**Notes from**

**Independent Living Campaign Conference**

**11am – 4.30pm; 25 November 2017**

**WeAre336, 336 Brixton Road, SW9 7AA**

#Right2IL









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**Introduction**

The aim of the Independent Living Campaigns Conference 2017 was to take stock of the key barriers to independent living that Disabled people who use adult social care services face. The day aimed to assess how far the situation has deteriorated in the last year and also to explore a shared vision for an independent living support system that can truly uphold our rights.

There were speakers and workshops on: campaigning for Article 19 rights, charging and Disability Related Expenditure, Direct Payment rates and recruitment, alternative models of independent living support, principles for a shared vision of independent living and independent living campaign priorities.

**Background**

The Independent Living Campaign is the successor to the #SaveILF campaign, set up in 2011 to oppose the closure of the independent living fund. The campaign – supported by Disabled People Against Cuts, Inclusion London and Equal Lives – challenged the closure in a number of ways including a petition backed by the cast of Coronation Street, two high court legal challenges and an appeal, a complaint to the United Nations and a number of direct actions and protests. DPAC also triggered an investigation by the UN into grave and systematic abuse of Disabled people's rights.

Campaign members are in daily contact through a peer support email group, sharing experiences and tips for managing social care assessments and cuts. The supporting organisations continue to work with solicitors to develop resources to help individuals understand their rights under the Care Act and to make referrals for legal advice. In 2016 Inclusion London published its evaluation report into the impact of the ILF closure one year on.

The major focus of the campaign, besides supporting individuals who are suffering injustice through cuts and changes to their social care support packages, is now to campaign for an adequately resourced independent living support system co-designed with disabled people and able to uphold our rights to independent living.

**Agenda**

**11 – 11.30am Registration**

**11.30 am Opening session**

* Welcome – Brian Hilton (Chair)
* Introduction to the day and recap since last year – Ellen Clifford (DPAC) and Mark Harrison (Equal Lives/Norfolk DPAC)

Questions and contributions

**12.15pm Workshops – Barriers to independent living**

* Charging - facilitated by Jenny Hurst (ADKC) – purple room
* Assessment and reviews - facilitated by Mark Williams (BDEF) and Tracey Lazard (Inclusion London) – yellow room
* Hourly rates and recruiting PA’s – facilitated by Ellen Clifford (DPAC) – green room

**1pm Lunch**

**1.45pm Welcome Back**

* Book reading by Penny Pepper from her memoirs “First in the World Somewhere”
* Saving the Welsh Independent Living Fund – Nathan Davies

**2.15pm Workshops – The way forwards**

* Alternative models of independent living – facilitated by Steve Graby (Manchester DPAC) with a presentation by Emma Vogelmann on ‘Looking abroad to alternative models’
* Independent living support principles – facilitated by Mark Harrison (Equal Lives/Norfolk DPAC) with a presentation by Zara Todd (ENIL) on ‘Lessons from Australia’s National Insurance Scheme’
* Campaigning for the right to independent living – facilitated by Tracey Lazard (Inclusion London)

**3.15pm Break**

**3.30pm Feedback from workshops**

**4pm Agreeing our positions**

* · Independent living principles
* · Core characteristics of alternative models
* · Key campaign objectives & actions

**4.30pm Close**

**Opening session**

* Welcome – Brian Hilton (Chair)

I’m chairing today’s event, I’m a former ILF recipient and member of Greater Manchester Coalition of Disabled People.

We should start by thanking DPAC for making the day possible – particularly our late comrade Debbie Jolly who, along with Linda Burnip, secured the funding that made today possible. And I’d like to thank the team at Inclusion London for all their hard work in organising today’s event.

It’s particularly pleasing to see so many representatives from Disabled People’s Organisations here.

We have a few apologies: Jane Campbell wants to let us know she’s 100% behind the campaign and is currently putting in bid for a Lord’s Select Committee to inquire into Disabled people’s ability to live independently within the community. Cherylee Houston was due to talk today about using the media to make the invisible, visible. Cherylee is looking forward to working with us on our media strategy to take forward the campaign priorities we agree on today. Cherylee also wants to hear from any individuals that are facing institutionalisation as a result to cuts to independent living support that would be included in contribution to an ITV news future.

I want to say a little bit about the campaign to save the ILF. I’ve been involved in a number of campaigns over the years starting with the block telephones campaigns in the early 90s, to the FACS campaigns and the welfare to work campaigns in the early 00s. However, it was the ILF campaign that I felt the proudest to be involved with; it had the most solidarity and support from other campaigners, other Disabled people and the general public. It was a campaign that had clear and distinct strands including public awareness raising through our media, legal challenges, lobbying of and meeting with our politicians and, let us not forget, some bloody impressive direct action! Ultimately we didn’t save the ILF despite initially winning the legal challenge in the high court. However, the assemblies in Northern Ireland, Scotland and Wales all went on to establish new funds and I’d like to think our campaign had some bearing on that – more on the situation in Wales later.

If I had to highlight a failing in the ILF campaign it was that, as a movement, we were initially too slow to react. We didn’t make enough noise when the Labour government undertook its initial review which resulted in the restricting of criteria of eligibility and, similarly, we weren’t vocal enough when the Con-Dem government continually delayed the rolling out of the much-promised (and ultimately flawed) consultation.

That is not to distract from the power of our campaign and the momentum that we developed and maintained throughout. The key now is to use all we’ve learnt from what we got right to what we got wrong and we continue our fight for independent living. Hopefully today will help us shape that fight.

I’d like to introduce our first speakers, Ellen Clifford from DPAC, and Equal Lives and Norfolk DPAC Mark Harrison, who will update us on some of the developments that have taken place following the closure of the ILF in 2015. Firstly we’ll hear from Ellen, then Mark and after which we’ll take a few questions from the floor.

* Introduction to the day and recap since last year – Ellen Clifford (DPAC) and Mark Harrison (Equal Lives/Norfolk DPAC)

Ellen: Thanks Brian, so I’m going start the day by giving an overview of where we’re at, a recap since last year’s National Independent Living Campaign Conference in Birmingham, which was a bit smaller than this one, and introduce some of the ideas that we’re going to talk about today. The main thing we need from today is to agree is our shared demands for the Independent Living Campaign so we can coordinate around that going forwards.

So, for those who weren’t involved in the initial Save the Independent Living Fund Campaign which this group has grown out of, I’m just going to give a little bit of background. The campaign to Save the Independent Living Fund was never just about the ILF recipients. There was initially some criticism of the campaign that it didn’t acknowledge what was happening to people who had missed out on the ILF - we of course wanted to protect the support the social care packages of everybody. Kate Green, who was on the Labour front bench at the time, asked “why are you fighting so hard when its only 1600 people who are affected”. An injury to one is an injury to all. The Disabled people’s rights movement and other allies came behind protecting those support packages for the 1600.

It was also about using the ILF strategically, it was an important campaign that enabled us to highlight the wider and much more complex picture of what was going wrong in social care. We did actually send in a complaint to the United Nations on behalf of people who had missed out on the closure of the ILF. That complaint is, 3 years later, still being processed. We will update when we hear back on that.

Ultimately we were unsuccessful in our goal of saving the ILF however we did have some wins and positive outcomes that, if we weren’t fighting for something so important and so big, they would have been seen as amazing achievements. We delayed the closure of the ILF by 3 months, through the legal actions, it meant the government had to take the closure decision more seriously about what was happening to the ILF. Although we did lose the second challenge in the High Court, the judges did make statements about the serious, adverse impact the closure would have. We raised the profile of independent living for Disabled adults and got media coverage that was fairly unprecedented. It used to be the case that the media didn’t look at Disabled adults. There was a Channel 4 feature on the closure of the ILF, the media also reported Rob Punton and others storming the House of Commons.

As Brian said there were many strands to the campaign: direct action, legal challenges, lobbying. Although we were unsuccessful in getting the Care Act to reference Article 19 of the Convention on the Rights with People with Disabilities we did get the statutory guidance to include a reference to Article 19 and that’s been useful to lawyers and legal action going forwards. We also pressed the government to find an additional £7bn that they didn’t want to - for what they call the “former ILF recipient grant”. That’s money they’ve allocated for Local Authorities from 2016-2020. Sadly, we know that many local authorities are not spending that money on former ILF recipients because it wasn’t ring-fenced. However, I think we still need to acknowledge that to get George Osborne to find that amount of money that he didn’t want to was quite an impressive achievement. The then Minister for Disabled People, Justin Tomlinson, told one of our campaigners that it was because of us pushing them into doing it that they had done it.

There was amazing peer support and solidarity that was created through this campaign - still seen through the email group list, and there’s invaluable support given every day. The campaign has also provided resources for people going through assessments and put lots of people in contact with solicitors.

We’re facing enormous challenges. For those people who have had support to challenge cuts to packages the local authority will then reinstate the package, but that’s only pending re-assessment. So many people are stuck in cycles of continuous re-assessments with the fear of packages being cut. We have some really good solicitors that we’re working with but they’re all working beyond capacity because every single adult with a care package is going through the reality of cuts and there’s not many of them that can do the work.

We’ve seen the limitations of the judicial review process as a way to challenge cuts to Disabled care packages, most recently through the Davey case. Judicial review looks at the lawfulness of processes but it’s not an adequate way of dealing with whether the wrong decisions have been made in social care assessments. Judges are very unwilling to go against the professional opinion of social workers and also don’t want to micro manage government policy. The danger when you take strategic litigation and you lose, is that it then sets a precedent. We’re seeing quite a scary situation in Hounslow at the moment where they’re interpreting the Davey judgement to mean that they don’tneed to re-assess anyone before they take away the ILF portion of their package.

We’ve also disappointingly heard that the forthcoming Green Paper on Social Care will focus only on the needs of older people and will exclude working age Disabled people. But to be honest that’s not really very surprising. The Green Paper came as a result of the outcry against the Dementia Tax that the Conservatives had in their manifesto for the 2017 General Election. What they’re really worried about is how to fund social care for older people. They want to make Disabled people pay for their own social care. Disabled people of working age are usually not going to be able to pay for this; there’s a link between Disability and poverty. It’s probably a question they want to avoid. They’re also proposing that local authorities pay for social care through 100% retention of its business rates, so ending the funding the comes down from central government to local government. That’s inevitably going to mean even less money for social care. The challenges are enormous.

The common issues that we’re seeing to individuals whose social care packages are being cut, are social workers coming in with an agenda whereby they’re being forced to cut packages. A recent Community Care survey showed that 2/3 social workers who responded to the survey have been told by managers that they need to go in and make cuts to people’s packages.

We’re seeing PAs increasingly replaced by technology and equipment that often doesn’t meet the needs of Disabled people.

Care managers aren’t following the Care Act procedures for re-assessments and reviews. People quite often aren’t told whether they’re having a review or a re-assessment and, according to the Care Act, the procedures for those are different. Increasingly assessments are being done in very intrusive ways, needing to give very detailed information about the personal assistance that they need. But also any number of people coming into watch without any notice being given, people turn up to your house to watch you receive your personal care. We’ve also heard of a case where the care manager wanted to put in place some kind of technology which would track exactly what the care assistant did that day. This is very intrusive into people’s personal lives.

Many local authorities won’t support night time care anymore. We’re seeing a misinterpretation of independent living whereby the idea is that people should be doing things themselves. Whereas we know that independent living is about having the choice and control over your own life.

There is an increasing reliance on unpaid support. People are being told that if they want to do things like participate in the community they’ll need to find a volunteer or family member or just people that you know.

Increasingly local authorities, in the search for funding, are referring people for continuing health care, often that can be an inappropriate referral but those assessment procedures are also very intrusive and lengthy which adds to the stress of going through that. Particularly if they then find they’re not eligible.

People are reporting great difficulty recruiting personal assistants with the low hourly rates – that’s not surprising. We’re particularly worried about the impact of Brexit. Many personal assistants come from EU nation states and we’re very worried about the restrictions on freedom of movement and the impact that will have.

There’s a lack of infrastructure support for people for people to manage their direct payments and their personal budgets, people are being left having to manage things like changes to employment law, changes to case law on hourly rates for night time support, pensions etc. People are being left having to manage without the support to manage those things. Care managers often don’t understand these things. People are told, for example, their care hours are going to be cut with only a week’s notice. Without the understanding that people employing personal assistants have to abide by the employment contract that they have with their PAs.

Jenny will talk about in her workshop, charging policies being introduced by local authorities that are much harsher. Though there is some good news in that, after a campaign by local people in Enfield, we’ve just heard that Enfield Council are withdrawing the policy, the charging policy they were planning to introduce that would have cost Disabled people a lot more money. We were seeing a cascade affect across London boroughs whereby we were seeing that because a few had done it, so we’ll do it. Redbridge is also consulting so we hope we’ll get a good result in Redbridge as well.

So what have we been doing? So since the last national meeting in July, we’ve been evidencing the impact that closing the ILF had, there was the Inclusion London report that came out at the end of last year that we launched in Parliament. We worked with Channel Four on Freedom of Information requests, similar to the ones we’d done in London for a national picture. The DWP published their own evaluation on the closure of the ILF which showed a really serious adverse impact. But they didn’t state that, what they stated was that it’s all a postcode lottery. They didn’t include any statistics but the qualitative evidence showed that individuals definitely faced serious barriers as a result of the closure.

One of the ILF campaigners, Claire, who isn’t with us today, raised an issue around pre-payment cards. Some local authorities were forcing people to use these when it didn’t meet their needs and went again their wishes. Inclusion London worked with Claire and a solicitor to create a template letter for anyone wishing to challenge their local authority against forced use of pre-payment cards. Claire also worked with In Control and The Shaw Trust to produce a report into pre-payment cards that found there are a handful companies that make a lot of money selling them to local authorities.

Fleur Perry from Disability United looked into CCGs and their capping policies. She found there were 44 CCGs with policies that breached the Care Act. The EHRC has written to those 44 CCGs asking them to respond, and if they don’t the EHRC will take legal action.

We also did a lot of work this year with the United Nations. At the end of last year the Disability Committee published their report into the investigation under the optional protocol. They investigated Article 19, the right to independent living, as well as looking at social security issues and their conclusion was that welfare reform had cause grave and systematic violation of Disabled people’s rights. This year, 2017, the government was also examined under the Convention on the Rights of People with Disabilities. Again independent living was a major thing that we raised and in the Concluding Observations that came out in August, again the UN were damning of the situation in the U.K. Alongside those Concluding Observations, the Disability Committee published a “General Comment” on Article 19; the “General Comment” doesn’t just apply to the U.K. but any country the UN CRPD is signed up to. It seems they had a lot of the things going on in the U.K. in mind when they wrote it, it seems very positive in terms of pressing for an interpretation of independent living that we understand, it being about choice and control. We have a briefing paper of the key points as well as the full General Comment. One of the things they said which was particularly relevant for our current fight was that institutionalisation also applies to people when they’re trapped, isolated and segregated in their own homes.

Nathan, who also sends his apologies and can’t be with us today, has been campaigning hard to save the Welsh Independent Living Grant. The Welsh Assembly has said that when the former ILF recipient grant ends, they will be transferring the responsibility to local authorities in Wales and of course we’ve got the same picture in England and we’ve seen how badly that’s gone here. He strived very hard to put pressure on the Welsh Assembly to reverse that decision and to follow the example of Scotland in setting up a new, Welsh ILF. The Welsh Assembly are very against it so he’s been fighting an uphill battle however he’s had support from Ken Loach (evidenced in a photo with one of Nathan’s campaign cards) but if anyone can offer any help to Nathan please do get in contact. In particular, he really needs to be in contact with more people who receive the Welsh Independent Living Grant as there aren’t many in his area. He’s getting a lot of support from allies but he really needs actual recipients involved in that campaign.

A couple of weeks ago we also held the National Disabled People’s Summit and there was a workshop on independent living and Mark will say a bit more about what came out of that.

But what are our opportunities going forwards? So although the Green Paper won’t include Disabled adults of working age, the government has said there will be a parallel work-stream to look at working age Disabled adults and Inclusion London and Reclaiming Our Futures Alliance will submit to them our thoughts on what that work-stream needs to include. We want to try and introduce some Labour Party policy too; they’ve committed to enshrine UNCRPD into domestic legislation if they were elected. They also made the commitment in their manifesto to set up a national care system. They haven’t given many details of what that would look like and we think we need to agree what our vision would be – Mark’s going to say more on that later – so we can start lobbying for that. The Care Act as you know is not working to protect the right to independent living for Disabled people, what would it look like if we had a law or could change the Equality Act for example. There are different options we can explore to get that into legislation.

The funding for today has come from a research project that DPAC has funding for, to explore alternative models for independent living. Steve Graby, who is doing a PHD on independent living, is going to lead a workshop on this which looks at cooperative models abroad and what characteristics of those would be useful here.

This is a suggestion of some of the priorities we might want to agree but we really want to hear from you all this afternoon. We need to continue to monitor and evidence what the impact of the closure of the ILF has been, what’s happening in social care. We need to continue to provide support for individuals so that peer support networks can put people in contact with solicitors so they can challenge when their packages are being unfairly cut. We do want to look at strategic litigation, we had Davey but really solicitors have been fighting individual cuts and we can’t fight for every single individual package there just isn’t the time or the capacity. If we could escalate things to take a case that would set a positive precedent, that would be helpful. We need to set out our vision for the Independent Living support system that we want to see. Another thing that has been raised is a briefing by Simone Aspis, who also sends apologies that she can’t be here today, who feels very strongly that we need to fight institutionalisation. What we’re seeing is a return to institutionalisation not just in terms of people trapped in their own homes, but a rise in care settings. Southampton Council for example whilst cutting people’s packages, invested seven million in a super care home. Extra housing is being used as a way of re-segregating people.

But to remind ourselves of how powerful we can be when we collectivise and fight together, let’s watch the footage of when Independent Living campaigners in this room today, in the words of the media “stormed Parliament”.

[Watched film of direct action in Parliament to save the Independent Living Fund: <https://www.youtube.com/watch?v=_6N8c4XNa2Y>]

Mark Harrison: I think that video sets the context and the tone of how we think change is going to occur. It’s not going to come from politicians or professionals. That’s why this conference and the National Disabled People’s Summit earlier this month is so important. We think it’s really important we take control of our lives and the agenda of what we want from a right to independent living. We don’t want other people deciding that because we know if politicians or policy makers set the agenda then they’ll water it down, then corral us into systems where it’s non-Disabled people assessing us, measuring us, restricting us of doing all those sorts of things.

Our vision: This is an on-going process where we can really have our voice, where we can say what it is that we require from a legal right to independent living and what that should look like in practice on the ground. We began this process at the Independent Living workshop at the National Disabled People’s Summit and we’re taking it forward at today’s conference. What I tried to do was capture some of the themes that emerged in that workshop and from our members in ROFA (Reclaiming Our Futures Alliance), Equal Lives and DPAC (Disabled People Against Cuts) and in the campaign to #SaveILF – and what good looks like. This is about creating a vision not hamstrung by politics, austerity, cuts any party political position, this is what Disabled people see as what we need to live equal and independent lives.

Right to independent living: What emerged in the conference earlier this month is that we want a right to independent living. That’s certainly what the United Nations is saying in all its judgements on the British Government in its article on independent living. We want a universal National Independent Living Fund. We don’t want the postcode lottery that is social care at the moment. It needs to be paid for out of direct taxation; we can’t have it rationed by Labour or Conservative authorities, or whatever political party is in power locally. We can’t have our lives being determined by local politicians and local interests where we might lose out. This needs to be free at the point of delivery, alongside the NHS, so that we move away from this rationed system where it’s means tested so that only those poorest in society have access to social care. Because what we’re facing at the moment is a catastrophe. That’s what the UN has said but it’s what Disabled people have said at all the workshops and conferences. Local authorities are cutting budgets by 50/ 60/ 70% and many Disabled people are having their social care completely removed in the assessment process. It feels very much like the transfer from DLA to PIP where tens and hundreds of thousands of people are losing their right to PIP. Every time social workers in local authorities make their assessments, the packages never go up. Disabled people’s needs go up as we get older and our lives become more complex but as our needs for support to live independent lives go up, our packages are being slashed or removed all together. It needs to be free at the point of delivery and based on need.

Social care: Clearly the government has nothing to offer in terms of credible proposals. They have, again, delayed the Green Paper (to May 2018). There are no Disabled people or DDPOs on the expert panel. In terms of designing new system, as Ellen said, it’s just focusing on older Disabled people and how they can grab people’s houses to make people pay for social care.

Local authorities have made cuts of around 40% since 2010 and the cuts over the next 4 years that are working their way through, will take that taken way over 50%. We’re seeing the sorts of budget cuts to direct payments support, direct payments social care up around 40% and that will go much higher. Each local authority around the country is preparing budgets for next year with hundreds of millions of pounds locked in. Because adult social care is usually the biggest spend in every authority, that means the cuts will disproportionately hit disabled people.

Personal contributions: There are a whole number of issues around the lack of social care or, as we call it, the “No Care Act”. The Care Act has enabled local authorities to means test even further and re-assess people’s income. We believe that a lot of the practices that local authorities are implementing are illegal and that they breach the No Care Act guidance. Personal contributions is one of them. In our local authority in Norfolk, they’re doing remote financial assessments on people. People are now receiving bills for their personal contributions that have risen and some people are getting bills for their social care that are higher than the actual value of their personal budget. You couldn’t make it up. We’ve had a lot of people contact Equal Lives – and the local authority, ironically – saying that they’re giving up their social care because they can no longer afford to have it. It’s a question of, “do I eat, do I pay my rent or do I pay for social care” – and people are choosing social care. You’ve got the situation where people have been assessed as needing social care under the Care Act but they’re giving it up because they can’t afford it. This is a ridiculous situation that we’re in, in 2017.

The other issue that’s coming up in DPOs (who are helping people to manage their personal budgets and direct payments and their own care) are, as Ellen said, local authorities bringing in pre-payment cards. These are not for our interests, to make it better and easier for us, but so that they monitor what people are doing. Although there’s no level of fraud in personal budgets, they’re bringing it in so that they control the system.

Another thing they’re doing is taking away contracts from DDPOs, for supported accounts, for payroll, for employment support, and taking it in-house. For example, Surrey Centre for Independent Living has had 60% cuts to its funding because the local authority took away the supported accounts. Our local authority in Norfolk is doing the same thing to Equal Lives. We’re going to be doing a survey coming up, around personal contributions, as we want to delve into this more. Also, we want to hear from DDPOs in local authorities where similar things are happening. This is restricting choice of control. It’s going back to the bad old days where social services control our lives.

Care act legal duties: As I said, every local authority up and down the country is facing huge austerity cuts over the next 4 years, up until 2022. This is Labour authorities as well as Conservative authorities that are doing this, so I’m really pleased that Ellen said the focus is on the Labour Party. I’ve put together, with Peter Beresford, an article based on the workshop at the National Disabled People’s Summit for this month’s Labour Briefing. The article is targeted at the leadership of the Labour Party – Jeremy Corbyn and John McDonnell – to actually get this on their agenda. What we don’t want to be fobbed off with is some sort of re-hashed social care system that’s based on private providers with the postcode lottery that we have. It’s really important that we also have that conversation in the lead up to a general election with the leadership of the Labour Party and I think we really need to move the conversation on. It was fantastic that John McDonnell made that video for the National Disabled People’s Summit, where he said he would be taking DPAC and Disabled people into government with him. We need to have co-production *before* the Labour Party goes into government so that we’re ready to go from day 1 with a system designed by us.

Austerity cuts: At the moment we’ve got a social care system based on the Poor Law, or the principles of it, based on means and needs testing. The interesting idea where it differs is that the Poor Law was based on the deserving and the undeserving poor and in the past we’ve been seen as the deserving poor. But the poisonous rhetoric and the poisonous discourse since the coalition came into power in 2010, and now the successive Conservative government, is that we’re no longer seen as the deserving poor. We’re seen as a burden on society, we’re problematized and we’re seen as useless eaters. That’s not good, that’s not acceptable.

The research published last week from Oxford University showed that 120, 000 older Disabled people and care home residents have died as a result of cuts to social care since 2010, is very powerful and we need to use that. When we did the submission to the United Nations, both for the inquiry and the government’s examination, we evidenced every argument. The government’s report was a disgrace and all based on assertion and not backed up by anything. The fact they kept saying “we’re the leading government in the world on Disability” was completely blown apart and the UN actually said to them “you’re not, the evidence shows you’re actually going backwards”. We’ve got very powerful evidence that backs up everything we’re arguing for. I think that’s really important, that we’re going to be designing a new right to independent living and what an independent living service would look like based is based on evidence of our lived experience. This is experience that’s in this room but also on evidence from research on what doesn’t work.

Assumptions: So today we want to take the planning forward for what we want from an independent living service. It won’t be rationed based on neoliberal ideology, it won’t be there for private providers to make profit of our backs and we won’t be assessed to death. We want to abolish the postcode lottery and we don’t want local authorities determining our future. Personalisation is dead, as is the Care Act. It’s not fit for purpose and needs to be scrapped. The new system needs to be based on the UN Convention on the Rights of People with Disabilities (UN CRPD) and our contributions, the Disability Committee’s inquiries and the concluding observations conclusions and General Comment on Article 19.

What do we want?: We want these enshrined in law. These are just emerging ideas but I think it’s really important that we discuss these and come to a view of how we want it organised.

But the thought is at the moment that we want a new Independent Living Service organised by central government, led by Disabled people but delivered locally. We need to learn from – and build on – the lessons from the Independent Living Fund (ILF) as a model for what we want for the future. Not to say that the ILF was perfect or the ideal but what were the best things that we learn from that and what can we take forward? This local service need to be shaped and delivered by user-led DDPOs, co-operatives and social enterprises. It will be for need not profit and not be means tested. It will be independent of, but sit alongside, the NHS and will be funded from direct taxation. There is a much bigger job to do in helping the NHS move to adopting a social model of disability, distress and ageing. It will need to be alongside the NHS and not absorbed into it so we don’t lose our control and choice. It will also demand an end to current discriminatory and cruel approaches to ‘welfare reform’ and a new independent living based approach.

Our Vision: This National Independent Living Service needs to sit in central government. What we’re talking about it two things really. We need to have a focus across government because independent living is not just about social care. What came out of the workshop at the NDPS very clearly is that there’s no point having accessible transport or accessible education because we’re prisoners in our own homes or stuck in an institution. Social care is a big priority and we need to move it out of the ghetto it’s currently stuck in at the DWP. This is the office that labels as scroungers, as welfare recipients. We want a cross-government body that is going to address and have action plans in every department to make disability equality very real – whether it be in transport, education, schools, arts or culture. The National Independent Living Service needs to be delivered by DPOs. It will obviously work with non-Disabled allies who share our critique of the existing system and who work to the social models of disability and distress.

We also need to re-cast the debate and the dialogue that is currently a very negative discourse. We need to see Disabled people and social care as an economic generator, a social and economic generator. The £1.5m workforce that, at the moment, is treated as a marginal pool of low-grade, low-skilled and low-paid workers. We need to see that and re-case it as a jewel in the service industry crown. We need to see Disabled people as a positive way to grow our economy. In rural villages in Norfolk, Disabled people are often the largest employers. If the pubs and the shops closed, the Disabled person employing PAs would be the major employer in the area. We also need to see this as being about wellbeing. The Care Act was supposed to be about wellbeing but we know the first things to go when a social worker assesses our budget, are wellbeing activities. You’re not allowed to go to the gym, the pub or an adult education class because they won’t pay or they won’t give you a PA to get there. We need to turn these arguments on their heads and getting these arguments well-rehearsed.

We need to take into account the change in demographics and the increasing need for all Disabled people – and people who acquire their impairments through their life’s course – for support and wellbeing. At the moment it is polarised; the new Green Paper doesn’t talk about most of us, it’s about grabbing resources from older people. We need to change that discourse so we’re thinking about a life-long service for the whole of the population, that supports people to live independently and to live well. It’s a needs-based and person-centred approach that will value us equally and be concerned with our needs whatever our role, whether we are a Disabled person, a worker, a service-user or a citizen. It would offer a truly sustainable and rights-based economy in society. It’s a much wider debate that we need to locate our demand for independent living in.

Clearly the demands of the Disability movement: “Nothing about us without us” and “professionals on tap, not on top” need to guide us. It’s our lives we’re talking about so it has to be us that shapes them. We need allies in politicians and policy makers to come alongside us. We don’t want tokenistic adjuncts to what they want to do anyway.

* Discussion

Brian Hilton: Thanks you Mark and Ellen. I think a lot of those themes will be discussed in the workshops. We have a few minutes for comments and questions.

Robert Punton: I’d like to talk about what Mark and Ellen said about the Labour Party. This week I went to Birmingham for Jeremy Corbyn’s and John McDonnell’s post budget speech. They mentioned how they’re going to be supporting all people and, whilst I might be getting older, I’m not at retirement age yet and there was nothing about younger Disabled people. In terms of the language and the rhetoric they use about social care - I’m 55 not 5, I don’t need care I need support to live my life independently. We do get them to talk about the language that is appropriate for us to live independently now.

Carlo Salvatore: We do need to talk about re-focusing and the language that we’re using as well. We need to dump the neoliberal preciphist and really tell it like it is. The debate that the present government would like us to be and submit is closer to being fascist than neoliberal. We simply must fight this so it’s Disabled people on top.

Claire Glasman: Care relates to everyone’s relationships in the whole world and care for the planet and wildlife; care is not something just restricted to Disabled people. To get away from patronising relationships and to break out of the situation we’re in, we need unwaged families to be recognised and to get the Living Wage. That’s the way for us to get out of the situation where we’re trapped and we don’t have a choice. I don’t think we should just talk about people of working age today. For example, my dad has passed away now but I was helping to look after him before he passed away. He did not want home help, he did not want to employ anybody, he just wanted his family members coming and I was not recognised for that care. At the hospital I couldn’t get Blue Badge parking because I wasn’t a patient there. We want to put something out that integrates Disabled carers, women carers and the whole issue of the millions of unwaged carers to get the Living Wage so that we’re not stuck in an exploitative situation.

Chris Smith: In the very small town that I live, I probably am the largest supplier of labour. I come from a history of Disability, I have three companies which now lead in Disabled people’s needs. I’m chair of the Disabled People’s Golf Association, Co-Director of the Caribbean Disabled Sports Association and a trustee of Save USAP. Just to put it on record that our local council, Stroud District Council, up until recently had something like 800 independent sheltered living accommodations and they’ve now closed 20% and propose to close many more. The problem is that they’re not planning to build any more and the people they’re kicking out of sheltered accommodation are being put onto the end of a queue of 3000 people. All of whom have found that it’s difficult enough to get a place, let alone one that is specific for the elderly and Disabled people. I would also like to say I’ve been through both the PIP and the DLA process – and had more problems than you could bear to stick at – and yet I was turned down and I immediately wrote back to them and was offered a complete reversal. So I must stress that to get the DWP to listen to you, you must get your application in for a referral as soon as possible. I was on the DAA (Disability Action Alliance) which was set up by the Office of Disability Issues and that lasted for 2 years under the coalition government. It didn’t go anywhere as we were being asked to support policies that were being reduced that no one had a desire for. There was a mass walk-out and now it has disappeared. That organisation failed because Disabled people within it knew it was a con.

Sarifa Patel: I’m from Newham which has previously been really brilliant with Inclusive Education in the past but it’s going backwards and Disabled children are really suffering, they’re in more units now and the parents are really suffering. I do agree with the lady who spoke before (Claire Glasman) who spoke about carers, especially if they are a service user and they do not recognise you being a service user and a carer. Sometimes you don’t have the funding you need because the person you’re caring for might not understand the system if they have mental health needs or the system plays them against you – it’s a very bureaucratic system. We should be leading on this and we should be independent of them. If you put a complaint in to the DWP they don’t respond, that’s how much they value us that they don’t even recognise us really. How do we address this? We’ve got to fight united and challenge them. Labour is in our council but we’ve still got problems. I regularly go to see my MP and I tell them it needs to change. We need to see change happening at local level, for our community.

Anne Pridmore: Speaking as someone who went into sheltered accommodation at the age of 23 as a young bride, I’m almost 80 now, I didn’t fit in then and I don’t fit it now. I’m really pleased they’re getting rid of sheltered accommodation what Disabled people want is to be included with other people and not put in ghettos.

Sorena Francis: I’d like to point out that under austerity, in services and social care there is a hierarchy in how they allocate need and supporting that need. For example, they completely omitted any kind of obligation to support people with mental health issues. I know of one individual who applied for her notes from the local mental health hospital and she found out she was meant to get a care package 10 years ago and no one had spoken to her about that. People with mental health support needs are not getting the help they need; they are tending to support those with visible conditions instead.

Mary-Ellen Archer: I’m from Hounslow and (compared to Hammersmith and Fulham right next door to us) they’ve decided to stop the independent living component part of my care without any written notice or warning. With the help of a lawyer I’ve had to fight to get it temporarily reinstated while they continue my assessment. In Hammersmith and Fulham they’ve decided not to make any cuts to care, not only that but they’ve decided to scrap all charges for care as well – it is very much a postcode lottery. We really need to fight that and get it centralised again. As we’re getting that change made we really need to think about the wording of what we use. As was said earlier, I’m 55 and not 5; I need someone to support me, not care for me. We don’t need a Care Act, we need a Support Act. I wanted to say an enormous thank you to Inclusion London and DPAC for all the help and support I’ve had. It has been an enormous battle that has led me to feeling suicidal and self-harming and I don’t want to see anyone else go through this.

Michael Nagle: My motto is: our life is our own, and nobody can take that away from you.

**Morning workshops – Barriers to independent living**

* Charging – Facilitated by Jenny Hurst (Action Disability Kensington & Chelsea).

How social care is funded:

* People are essentially being charged 3 times. Social care is funded through: general taxation, council tax and charges to the individuals – although this is discretionary and local authorities don’t have to charge, it is their choice.
* Councils are allowed to use the “social care precept” – an additional amount on top of council tax – but not all choose to do so.

The Care Act:

* See sections 14, 17 and 69-70 of the Care Act 2014
* Care and Support (Charging and Assessment of Resources) Regulations 2014 (and 2017 amendment).
* Section 8 and annex B/C C of the Care Act statutory guidance. [https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#charging-and-financial-assessment](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance)

Financial Assessment Principles:

* Ensure that people are not charged more than it is reasonably practicable for them to pay.
* Be comprehensive, to reduce variation in the way people are assessed and charged.
* Be clear and transparent, so people know what they will be charged.
* Promote wellbeing, social inclusion, and support the vision of personalisation, independence, choice and control.
* Support carers to look after their own health and wellbeing and to care effectively and safely.
* Be person-focused, reflecting the variety of care and caring journeys and the variety of options available to meet their needs.
* Apply the charging rules equally so those with similar needs or services are treated the same and minimise anomalies between different care settings.
* Encourage and enable those who wish to stay in or take up employment, education or training or plan for the future costs of meeting their needs to do so.
* Be sustainable for local authorities in the long-term.

Who pays?:

* If you have capital (savings / assets) of more than £23,250 – up to full cost.
* Income (but not from work) – if you have more than the government’s Minimum Income Guarantee. (If you have more than £14,250 you are assumed to have £1 income for every £250 saved).
* <https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/590707/LAC_DH__2017_1.pdf>
* However this **is** discretionary – they can chose not to charge.

Financial Assessment:

* If you don’t want to pay full cost you can ask for a financial assessment.
* It looks at: Capital (your savings and assets) - [https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexB](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance) and Income (money you receive) – [https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexC](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance)
* Financial assessments can’t take account of:
1. Income from employment / self-employment
2. Expenses received from volunteer work
3. DLA / PIP “mobility” component
4. DLA higher rate care (if you are not provided with support day AND night) BUT this doesn’t work with PIP!
5. Certain charity / compensation / trust payments
6. Armed forces payment…. Etc etc
7. AND Disability Related Expenditure
8. Annex B [https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexB](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance)

Disability Related Expenditure:

* Specific disability equipment or service – something that a non-disabled person is not likely to purchase e.g. support with personal care, a communication device, wheelchair insurance or servicing.
* General equipment or service that a non-disabled person could choose to have, but you have no choice about as you are Disabled e.g. cleaner, window cleaner, food blender, body dryer.
* Any additional costs - extra cost for equipment or a service that non-Disabled people also use e.g. extra heating bills, extra laundry costs etc.
* Anything else - that you can link to being a Disabled person or the support you need to overcome barriers.
* Potential Issues:
1. Spending on something that “could be provided by another body” e.g. wheelchair, incontinence products.
2. Things that are “your choice... not a necessary expenditure” e.g. holiday, hobby or not in care plan.
3. Transport costs.
4. Pre-existing debts.
5. Items being saved up for but not yet spent e.g. down-payment for Motability vehicle, new computer.
6. One off costs for items that wear out over a longer time –sometimes they want to allow a proportion of the cost over a number of years.
* Advice:
1. Make sure all the difficulties you have and support you need is recognised in your care assessment.
2. Don’t take it for granted that their information will cover all possible examples of expenses.
3. Really think about daily, weekly, monthly, yearly and one-off expenses and why they are “disability-related”.
4. Effect of not having equipment or service (think health, safety, wellbeing, quality of life etc.)
5. If you could have got the equipment or service from another funded why didn’t you or why would this not be suitable.
6. What evidence can you get, official or unofficial e.g. internet research about benefits of a certain treatment etc or a statement from people who know you.

Encountering problems:

* Get copy of charging policy and appeal everything.
* Get the calculations in writing and ask for a clear breakdown of each item accepted and why they haven’t agreed the others.
* Give reasons for it not being “reasonably practical” for you to pay that much (talk about them needing to promote wellbeing, social inclusion etc. – see Sect 8.2 of Statutory Guidance).
* Insist that they reconsider “disallowed expenditure”.
* Request copy of “financial hardship” policy

Useful information:

* NAFAO (National Association of Financial Assessment Officers) Guidelines / Handbook show how councils assess.
* <http://www.nafao.org.uk/uploads/guide/V5_COD.doc> (not sure how up to date it is).
* <https://www.milton-keynes.gov.uk/assets/attach/43524/NAFAO%20Guide%20to%20DREs%202017-18.pdf> (for example)
* Factsheet from REAL (Tower Hamlets) <http://www.real.org.uk/wp-content/uploads/2017/02/Reals-guidance-on-disability-related-expenditure-12-April-2017-PDF.pdf>

Campaigning against changes in Hammersmith and Fulham

* The then opposition party (Conservative) in Hammersmith and Fulham promised not to charge for care in their manifesto.
* Conservatives took power in Hammersmith and Fulham. A consultation was announced about charging for care and support.
* Local disabled activists form HAFAC and take legal action against charging.
* Court case launched and appealed by HAFCAC. Case ultimately lost.
* Successful in delaying implementation of charging for 2 years.
* Activists worked with the then opposition (Labour) to secure guarantee to withdraw charging.
* Labour regains power and activists hold Councillors to account.
* Hammersmith and Fulham is now the only council not to charge.

Questions and issues:

* Some of the issues some people are having is that they aren’t able to represent themselves well because of lack of training of finance officers, lack of being given the right information and support given, lack of being able to identify Disability-related expenditures.
* Not knowing to refer finance officer back to Section 8 of the key principles of the Care Act statutory guidance money for social inclusion and wellbeing.
* There was a recommendation to compile a list of what Disabled people had been allowed to include as “Disability related expenditure”, aiming to build a crowd-created resource for people to use.
* Assessment and reviews – facilitated by Mark Williams (Bristol Disability Equality Forum) and Tracey Lazard (Inclusion London).

Tracey Lazard: Firstly, the workshop Mark and I planned was for us to share some of the appalling practice that I’m sure some of you have been through and that we know is going on at the moment, in terms of the assessments and reviews that Disabled people are being forced through. The aim is to share experiences to see what common things we’re all facing and then spend the last part of the workshop thinking about what we can do to respond and how we can challenge the treatment that so many of us are experiencing when we’re assessed or reviewed. Ellen and Mark picked up on a lot of the issues that we’re hearing about through our Disability Justice Project at Inclusion London.

Common issues with assessments and reviews

* Increasingly intrusive assessments where people are asked to act out very personal care tasks so the social worker can check if they really do need personal assistance on and off the toilet for example.
* Putting in monitors so that social workers can check what a PA is doing and how many times they are moving in different rooms to support somebody.
* Push to get equipment as an alternative to human support.
* Twisting our definition of independent living, as seen in the Davey case recently that went to the Royal Courts of Justice. They’re saying, “a cut in your care package is really going to help you become more independent/ you need to be alone and that will help you build your confidence and independence”.
* Use of the argument that risks are part of independent living. Justifying a lack of support by saying risks are part of life (“if you’re going to fall, you’re going to fall”).
* Bureaucracy involved with occupational therapist assessments and completing diaries where you have to justify every second of your support package.
* How they describe needs so they can offer very limited support – for example, pre-payment cards.
* People aren’t given documentation so they don’t know whether they’re being given an assessment or review (completely going against the Care Act) which are two very different things, or should be.
* Local authorities trying to manage massive cuts – ultimately do they set an illegal budget or do they keep piling the cuts onto Disabled people in receipt of support.

Discussion – does this chime with own experiences? Sharing experiences of assessment and reviews

* Was on a decent care package of 30 hours a week and then forced to move to a new a local authority and the care package was not transferred – now only offered 7 hours a week.
* When ILF closed, initial assessment with a social worker and £300/ month cut from direct payment budget. Fought to get it back and only way to do so, as told by social worker, was to have a pre-paid card. Not happy as not given the choice in this at all.
* Intrusive hour by hour diary for two weeks.
* Moved to a different local authority, care package was not transferred. Previous LA paid it for 18 months, had to go 2-3 months without any financial support while waiting for new LA to complete assessment, had to go into debt in the process. Ended up in hospital seriously ill as care needs weren’t met. Need frequent support but only offered this provision in a care home – had to choose between a care home or inadequate care at home. Now been awarded continuing care funding but without an assessment. Facing regular serious ill health as direct result of needs not being correctly met.
* Caps imposed by CCGs.
* As an advocate’s perspective for Disabled adults and children, people are being put at risks from cuts to social care. People have to pay for community alarms. A way around the charging that many people don’t know about is providing enough evidence of additional costs because of your Disability, charging is waived. Seeing those with mental health conditions only being given support around a crisis, not beyond.
* Difficulties described of having both physical and mental health conditions and the assessment teams not working together. Refused to print the report from the assessment on grounds of “too much to print”. To get assessment and report from OTs, it’s very difficult. The link between housing and social care has now gone.
* Concerns about some recent judgements that Disabled people’s needs can be completely ignored, that strengthens local authorities even more. Disabled people can face huge bills from HMRC if they’ve not been given the right bills.
* Example of care package being cut by 48%. Went to protest at the local town hall, with the support of DPAC.
* Pre-assessment was carried out and details of extensive medication list given, this was not shared with assessor. Entire package was cut and the report was incorrect. After writing back to contest this, entire package was reinstated within a week from DWP. But the assessor maintained the judgment stands. In theory package has been cut but in reality, being paid still.
* After package was cut, asked social service for support. Was put into a care home but could only stay one night as they were dropped three times within one hour.
* Some individuals don’t have family to rely on to take to assessments and at the mercy of friends.
* Disabled people don’t necessarily know their rights, a collective voice is needed. DPOs are limited in the way they can work. It’s a lottery if you’re able to meet someone who can talk you through the system.
* Particular barrier if you are a parent of a Disabled child and knowing what your rights are.
* Question of how assessments can be zero if you were receiving support before? Dependent on who the assessors are on the day. Number of cases going to appeals and getting everything reinstated.

Mark Williams shared his story:

* Lives with 24 hour PA support, this has worked well for 24 years. With this support able to work as a trainer for social workers and as a school governor and active member of Bristol Disability Equality Forum, as well as being an active campaigner.
* Every 2 years for the past 10 years, has had a review and the 24 hour package has never changed. However, it has now been decided he needs more time on his own in order to build confidence (audience breaks into laughter as Mark’s confidence doesn’t appear lacking…).
* Asked to complete a 24 hour diary over two weeks, very hard to know how much detail to put in. Diary ended up 29 pages of daily activities including very private details of Mark’s life. After a lot of stress and work handed over to social worker, who has been off sick since. Feel very anxious about what the final judgement will be. Mark has found the process very undermining.

Solutions:

* Group complaints on behalf of service users, where assessments are being carried out properly.
* Service-user-led mutual support group with the aim of sharing stories and support in local areas. Huge amount of expertise about these processes that we can share with each other.
* We need to work on how we share knowledge, without relying on local authorities for funding as they can dictate what information you share. Suggestion to lobby the EHRC to fund DDPOs to share information. We need to fight to empower and up-skill Disabled people through workshops etc.
* Demanding statutory requirement to fund DDPOs for advice and advocacy so that these organisations aren’t silenced. Ask for advocacy to be valued and funded independently.
* We should be challenging intrusive assessments under the Right to Private Life. Need to learn our rights under Equalities Act, Human Rights Act, Convention. The Equality and Health Commission are looking to firm up the right to independent living as it isn’t working at the moment.
* We need to reach people who are marginalised and isolated – Disabled people need to go to places we wouldn’t normally go in order to let people know their rights. This could be institutions for example; unless we start doing this, no one else will be reaching out.
* Use upcoming local elections to work with local councillors.
* Develop a factsheet of rights.
* Develop local lists of solicitors and advocates.
* We need to control and communicate our definition of independent living.
* To counter social workers subverting our definition of independent living, focus on peer support groups online and in local groups.
* Hourly rates and recruiting personal assistants - Facilitated by Ellen Clifford (Disabled People Against Cuts) and Robert Punton (Disabled People Against Cuts)

Barriers:

* Local authorities are not prepared to make an increase to the direct payments in line with the National Minimum Wage.

Pensions:

* Some local authorities expecting this to come from within existing Direct Payment amount.
* Northamptonshire County Council is covering the cost of pensions but it’s tied to in-house payroll service. There’s a lack of choice in providers.

Hourly rates:

* Not competitive enough to attract staff.
* Set rate regardless of complexity of needs and type of support required.

Problems recruiting:

* Lack of understanding about the role of Personal Assistant.
* Numerous unsuitable applications from people forced by JobCentre to apply or else they’ll be sanctioned (the new “fork lift truck drivers”)
* Lack of interest – unable to fill all hours that support is paid for.
* People coming into jobs with patronising care mentality from care agency backgrounds.
* Difficulty recruiting personal assistants.
* No care progression.

Solutions:

* Raise the profile of Personal Assistant to be a valued role.
* Explore systems for introducing some career progression – e.g. a more senior personal assistant with some admin responsibilities.
* Training in social model of independent living.
* Solutions must be designed jointly between Disabled people and personal assistants.

**Afternoon workshops – the way forwards**

* Alternative models of independent living - Facilitated by Steve Graby (Manchester Disabled People Against Cuts).

Problems with individual employment of PAs

* Administrative barriers.
* Recruitment and retention of PAs.
* Need for support with relational aspects (e.g. how to manage the relationship between PA and employer).
* Legal liabilities.
* (Increases in funding could help with some of these problems, but not with all – need for some alternative possibilities…)

Other possible options

* Local authority being legal employer of PAs? Would this mean loss of choice and control?
* DPOs as employers? This was done in some “indirect payment” schemes that existed before the Community Care (Direct Payments) Act 1996, and in a few cases after it (e.g. Derbyshire CIL). However, DDPOs no longer exist in many areas and those that do may not have funding or resources to do this.
* Changing employment laws? This may result in PAs having fewer rights than other workers and thus even greater recruitment/retention problems.
* Budget pooling? Many admin and legal issues would remain.

Co-operatives

* A business or organisation collectively owned by its members. Members can be workers, consumers, people living in housing, etc. Members can all be directors or can elect a board of directors
* Values of co-ops have a lot in common with those of the Disabled People’s Movement – e.g. “nothing about us without us”.

How co-ops could work in personal assistance: possible models

* “Consumer” co-ops owned by Disabled people/service users (as in Sweden and Norway).
* Workers’ co-ops of PAs/support workers – some small-scale examples already exist in England and Wales.
* Multi-stakeholder co-ops?
* All these models have advantages and disadvantages.

Example 'consumer' co-op: ULOBA, Norway

* National in scope.
* Also a campaigning DDPO.
* Social model philosophy.
* Promotes independent living and personal assistance to Disabled people and to local authorities.
* Disabled people can choose between membership of ULOBA, individual employment of PAs or using directly provided LA services. [**www.uloba.no/en/**](http://www.uloba.no/en/)

Example 'consumer' co-ops: STIL and JAG, Sweden

* Most PA co-ops in Sweden are local in scope; STIL in Stockholm is the oldest and best known (founded by Adolf Ratzka). www.stil.se/en/
* JAG is a national PA co-op specifically designed for people with multiple impairments including learning difficulties. Founded by parents, legal guardians on board and a ‘service guarantor' system.

Workers' co-ops in the UK

* Examples include Sunderland Home Care Services, Care and Share Associates (across Northern England), Leading Lives (Suffolk).
* Some (e.g. Leading Lives) are former council services which were bought out by their workers when they were privatised.
* Not usually DDPO connected.
* Essentially care agencies from a service user point of view (though may be better than other agencies).

Example multi-stakeholder co-op (in development): CareShare in Hebden Bridge, West Yorkshire

* Recently started and details of how membership will work are still being worked out.
* Aim to have both support workers and service users as members.
* Also potentially involving peer support groups and volunteering/“time banking”.

Advantages and disadvantages of different co-op models

* Consumer co-ops:

+ Retains choice and control while removing administrative burdens

- May not be a better deal for PAs as workers

* Workers’ co-ops

+ Better for PAs as workers

- Does not necessarily give disabled people choice and control; essentially an agency controlled by its workers

* Multi-stakeholder co-ops

+ Has at least some of the advantages of both worker and consumer co-ops

- Untried; unclear how to balance different classes of members

Other ways co-ops could be used by/for disabled people

* Housing co-ops. Historical example: Grove Road project, Derbyshire. Taking over “care homes” and turning them into co-ops?
* Workers’ co-ops. Some former Remploy workplaces e.g. Enabled Works in Leeds
* Many other possibilities?

Limits of co-ops

* They do not create funding! Therefore do not necessarily replace (other) DPOs.
* Who is eligible to be a member? Eligibility for direct payments. Could 'self-funders' be members?
* The scale question.

Thoughts about the potential applicability of co-ops to the UK

* Fear that anything other than individuals directly employing their PAs could result in a loss of control
* Question raised about the advantages of instead setting up a national body that employed all PAs
* Interest in piloting co-operative models in the UK
* Independent living support principles – facilitated by Mark Harrison (Equal Lives/Norfolk DPAC) with a presentation by Zara Todd (European Network on Independent Living) on ‘Lessons from Australia’s National Insurance Scheme’

Principles of Independent Living

* Not just social care.
* How to get wider buy-in?
* Australia:
1. No charities
2. Strong DPO’s funded by government
3. Tax increase for independent living
4. Good buy-in from population
5. Parents of young disabled people saying will lose out – high levels of support in institutions
6. Fear of £ limit for support needs
7. DPO’s do systemic advocacy – individual advocacy done by PDN disabled people

How campaign in national population?

Every Australian counts – framed as positive for every Australian

Based on 12 pillars of independent living:

* How to lead fulfilling lives?
* Planning/ assets – implementation. More time; who does it? Not what can’t do, need to assess what people can do with support
* More autonomy and transparency
* More emphasis on leisure and well being
* Mental health not used against people to negate support – functioning conditions – mental health and progressive diseases
* Focus on support needs – wider population (get away from rationing) scarce resources
* Independent living not just social care – need to be aware and owned by wider population
* Need to know our rights
* Life-long service, cradle to grave
* Need independent living principles built into professional teaching
* Prevention – restore services for low/ moderate needs across physical and mental health
* Women’s unpaid work – relying on carers – no living wage
* Representation – sort your own care new system needs to support not add pressure
* Employ family members if necessary with proper safeguards
* Simple appeals system
* National bank? – taken away from local authorities
* Need proper living wage
* Need to talk about personal assistants, not carers
* Not treated
* Equal living
* Intersectional approved
* Our lives are our own and nobody can take it away from us
* Campaigning for the right to independent living – facilitated by Tracey Lazard (Inclusion London)

Right to independent living

* UN CRPD art 19 definition
* Legal right in domestic law that is enforced and followed
* Free at the point of need

The right time: UN / Social care high on the political agenda / Labour, Green parties signed up to enshrine UNCRPD / Article 19

How can we get there? Different ways of campaigning

Campaigning is absolutely critical

* Understand current rights eg CA, HRA and EA to push our definition of independent living eg CA well-being and statutory guidance
* Use our rights; advice /advocacy, peer support, our own assessments and reviews, complaints
* Promote our rights using training & briefings to Disabled people and decision makers
* Strategic litigation

How can we get there? Different ways of campaigning

Elections & lobbying

* Elections & lobbying
* Window of opportunity where candidates are looking for votes and will make promises
* Agree demands & questions for candidates / write a manifesto
* Present demands to political parties, organise hustings and take part in other hustings
* Ask candidates to sign up to support demands in public meetings in writing
* Lobbying elected representatives : local councillors, MPs, mayors and parties

How can we get there? Different ways of campaigning

Gathering evidence – As well as the UN observations, the Equalities and Human Rights Commission have just launched their report on the cumulative impact of welfare reform and that’s absolutely clear in black and white; Disabled people are being disproportionately impacted. The higher your support needs, the higher the loss of income. There’s a lot of that hard research but in campaigning it’s also very much about gathering our own stories. At a local level using that in the media and with the decision makers – particularly the media, they love a personal story, we just need to make sure we link it up with the analysis and that we’re clear on what we want. At the beginning of the journey with the ILF the media wanted to go and speak to the non-Disabled CEO of Scope and they started to realise they need to come and speak to us and ILF users but they’re still stuck at wanting to talk to Disabled people for the stories and they go somewhere else for the policy analysis. We need to be able to do all of it.

Brian Hilton: One of the things I find difficult in our campaign is that we’re trying to campaign for independent living and we trying to make the distinction between independent living is not the same as getting out of bed in the morning and getting your arse wiped. It’s hard to do that because some people are even struggling to get that basic support. One of the difficulties is getting that message over, what is increasingly being offered by local authorities, so called “clean and feed” routines, can be as little as 15 minutes and that’s looking like it’s our future. That’s not independent living, that’s barely surviving. How do we communicate that?

Tracey Lazard: I think that is a real challenge, how do we communicate independent living? And how to we not fall into other traps like describing Disabled people as automatically vulnerable.

How can we get there? Different ways of campaigning

Taking part in consultations – It is shocking to find out the Green Paper on social care is excluding working age Disabled people and we’ve got to challenge that. (Question from the floor – how?) Using lobbying, taking part in that consultation and saying how totally inappropriate it is to not include working age Disabled people. We’ve got to use all of these tools.

How can we get there? Different ways of campaigning

HAFCAC – Kevin Caulfield from Hammersmith & Fulham Coalition Against Cuts was going to come and talk about the amazing work HAFCAC have done. It’s an amazing example of a small group of disabled activists making huge change using lots of the options just discussed. There’s a lot we can learn from HAFCAC and there’s real co-production going on that we need to use as an example and lobby for.

Hammersmith and Fulham wanted to institute charging under the previous Conservative council. HAFCAC, a small group of Disabled people, was formed to challenge that and they used the legal routes and took the council to court and challenged their right to charge for home care on the grounds it was discriminatory under the Equality Act and public sector duty. That managed to delay the implementation of that policy for two years. Firstly, that saved local Disabled people a lot of money but also it, very importantly, raised the profile of charging and Disabled people in that borough. They gathered lots of evidence and got a huge petition and maximised the local democratic opportunities to watch and contribute to debates and show the petition to the local politicians. Crucially they built up a very close relationship to the local Labour Party who were in opposition at the time who signed up to abolish local charging.

They then worked together on Operation Disabled Vote to get Disabled people in Hammersmith & Fulham out and voting. They weren’t recommending which party to vote for (though they had a lot more independence as an activist group than the local DDPO). They went out to raise awareness of what the different parties stood for and the evidence spoke for itself. Labour then got in in Hammersmith and Fulham and went on to abolish charging – the only local authority to do so. They also committed to ring-fencing independent living funding and they then initiated a Disabled People’s Commission and that has just come up with a whole set of strategic recommendations for changing the way services are designed, run and delivered, with Disabled people being at the heart of that. So there’s really exciting work going on there and that’s the result of a small group of activists.

A few tips from HAFCAC:

* Be fearless, we only live once
* Make sure you have a really independent campaign group that can be fearless in relation to those in power
* Build relationships with local politicians where you can never know what might happen
* Remind politicians often we are local residents (generally here to stay), voters and you need to listen to us
* Make good connections with lawyers if you can
* Stick to your aims/ message if it seems unlikely you will achieve them
* We were told by a council leader in a council meeting “you need to start living in the real world, there will never be no charging”
* Laugh occasionally

Campaign objectives and actions….

* Are we clear about what independent living means? Do we communicate this? As Brian said, it’s increasingly about functionality. The ILF is over and that was the thing we could point to and say this is what we mean by independent living – support that you were, to a greater extent, in control of
* What are the arguments for independent living and the legal right to independent living? If we were in a lift with a decision maker, do we have five clear points to convince them?
* Do we have a clear agreed independent living goal and how do we get there?

Tracey Lazard: Those are just some of my points to consider but you may disagree with. Using some of the tools I’ve just talked about (local elections, solidarity, lobbying, using the media etc) what do we need to do over the next year?

Mary-Ellen Archer: I think one of the things would be reaching the Disabled people who aren’t involved yet and don’t know that they have a voice and can use it. How do we find them? In Hounslow for example, my MP wrote to the council and found there were over 40 people who were ex-ILF users. It’s not just about lobbying the government and the councils but lobbying Disabled people themselves and their families to all get behind this. As long as it’s just a minority of us speaking, they can ignore us.

Sarifa Patel: I agree with what the lady before said but I also think it’s about Disabled people not knowing their rights or having the confidence, knowledge or willpower because they’ve been crushed and crushed and crushed. We’ve got to work with them to give them their voice back within their own local communities to help them, nurture them and educate them on their rights so that they do then join us in our struggle for independent living. I think it’s also about the terminology and sometimes we get caught up in the terminology we use. What do we mean by independent living? This is especially true if you have English as a second language or communication needs. How do we reach out to people with learning disabilities? Only 3% of people are in a marriage compared to 70% of those without learning difficulties. Also in the Labour Party only have 4% of Disabled people as members, where’s our representation? They say they want to help us but why aren’t they helping Disabled activists into politics? We need to lobby for change there.

Mark Williams: We need to work with work with ADASS to write a paper on what it means to live independently and make sure that is on the table at every meeting. And after every DDPO needs to commit to it.

Tracey Lazard: Do you think in order to lobby ADASS (Association for the Directors of Adult Social Services) we probably need to do the same for the Equality and Human Rights Commission, let alone the politicians. Do you think we should do a piece of work around independent living and come up something that would be short, sweet and compelling as long with a more detailed set of proposals. Do you think we need a communications strategy?

Mary-Ellen Archer: If the definition of independent living is being understood as getting someone up, putting them to bed, giving them one hot meal and leaving them in nappies for the rest of the day, then we need to take that back. That’s not independent living, that’s not even living.

Tracey Lazard: So we need to look at how we communicate our view.

Mark Williams: Can we make sure that every area takes this on board?

Tutiette Thomas: I’m trying to understand the psychology of someone going into social work with a passion for making people’s lives better and they become complicit in a system that makes them assess people inhumanely. I found the British Association of Social Workers and I they have an article “the Care Act is helping but cuts and lack of resources are limiting true potential”. This is a survey they did. Perhaps there’s an opportunity for an alliance. Social workers are people too and may have disabilities – hidden or not – and they see how perverse the system has become working from the inside. Perhaps there’s some potential there?

Tracey Lazard: I think that’s absolutely key, that we build allies. I know there are a number of social work networks that DPAC are working with. There are many social workers who are not happy with what’s going on, absolutely.

Fran Springfield: I just wanted to come back to the Labour Party. One of the problems that Disabled members have faced recently is that Disability Labour (the main affiliated society for Disabled people) has not been proactive in challenging the Labour Party. Which is why I, and a whole group of other people, got together to create D.E.A.L. (Disability Equality Act Labour) which is about making the Labour Party compliant with the Equality Act. There’s a website, there’s leaflets. We are not sitting down quietly to do this.

Tracey Lazard: That’s really interesting. The Equality Act doesn’t really have anything on independent living – do we need to get all the networks we work with to agree to asking for Article 19 and the right to independent living as one of our key asks? Whether we’re involved with trade unions or consultations to the mayor so that we’re all signed up to this.

Fran Springfield: One of the other points I’d like to mention is my re-assessment with a social worker recently. They were also Disabled but could not understand why I could safely drive a car but I can’t pick up and carry a hot cup of tea without scolding myself. Sometimes even having a Disabled social worker doesn’t enable them to understand the situations that you’re facing everyday.

Adrian: In terms of disseminating this information, the first port of call for people is often the Citizens Advice Bureau. If they could be made aware of what independent living is so that they can pass it on at the ground level across the country. Also there needs to be something in terms of a social security system, it’s not accepted by estate agents or landlords any more, it’s not seen as real money. Universal Credit has created real problems there. In employment you have Positive About Disability, if you could have something Disability positive that estate agents could sign up to, some sort of voluntary policy to make adjustments to people’s homes for example.

Tracey Lazard: There are lots of problems with those schemes. The Disability confident thing for employers I would say is not meaningful in any way and it gives cover to the government to say that there is something being done. It’s all self-assessment, there’s no actions that need to be done. It’s window shopping I would say.

Mark Williams: How can we be involved?

Tracey Lazard: Everyone who is here is already linked up in some way so we would be the core group. I guess it’s about how we spread the word. Reflecting back on the discussion up to now we have:

* Honing our definition of independent living and developing a communication strategy so we get that out
* Signing up to that so that we could show how many of us are signed up to our definition of independent living
* Building alliances, whether that’s social workers, human rights organisations or other agencies
* Lobbying with politicians and increasing our representation and visibility in everyday life
* Getting political parties to sign up to independent living and getting them to co-produce policies with us

Fran Springfield: I know that when the Labour Party manifesto was being produced they did actually come out and speak to quite a lot of Disabled people including myself. Certainly the mini-manifesto for Disabled people that had the line “nothing about us without us” was written in consultation with various Disabled groups within the UK, especially DPAC.

Tracey Lazard: John McDonnell did come out and say he would share power with us but that needs to happen now, not once they’re in.

Sarifa Patel: We mustn’t forget the young Disabled people, we need to be empowering them. We need to listen to their needs. At grassroots level a lot of them aren’t getting their needs met in education for example and then they’re not being empowered, they’re being crushed. We should mentor and support them otherwise we won’t have the next generation of us to take our struggles forward.

Tracey Lazard: On a positive note, there is a huge mobilisation of Disabled people; we’re by no means a minority. Compared to where we were 8 years ago, when the ILF was beginning to be restricted, there was no one challenging that. We’ve done a huge amount of work. If you look at the UN and the profile that Disability Committee’s concluding observations had – by no means as much as it should be – it did get media attention. We’ve done an amazing amount and we need to continue finding the energy and engaging with new people.

John Pring: Is there a way we can get a central pool of PR support for all Disabled people around the country? If then they want to campaign there’s something to draw on? If there’s a DDPO in Newcastle or maybe some areas that don’t have that kind of resource they could get some funding for that and collect all these independent living stories as well. So the mainstream media knows if they want a story there’s one place to go and they can get a story from that particular place. I don’t know if that’s realistic.

Obi: I was wondering is there a place where Disabled people can go to a workshop and find out there rights?

Tracey Lazard: There’s not one simple answer. DDPOs should have the capacity and resources to go into care homes and institutions to develop that work. (Directing answer to John Pring) I think if we want to develop a communications strategy, it then begs the question how we implement it so I think that’s a very good idea. There was a “frequently asked questions” guide that came out of the #SaveILF campaign that was shared quite a lot and the network here is one hub to do that. Any other final campaign actions?

It’s just a thought, I’m afraid it’s not very constructive. Going back to what was said earlier about empowering young people, the people who are employed to care for my son are having the most appalling difficulties. We have such gifted people working for us who should be earning far more – it’s part of a wider problem that young people are facing.

Tutiette Thomas: Perhaps it would be get one of the architects of the Care Act, Norman Lamb, involved?

Tracey Lazard: He has become a lot more passionate now he’s not in power. We met with him and he argued that there wasn’t a need to have an independent living principle and that the wellbeing principle would cover it. But we did end up getting it in the statutory guidance. He was also very clear about getting the number of people with learning difficulties out of assessment and treatment units… but the number has gone up. He is a useful and high profile spokesperson now for challenging the current situation. There are around 90 MPs calling for cross-party conversations on social care so we could look at working with them.

John Pring: I did propose a National Independent Living Service as opposed to a National Care Service at a previous Liberal Democrat Party Conference and he seemed to think that was a good idea. So he might be open to ideas.

**Closing session**

**Workshop Feedback**

* Charging

Jenny Hurst: People are essentially being charged 3 times. Social care is funded through: general taxation, council tax and charges to the individuals – although this is discretionary and local authorities don’t have to charge, it is their choice. Councils are allowed to use the “social care precept” – an additional amount on top of council tax – but not all choose to do so. If you don’t want to pay the full costs, you can ask for a financial assessment. Some of the issues some people are having is that they aren’t able to represent themselves well because of lack of training of finance officers, lack of being given the right information and support given, and lack of being able to identify Disability-related expenditures. As well as not knowing to refer finance officer back to Section 8 of the key principles of the Care Act statutory guidance money for social inclusion and wellbeing. There was a fantastic recommendation to compile a list of Disability related expenditure, what people had had allowed as disability related expenditure – aiming to build a crowd-created resource for people to use.

* Hourly rates and recruiting personal assistants

Robert Punton – We had a very small group where we discussed the problems of recruiting. Based on the hourly rates, how can we recruit and keep our staff? There were some stories about what really happens – basically it’s hard to keep a relationship going with your PAs if they’re worried about their jobs. We need to give people the space and time to allow them to develop.

Ellen Clifford- Some of the barriers people talked about where, for example local authorities not being prepared to make an increase to your direct payment when the national minimum wage goes up or cost of pensions. Northampton County Council are doing this however but that’s tied to using the in-house payroll service. Unsuitable applications coming in from JobCentres because threat of sanctions if jobseekers don’t apply. People are finding both unsuitable applications and not enough PAs to cover the hours they are funded for. In terms of solutions, discussed a need to create a broader understanding of what personal assistance actually is and for it to be profiled as a valuable profession.

* Alternative models of independent living

Ellen Clifford: People were saying that whatever model you have in place, you need funding in place, that’s what’s the priority and what is needed. Coops could provide options for people who don’t want to have to carry all the responsibilities of employing someone – administrative work and legislation – so there was interest in exploring different models that could take over those responsibilities to reduce that risk and also help with recruitment as with the coop model you could have a pool of PAs whereas individuals are finding it difficult to recruit. So people are interested in looking to continue to look at different options but the priority is on funding.

* Independent living support principles

Michelle Daley: First of all we looked at what’s not working, then we looked at the Australian model which Zara gave a brief presentation on. So we looked at independent living beyond social care, we also looked at assessment and had a discussion around the need to look at intersectionality. We looked at independent living principles. We also looked at the need to have consistency around language; we need to be clear on when we use personal assistants rather than carers. Another point was made around whether we use equal rather than independent living, i.e. independent living should be for everybody. Had a discussion around getting independent living out there so it’s not just us discussing it, that everyone knows about it. Making sure that there’s a decent wage for personal assistants. Another point was around making sure we think about the assessment process and resources being drained in that. We want to see Disabled people taking the lead in that, rather than it being driven by professional bodies where many different people are involved in the assessment which might not be worth £50 at the end of it. Overall, we’re saying let’s draw on the principles that are there, making sure we think about the value of independent living and getting independent living outside these four walls.

* Campaigning for the right to independent living

Tracey Lazard: Funnily enough we came up with some similar conclusions in our own workshops. One of them was absolutely about engaging with our people and further mobilising disabled people – particularly those that are locked away and shut up. The need to communicate independent living. It came back to the question, “If we were in a lift with the Prime Minister for five minutes, what would we say?”. What’s the pitch? What would communicate about independent living? The problem is we have our own jargon that we use that isn’t clear to others. For instance, we talk about the twelve pillars – people might think we were talking about a building. We have to be really clear and compelling about how we describe IL. And also PAs, the role of PAs, the social model of PAs. We also thought we should develop a method of communication strategy and think about how we implement it. Idea that we should have a hub – whether that’s us in this room – where we try and implement that strategy, communicate our messages and arguments, share those stats, share and build that evidence so that we’re the most effective communicators and champions of independent living. Then we need to sign up, so that whatever networks we’re engaged in, whatever particular issue or subject we’re signed up to promoting and lobbying on independent living as well. It’s also about building alliances – whether that’s with social workers who are sick to the back teeth of implementing this gate-keeping service, or whether it’s other advice services – we need to keep building those alliances. We need to be doing some concerted lobbying. In London for instance we have the local elections, we need to be out there with some clear asks about independent living. There are 90 MPs who have signed up requesting a cross-party commission on social care. We need to be speaking with and influencing them. Lots to do with regards to a lobbying and democratic point of view.

**Next Steps**

Linda Burnip: I want to talk more about communication. I agree we need a definition of independent living but if we’re going to ask the general population to pay more taxation as we’ve discussed, we’ve got to make it understandable to them. A lot of our jargon isn’t understandable to them.

Attendee: This issue of making the general population aware is so, so important. It will be interesting to look at different ways of communicating that information. For example, documentaries, if you were to take the day-to-day life of a person who has all of the cuts imposed on them and take a social experiment, and take a non-Disabled person through the process of having their lives scrutinised and justify what they do on a day-to-day basis and completely flipping that around and making it something that’s accessible and they understand. If I leave my house in the morning and I say I’m going into London today, if I change my mind at the last minute I can go from taking a train to a bus to whatever, a tram, and I don’t have to justify that decision to anybody. I saw a lady at my local station try and get on a train and somebody said to her, “did you phone ahead, in advance?” – and that’s outrageous. Taking that average day for a Disabled person and getting non-disabled people to go through that to see what is it like what is like to fight for the right to independent living, to fight for the right to live. It shouldn’t be a battle, we shouldn’t be having this conversation. And if more people knew we would find the same mobilisation that you get around the LGBTQ+ community where you find people under than umbrella but also people who are not, but people who believe in those issues. This is not an issue just for Disabled people, it’s a human rights issue. If we were to unify to make it’s accessible we would find people out campaigning.

Tracey Lazard: One of the things that came up in our group is that it’s increasingly hard to communicate; you’re talking about the right to be spontaneous. Too often now things have been narrowed to functional stuff, like can you go to the loo, have you had a hot meal today and we have to challenge that. You only live once and we should be able to have a quality of life and spontaneity.

Mark Williams: When I had to do my daily diary, I found it very hard to think what to write. I had to justify ever hour of every day. And that’s not independent living.

Daphne Branchflower: It’s terrible when people have to justify why they need to put their coat on, I’m getting to the stage where I’ve got to do that. I’m getting to the stage where I’ve got to do that with my current PAs. While I’ve got the microphone I’m going to say, right at the beginning – and I’m talking about the 1990s now – we should have, rather than accepting the watered-down Disability Act in 1995, we should have pressed and pressed to force the right. Maybe if we did that we wouldn’t be sitting here. We’re going over old ground, we’re going backwards and trying to come forwards again.

Michael Nagle: We need to fill in the gaps where the holes are, and then present it to the government.

Carlo Salvatore: You expressed that we should have got out there, Daphne, but we did and it was called DAN. We do need to get out there again and make sure it’s getting out there wider and it’s not always the same people doing it. What we see now see now, and what this has been mounting up to, is a form of social apartheid. It’s everything we’ve been talking about, but when it boils down to it, it is social apartheid and that’s what we need to resist. Be it with information, be it with training, be it with skills sharing. Not everyone can get out there on the streets, but we need to be a lot more forceful with the gullet of everything that we do.

Tracey Lazard: As the conference is coming to a close we should take heart at the last seven years. We’ve had some real wins, we are sharing information and up-skilling ourselves and it’s about building on that and we should be confident that we can do that. And when I say ‘we’ it’s probably only going to be us, we’re one of the core groups in this room and we need to be going out and engaging more Disabled people in the movement.

Robert Punton: I’d just like to finish by saying that we’re just ordinary people, just trying to live ordinary lives but we’re having to do extraordinary things to do it.

Tracey Lazard: It would be good to check things over with everyone. There’s quite a lot of information that’s come out of today which we will write up and send out to you all what we think are the key campaign objectives and actions and ask if that’s your understanding and if you’re happy to sign up to them. But also we need your suggestions about how we make that happen. Because if we’re all going to sign up to something we need to own it, and think about how can each play a part in making that happen. So when we’re here next year we can push forward with our agenda again. So when we send this out we’ll be saying, tell us how you can make this happen where you are.

Mark Williams: Will the information from today go on the website and by when?

Ellen Clifford: We’re probably looking at January, we’re looking at the ROFA website, the DPAC website the Inclusion London website and it will be jointly owned with the organisations represented here today.

Finished with a final thanks to all who came today

**Close of conference**

**List of Attendees**

Aidan Johnson

Andrew Lee

Anne Pridmore

Ariane Sacco

Arjun Harrison-Mann

Ben Redgrove

Brian Hilton

Carlo Salvatore

Christopher Smith

Claire Glasman

Daphne Branchflower

Dinah Murray

Eleanor Lisney

Ellen Clifford

Ellen Morrison

Elsa Jarmock

Fran Springfield

Gabriel Pepper

Gary Powell

Hamida Patel

Heulwen Baworowska

James Deane

Jenny Hurst

John Pring

Lakhvinder Kaur

Linda Burnip

Mark Dunk

Mark Harrison

Mark Williams

Mary Ellen Archer

Mat Chad

Michael Nagle

Michelle Daley

Nancy Wasker

Penny Ledger

Penny Pepper

Rob Punton

Roxanne Homayoun

Sammi Strong

Sarifa Patel

Shama Alam

Sorena Francis

Steven Graby

Sue Elsegood

Susan Brompton

Susan Brown

Tracey Lazard

Tracey Lazard

Tutiette Thomas

Wadiha Ahmed

Yasmin Anderson

Zara Todd