**Minutes – Southern Rehab Forum – 16/11/2016**

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| Ashley Ayling - WSCC | Bryan Kilburn – Blind Veterans |
| Amanda Barley - WSCC | Sara Leasure - WSCC |
| Gemma Bastable - PCC | Ruth Osborne - WSCC |
| Julie Berkley - WSCC | Linda Paine Winnett - HCC |
| Vicky Blackburn -GDBA | Tracey Patterson –Sight for Surrey |
| Angela Carpenter – Student | Nirmala Pisavadia - ESCC |
| Emma Chaplin - ECLO | Alison Pursgrove - HCC |
| Christine Corker –Sight for Surrey | Melissa Ratledge - WSCC |
| Emma Crozier Smith - WSCC | Janet Soper – Open Sight |
| Kevin Harris – B&HCC | Danielle Thomas - Student |
| Richard Jones – WSCC |  |

**England Vision Strategy – Lauren Williams**

PowerPoint presentation (to be forwarded).

Discussion in groups about access to services across Sussex, Surrey, Hampshire (including unitary authorities): What? So What? Now What?

Summary: very different models across the 3 counties represented today, *Sight for Surrey*= trained admin staff log and contact the customer on receipt of CVI, take details to enable priority to be decided. There is always a qualified team member available to support them.

*ESCC* = CVIs go to one of 3 local sight loss charities who have a similar system to SFS. The referrals are then sent onto the Local Authority team.

*Hampshire CC* = currently contact is made with the customer by qualified and trained staff and then complex or long term work is contracted out to Open Sight.

*Portsmouth* – Children’s CVIs received in the Child Disability Team and referrals to appropriate ROVI.

These models are generally responding to CVIs and identifying needs within 24-48 hrs of receipt. But………

*WSCC Adults* = new system since April, generic workers have been given training on sensory needs but also covering Safeguarding/ DoLs/ Social Work and OT referrals. CVIs received and scanned onto a data system, passed to the generic team at CarePoint.

*WSCC Children* = CVI received as the adult’s but the ROVI team have to complete the initial referral etc.

This model has created a bottle neck at the initial referral stage of currently 6-8 weeks from receipt of the CVI or call from a customer to them being contacted and needs identified, information given.

Notes from Lauren to be forwarded.

**Tactile Paving guidance – Joel Young, GDBA.**

Handed around the training pack that GDBA use when giving talks and training sessions to people with a VI. Good resource with tactile booklet giving examples of the 7 different types in use. Acknowledged that not all LAs are following the guidelines and group discussed some of the issues.

Most ROVIs teach ‘indenting’ when crossing a side road to avoid the tactile paving when on the corner dropped kerb.

Feedback was that the ROVIs could do with this as part of mobility training with customers/service users. Ruth O is going to follow this up.

**RWPN and Trailblazer Apprentiship scheme – Josh Feehan, RNIB.**

Need to increase the number of qualified workers – currently under resourced services national. Reasons are retirement; progression into another role; stress and lack of support.

10 Local Authorities were required to get this scheme considered and has been reached. There is an Employers Group with blind Veterans and Sight for Surrey involved.

The Government have given permission to the RWPN to write the standards and there is a draft of skills and behaviours for the ROVI qualification. Idea is for a core qualification and then options such as DB, Mental health, Hab etc.?

Deadline to get this through is January 2017, could be ready for Sept 2017 intake of new students.

Local Authorities will, as of April 2017, pay a levy for all staff training of £100, 00 but if this is not used, they lose it. A good incentive to get Asst ROVIs etc. trained.

Suggestions for a peer discussion group for CPD – Opticians and Rehab Workers/ROVI where guidelines from the College of Optoms could be useful was raised.

West Midlands Forum – cover 2 case studies in their meetings for group discussion and recording of this can then be uploaded onto the RWPN as evidence of CPD. **The group agreed** to do this, Josh provided some guidance and forms.

Anyone wanting to join the committee has to be member of the RWPN, head count was that 11 of the 22 present today are paid members.

Anyone can be a Mentor for colleagues.

**AOB**

* Deaf Blind register – is there one?

Not a statutory duty however worth recording if someone has a sight and hearing loss (see SENSE website for the categories) as the Gov. Pay more to Local Authorities if they have people recorded as having a Dual Sensory Loss.

WSCC use the Service User Group to record DSL.

* Berkshire team have asked if a meeting can be closer to them so they can join the group. Current locations of ROVI from Dorset to Kent are invited but travel may be an issue for not attending regularly. does the current group meets the needs or should there be 2 smaller groups (West and East)? – More ideas and thoughts on this needed please.

**Next meeting and area.** Wednesday May 17th Venue – Janet Soper to see if there is a free venue in Eastleigh.

Suggested topics – Diabetes management for people with a VI - Tracey Patterson, Sight for Surrey.

Please let Ruth O know by Christmas any other ideas