 5 challenges for each group b) list some impacts experienced by the 5 challenges; c) how could these situations been avoided

Client:	Family/Carer:	Community:	Any other comments:
<p>Challenges for all answers</p> <ul style="list-style-type: none"> • Finance • Sustainability • Risks – managing risk can be restrictive at times • Processes – red tape needs looked at • Lack of a central resource makes it difficult to know what is out there • Audit and accountability – need to be processes and standards; external validation • Transportation • Community awareness • Curriculum evaluated/DEL • Nervousness at the Trust not being in control/routine 	<p>Impacts for all answers</p> <ul style="list-style-type: none"> • Finance – short term funding leads to reduced service • Cuts to funding impacts on families and individuals • Not all health service responsibility to provide funding – education authority, DSD, CAL - Government departments have a responsibility to people with a learning disability • Accessing direct payments – can't get them unless you have a social worker, may not be much either when you do get them • Mind set of parents when it comes to having to pay for a service – sometimes feel it's not their responsibility however its recognised that it's a cultural issue as that's how the system was set up • Those of us who have used day opps – demand is so that the Trust cannot take this forward • 	<p>How could situations been avoided</p> <ul style="list-style-type: none"> • Putting together a directory of choice • Ensure involvement of carers/vol and statutory involvement • Families want to participate in evaluating services/advocates for children need to be paid • Trust remains as the Commissioner • Accountable person must be statutory duty 	<ul style="list-style-type: none"> •

Q4 Lifelong learning (both groups grouped a & b together)

a) Apart from transition at 18 years, what do you consider to be other key stages or examples of life transition?

b) Lifelong transition is a natural process of everyone's life; what is required to build on practice

Client:	Family/Carer:	Community:	Any other comments
<ul style="list-style-type: none"> • Transition is lifelong however there are key stages in a person's life that can trigger uncertainty e.g. leaving primary school, when someone is older, marriage and children, when a parent dies, moving home into supported living/ semi-independent living • There is a recognition that parents go through transition as well as the individual • Important to have futures planning from a young age – it's not just for school leavers • High problem with transitions into adult hood • Independent living • Education • Employment) • Socials relationships) makes them • Housing) independent • Leisure) 	<ul style="list-style-type: none"> • Futures planning • Large amount of clients will continue to live with parents; they need to learn what independence means • Needs of family/ageing 	<ul style="list-style-type: none"> • Target social need • Needs of geographical spread – day opportunities • Concept of day opps and what does this mean 	<ul style="list-style-type: none"> •