7.5.2 Adults with physical disabilities

**Why is this issue important?**

The 2010 Equality Act defines disability as “a physical or mental impairment that has a ‘substantial’ (completing a task takes much longer than it usually would) and ‘long-term’ (12 months or more) negative effect on ability to do normal daily activities”.

The social model of disability highlights the social, environmental and attitudinal barriers faced by people with disabilities, which can restrict their activity and participation in society.

People with physical disabilities are more likely to live in poverty and experience problems with housing, transport, hate crime and harassment. Policies and actions to increase independence and enablement are important in supporting good outcomes.

The 2011 Census data identifies that just under five million people in England and Wales said that they have a long-term health problem or disability which affects their day-to-day activities, by limiting them a lot. Locally this figure was 7% of the population (20,445 people).

It is estimated that in 2015, within England, there were 2.57 million adults (aged 18–64 years) with a moderate physical disability. This is projected to increase to 2.71 million by 2025. The figures related to serious physical disability are 753,000 people in 2015, projected to increase to 812,000 by 2025.

**Key outcomes**

- **Gap in the employment rate between those with a long-term health condition and the overall employment rate (Public Health Outcomes Framework)**
- **Health-related quality of life for people with long-term conditions (NHS Outcomes Framework)**
- **Social care related quality of life (Adult Social Care Outcomes Framework)**

**Client satisfaction with care and support (Adult Social Care Outcomes Framework)**

**Impact in Brighton & Hove**

Applying national figures to the local population, it is estimated that in Brighton & Hove in 2015 there were:

- 13,590 people aged 18-64 with a moderate physical disability
- 3,777 people aged 18-64 with a serious physical disability
- Of all those with a moderate or serious disability, 7,784 have a moderate or serious personal care disability.

 Brighton & Hove City Council Adult Social Care provided long term support to 4,663 people in 2015/16. 58% was physical support, which includes access and mobility support (4%) and personal care support (54%).

In 2014/15, 62 people were accepted as statutorily homeless whose priority need was classified as ‘physical disability’. This represented 14.8% of all homeless acceptances in 2015-16 which is higher than the average England of 6.8%.

In 2014/15 there was a 7.5 percentage point gap in the employment rate between those with a long-term health condition and the overall employment rate in Brighton & Hove, compared to an 8.6 percentage point gap nationally.

The Adult Social Care Survey asks those receiving adult social care services how satisfied or dissatisfied they are with indicators of quality of life, such as personal cleanliness and safety. These answers are then combined to give an overall score of social care related quality of life. In 2014/15 Brighton & Hove scored 19.5 points out of a possible 24 for this measure, which is slightly higher than the national average of 19.1.

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2 Union of the Physically Impaired Against Segregation, 1975
5 Institute of Public Care. Projecting Adults Needs and Service Information (PANSI). Available at: www.pansi.org.uk (password required) [Accessed 12/07/2016]
6 Brighton & Hove City Council, Adult Social Care Performance team.
7.5.2 Adults with physical disabilities

When asked about satisfaction levels of care and support services, 66% of users of local services were either extremely or very satisfied with their care and support. The national average was 65%.9

Where we are doing well

In 2014/15, 179 Disabled Facilities Grant-aided adaptations were completed in private sector homes, and 893 adaptations (238 major and 655 minor) in Council homes.7

Brighton & Hove City Council provides:

- Extra care housing to people with physical disabilities who are under 65.
- Supported Employment to people with disabilities to help them maintain or find employment. In 2015/16 56 people with physical / sensory disabilities were supported.

Other services commissioned by Brighton & Hove City Council Commissioning include:

- Residential care, supported living and community support for people with disabilities associated with Acquired Brain Injury.
- Specialist independent advocacy for people with physical and sensory disabilities. In 2015/16, 161 people received an advocacy service.

The City Council introduced the Lifetime Homes Standard in 2001 to ensure that all new housing built in Brighton & Hove is accessible and adaptable to changing household needs. 10% of all new affordable homes are also built to the authority’s new wheelchair standard. Accessible Housing and Lifetime Homes, was adopted in March 2008, and sets standards higher than national requirements.10

There is a national and local commitment to the Personalisation agenda, ensuring that support for people with disabilities is person-centred, and increases their choice and control. The move from commissioned service to self directed support enables individuals to purchase their own social care services via Direct Payments.

In 2015/16 there were 376 people accessing Adult Social Care with physical support needs via a Direct Payment or Part Direct Payment, and 1,382 via a Council Managed Personal Budget.6

Local inequalities

The proportion of people claiming Disability Living Allowance (DLA) has historically been highest in the East Brighton and Queens Park wards suggesting that need is highest in the east of the city.11 In November 2015 there were 13,250 DLA Claimants in Brighton & Hove, (aged 18 years or over) compared with 9,480 in the same period in 2005.12

Of the 4,663 people receiving long term support from Adult Social Care 8% were from Black and Minority Ethnic (BME) groups. In 2014/15, 88% of those using the Housing Adaptation Service were White British.

In the Count Me in Too survey (2006) of Lesbian, Gay, Bisexual and Trans (LGBT) people, 15% identified themselves as having a long-term health impairment or physical disability.13 They requested improved accessibility of LGBT spaces for the disabled and greater acceptance, understanding and information. In 2014/15, 8% of those using the Housing Adaptation Service identified as LGBT.

With regard to gender, approximately the same number of men and women are in receipt of Adult Social Care services until the age of 65 and above where the figures change and twice as many women are receive a service than men. This information is not available specifically for those with physical disabilities.6

Feedback from the local advocacy provider is that where they have advocated for people it is primarily in relation to finance or benefits, social care and housing.

Predicted future need

Table 1 summarises the projections for changes in the local population of people with disabilities

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9 Disability living allowance (DLA) is a non-means-tested, non-contributory benefit which can be claimed by a UK resident aged under 65 years who has personal care and/or mobility needs as a result of a mental or physical disability.


7.5.2 Adults with physical disabilities

(Based on applying national prevalence estimates to expected demographic changes). It is estimated that there will be over 2,000 more people with a moderate or serious disability by 2030. There will also be more than 1,000 people with a moderate or serious personal care disability. A person with a moderate personal care disability finds it difficult to complete tasks such as getting in and out of bed, getting in and out of a chair, dressing, washing, feeding, and use of the toilet. A person with a serious care disability requires someone else’s help to complete these tasks.

Table 1: Population with a disability in 2015 and predicted population for 2030, Brighton & Hove

<table>
<thead>
<tr>
<th>Disability Type</th>
<th>2015</th>
<th>2030</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moderate disability (18-64 yrs)</td>
<td>13,590</td>
<td>15,140</td>
</tr>
<tr>
<td>Serious disability (18-64 yrs)</td>
<td>3,777</td>
<td>4,361</td>
</tr>
<tr>
<td>Moderate or serious personal care disability (18-64 yrs, included in moderate and serious disability above)</td>
<td>7,784</td>
<td>8,831</td>
</tr>
</tbody>
</table>

Source: Institute for Public Care. [www.pansi.org.uk](http://www.pansi.org.uk)

The proportion of the population with co-occurring impairments is predicted to increase as the aging population lives longer.

From 2012, the Government’s Welfare Reform programme introduced significant changes to benefits impacting on people with physical disabilities (such as Disability Living Allowance and Industrial Injuries Disablement benefit). There are also changes to housing-related benefits. This potentially increases the need for housing-related support around benefit, debt and rent arrears issues to ensure that people’s independent living is maintained. Advocacy services in Brighton & Hove have reported an increase in referrals for welfare and benefit issues particularly in relation to support being needed at medical assessments and tribunals.

What we don’t know

Much of the data on the numbers of people with physical disabilities in Brighton & Hove is based on national data and may not be a reflection of local needs.

There is limited data on health service activity related to people with physical disabilities.

We don’t know the number of younger people likely to develop early onset physical disabilities each year, and the strategic commissioning support which will be required.

There is no local data available on social deprivation, learning disability, or gender reassignment.

Key evidence and policy

Key national policy relating to physical disability includes:

- The Care Act (2014)14
- The Disability Discrimination Act (2005)15
- National Service Framework for long-term conditions (DH, 2005)16
- Improving the life-chances of disabled people (Cabinet Office, 2005)17
- Independent Living; a cross Government strategy about independent living for disabled people, (Office for Disability Issues, 2008)

Recommended future local priorities

1. Increased integrated working between Health and Social Care to include increased access to Self-Directed Support options for adults accessing health and social care services through:
   - Personal Budgets
   - Direct Payments
   - Personal Health Budgets
   - Increased uptake of Assisted Technology options, including Telecare.

In addition, the following priorities have been suggested using feedback from Possability People (formerly The Fed), a Brighton & Hove disability user led organisation:

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7.5.2 Adults with physical disabilities

1. Improve physical access to venues, and particularly to health services, hospitals and GP’s.

2. Increase disability awareness amongst health and social care staff as well as the wider population.

3. Increase outreach services for people who cannot travel.

4. Increase the number of accessible buses and disabled parking spaces; and the removal of obstacles in the street environment.

5. Improve accessibility to and information about services to men over 65.

6. Ensure that information and advice on finance, benefits, social care and housing is made more accessible.

7. Support people at benefits medical assessments and tribunals.

8. Increase support to find and maintain employment.

Key links to other sections

- Carers
- Housing
- Children and young people with disabilities and complex health needs
- Preventable sight loss
- Adults with learning disabilities
- Adults with sensory impairments
- Musculoskeletal conditions
- Care of the elderly
- End of life care

Further information

Disability in Brighton & Hove 2015
http://www.bhconnected.org.uk/content/reports

Possability People
http://www.bhfederation.org.uk/

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