



Whizz-Kidz welcomes the Strategy Unit's *Improving the Life Chances of Disabled People* report and its conclusions and recommendations. We are particularly pleased to see the focus on children and young people and firmly believe that getting it right in the early years is critical to improving life chances. We believe this particularly applies to early intervention and the provision of appropriate equipment based on a holistic assessment and so were especially pleased to see this approach backed up by the report.

We would, however, like to make the following points:

- There is a recommendation that the Department of Health should assess, by 2006, whether wheelchair services are able to deliver the NSF recommendation on children's equipment. It is disappointing that this assessment needs to take place when Whizz-Kidz and many other organisations having been pointing out for years that wheelchair services are not fulfilling their duties to children. Two audit reports have also previously backed this. A further delay before "recommendations for improvement" is unnecessary.
- Quite rightly, the example is given that a wheelchair could, in some circumstances, "be argued to be a social care rather than a health need". However, the current system does not provide wheelchairs that meet the social needs of children and young people. Until EPIOCs, complete with 'extras' such as risers, are provided by statutory services then the life chances of many disabled children will continue to be hampered.
- The postcode lottery is obviously recognised yet the setting of national standards in the provision of mobility equipment continues to be avoided. Until national standards for provision are enforced, geographical variations will remain leaving the life chances of many disabled children hindered merely by where they live.
- At several points in the report, children from BME backgrounds are singled out as facing particular problems. However, none of the recommendations seek to address these issues specific to BME groups.
- The individual budgets were welcomed by all the young people we spoke to. However, they were also concerned that vital support wouldn't be freely available to those taking up the option. With the intricacies of the direct payments system still confusing many, we would like to see further consultation made with families about how best to implement individual budgets.
- The report makes good use of the Social Model of Disability in making recommendations. Many of those that need to take on board these



move a life forward

recommendations – particularly within the NHS – continue to rely solely on the Medical Model. Until the Social Model is explained during training or induction of these staff, much of the report will continue to be a totally alien concept to those that need to implement it.

- The many barriers to using public transport are, importantly, identified. However, these barriers need to be expanded to include personal mobility – until EPIOCs are readily available through the statutory services then changes to transport systems, improved transport staff attitudes and readily available information will have limited impacts because many disabled children will still not be able to leave their houses in the first place.
- At several points, the lack of research on disabled children is mentioned. Since solid data is so often required to indicate both the need for change and the results of policy changes, we would hope that money will be available to conduct much needed research.

While we do undoubtedly welcome the report, only continued action on the back of it will really make any difference. Much of what is contained in the report – such as the need for better joined up working, for example – is a re-working of well established rhetoric and yet we have seen little progress in these areas. Indeed, if progress had been made whenever such failings and shortcomings had been identified in the past, it is doubtful whether this report would even have been needed. We will therefore be taking a keen interest in the progress of the Office for Disability Issues, and hope that it makes yearly targets, and progress against them, readily available in a timely fashion.

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