

Merton CIL 2018-23 Strategy



About Merton CIL

Merton Centre for Independent Living (Merton CIL) is a local Deaf and Disabled user-led organisation. This means that we are run and controlled by Disabled people.

Merton CIL was established in 2008, incorporated as a company in 2011 and registered as a charity in 2013.

Our vision is to enable Deaf and Disabled people to take control over their lives and achieve full participation in Merton and wider society.

At Merton CIL our aims are to:

- Promote the independence and inclusion of Disabled and Deaf people in Merton
- Identify and challenge discrimination faced by Disabled and Deaf people
- Encourage Disabled and Deaf people and supporters to achieve change locally



Our values as an organisation were developed with members and service users:

Be Person-Centred

This means we will put you first and we will take an holistic, whole person approach. We will use active listening to find out



Be Welcoming

This means being friendly to you when you come to see us or call us. It means we will try to help you feel comfortable and we will be positive and do our best.



Value people's lived experience

We are a user-led organisation. That means we are run by, and for, disabled people. We believe that our shared experience means we can support you better.



Learn

We will always try our hardest to get things right, but no one is perfect. If things go wrong, we will try to learn from that and do things better next time. We will take an evidence-based approach to our work.



Be Fair and Inclusive

We will be there for people across the full spectrum of disability, no matter who you are or where you are from, across all strands of diversity. This means that no one gets special treatment, and no one gets worse treatment because of who they are or who they know.



Fight for justice We are passionate about supporting you to stand up for your rights. We will challenge discrimination. We will support you to say what you want and need.

Be Compassionate

We will show empathy for what you are experiencing and we don't judge you. We don't do sympathy because it is judgemental. We work within the social model of disability, not the medical model.

Our Independence Charter was developed with members and service users and represents our commitment to how we will work with people



Our Strategic Priorities 2018-23

Our Strategic Priorities for 2018-23, based on what our members, service users, staff and supporters have told us, are to deliver for local deaf and disabled people:

- 1. Increased financial security and resilience
- 2. Greater ability to live independently
- 3. Being able to live safe and well

An underpinning (internal) priority is to be a sustainable and accountable organisation and to work in line with our values.



We will have a number of areas of work under each strategic priority in order to be able to deliver it. These are:

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Strategic Area 1: Increased financial security and resilience



Priority 1: Increase our Advice and Advocacy support around benefits and grant applications, assessments and appeals and tribunal representation. Offer more support with budgeting.

Priority 2: Continue our policy work around emerging financial issues such as inaccessible assessment centres, access to banking, responding to consultations around benefits.

Priority 3: Offer face-to-face Debt Advice work from 2019. This will require training and/or specialist recruitment, as well as registration with the Financial Conduct Authority (FCA)

Strategic Area 2: Greater ability to live independently



Community Care:

Priority 4: Increase our Advice and Advocacy support around accessing and navigating community care, including assessments, financial contributions, care plans, support with adaptations.

Priority 5: Continue our policy work around local authority policies and processes,

including budget setting for Adult Social Care (ASC). Continue working with Health and Social Care (HSC) Forum, ASC Task Group, Direct Payments (DP) Forum, etc to increase the voice of disabled people

Housing:

Priority 6: Continue our Advice and Advocacy support around housing including preventing homelessness, and arrears

Priority 7: Increase our policy work around housing including regeneration, homeless policies, supported & residential living

Young Disabled People:

Priority 8: In 2018 begin new policy work with young disabled people to find out what they want and need

Priority 9: In 2019 develop Advice and Advocacy support services for Young Disabled people. This may be around transition, depending on what young people tell us in priority 8.

Independent Living:

Priority 10: Develop a new Independent Living toolkit and support group to build confidence and community connections. Group supported to co-develop an Independent Living campaign theme.

Priority 11: Increase our policy work promoting independence and the social model, including working with the Independent Living Strategy Group (ILSG) and training local partners

Strategic Area 3: Being able to live safe and well



Access to healthcare:

Priority 12: Increase our Advice and Advocacy support around accessing healthcare, such as attending GP appointments, accessing transport for appointments, accessing CHC or PHBs.

Priority 12: New policy work around health, such as addressing CHC or prescription policies and engaging with the CCG

Hate crime prevention:

Priority 13: Continue our Advice and Advocacy support around hate crime reporting and prevention.

Priority 14: Continue our policy work ensuring hate crime is understood and addressed across the borough, including sitting on SNB, IAG, Hate Crime task group, etc

Celebrating achievements

Priority 15: Continue to celebrating disabled people's voices and achievements, including celebrating 10 years of Merton CIL in 2018.

Strategic Area 4: Be a sustainable and accountable organisation, and work in line with our values

Priority 16: CEO leading the organisation and working on sustainability including business planning; income generation and contracts; capacity building trustees; M&E and financial reporting

Management and support systems:

Priority 17: Service Manager ensuring quality service delivery, complaints, safeguarding, M&E, frontline staff management, volunteer management.

Priority 18: Office Manager responsible for smooth running of day to day including reception, supplies, health and safety, communications, financial monitoring

Priority 19: Good quality external support systems including external M&E, IT support, HR support, accountancy support

Creativity:

Priority 20: Ideas lab! Allow staff 1 week a year to work on personal projects related to Merton CIL which staff feel have unmet need or potential. This allows us space to be creative and open up our future strategic development

Appendix 1: Abbreviations

ASC BSL	Adult Social Care British Sign Language
CCG	Clinical Commissioning Group
CEO	Chief Executive Officer
CHC	Continuing Health Care
CIL	Centre for Independent Living
DP	Direct Payments
FCA	Financial Conduct Authority
FTE	Full-time Equivalent
GP	General Practitioner
HR	Human Resources
HSC	Health and Social Care
IAG	Independent Advisory Group
ILSG	Independent Living Strategy Group
IT	Information Technology
M&E	Monitoring and Evaluation
MP	Member of Parliament
NHS	National Health Service

- PHB Personal Health Budget
- SNB Safer Neighbourhood Board

Appendix 2: The Social Model of Disability

The work of Merton CIL is underpinned by a commitment to the Social Model of Disability. This recognises that society creates disabling barriers through attitudes, environment, or organisational structures which don't consider Disabled people's needs. We recognise that some Disabled people require additional support to navigate the barriers created by society, claim their rights, and access services they want or need. Merton CIL's role is to challenge and remove the barriers and in doing so create opportunity, access and inclusion.

As such, we will support any individual who identifies as a disabled person. We do not ask for proof of disability such as receipt of benefits or doctors' letters, nor will we impose eligibility criteria which limits services to people with greater need. This is because we have identified that disabled people often struggle to access the support to which they are entitled, and that constantly asking people to demonstrate their disability is deeply disempowering.

We will work with people across the full spectrum of disability, including people with visual or hearing impairments, long term ill-health, learning disability, mental health service users and survivors, people with a physical disability, etc

We will also welcome people who are deaf, and people on the autistic spectrum if they want us to, even though they may actively identify as non-disabled people.

It is important to us to ensure that disabled people have choice and control, and this means that we do not undertake uninstructed or best interests advocacy for people who lack capacity.

Appendix 3: Merton CIL 2017 Summary of strengths, opportunities, weaknesses and threats

The strengths and weaknesses columns reflect our internal position and what we have learned from our experiences to date while the opportunities and threats column reflects external pressures and what we anticipate in the future.

<u>Strengths</u>	<u>Weaknesses</u>
User-led organisation, run by Deaf and Disabled people, so we have greater understanding of issues and possible solutions for disabled people	Demand is high which means we have to operate a waiting list and can't help everyone
We are open to all Disabled people across the full spectrum of disability and do not apply eligibility criteria	We need to be clearer how we prioritise case allocation, and be confident enough to say if we can't address something
Our holistic approach means people can work through different areas they need support with; because we give	Our building can be hard to find and isn't 100% accessible
time and build trust	We struggle to engage the Deaf community despite offering BSL
Home-visiting makes services more accessible to disabled people	We don't work with very many young people
Support at assessments and tribunals means people are supported in formal situations	We need to better manage people's expectations, anxieties and enable people to be more
We are seen as approachable, friendly, helpful, understanding	involved in their own solutions
Our staff have considerable depth of knowledge, skills and commitment.	We are often crisis solving and need to spend more time enabling
We give staff the support they need and provide lots of training opportunities	Trustees want more involvement, skills and diversity on the board
	Need to strengthen

Supportive of our volunteers and offer training and development opportunities	measurement and communication of our impact and value for service users
Offer a place of learning and connection through members group and events promoting different points of view and shared perspectives	Our current funding ends 31/03/2018 and we need to obtain more
Strengths in collective voice and influence	We need to develop an income generation model
Funded from a range of sources	We need to consolidate our work and grow more slowly
<u>Opportunities</u>	<u>Threats</u>
We have a very good reputation within the community. We get many self-referrals through word of mouth and signposting from past service	Welfare Reform and Austerity lead to increasing financial pressures for Disabled people
users, we are referred to by professionals	Cuts to local services by Merton Council lead to reducing independence and dignity
We could build on our track record to grow our reach and develop more long-term support models for people	Housing crisis means it is difficult to get people into the right homes
The Social Model allows us to build a collective voice across needs and identity groups. We could use this collective voice more effectively by: -being more involved in decision- making by the Council and influence the choices they make	The planned integration of Social Care and NHS could lead to re- emergence of the medical model and devaluing of Social Model of Disability
-building links with Solicitors in key areas like Housing, Community Care -engaging with the CCG and Public Health teams and explain the social	Cuts to Legal Aid mean less access to legal knowledge, services and justice
model to them - doing more work with local Councils and MPs to convince them of the real	Cuts to adult education reduce opportunities for well-being
hardships faced by local Disabled	External factors mean there is

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people	greater demand for services, but
-being more active in campaigning	also fewer ways to support
	people. Our case work is
We could use our links with other	becoming more complex as
like-minded organisations, using	people present with multiple and
greater partnerships to increase the	interlinked issues
voice of Disabled people	
	There is an increase in mental
We need to grow and broaden range	health service users accessing us
of services to improve independent	as other services close
living, and/or work in partnership	
with other organisations to take	It can be difficult to signpost
advantage of new opportunities and	people elsewhere for support as
5	other services close
fill gaps	outer services close
	Crant funding is likely to reduce
	Grant funding is likely to reduce
	and Council may move to a
	commissioning model which
	imposes eligibility criteria
	We may be forced to consider
	eligibility criteria to manage
	demand, which is not our model
	or in line with our values
	Widespread expectation that
	volunteers can be used to
	replace staff
	Our current premises may be re-
	developed
	We do not have dedicated capacity
	for fundraising

Appendix 4: How this strategy was co-produced

We worked with trustees and staff to create a longlist of areas which, based on our lived experience as disabled people and on our casework evidence, we thought we should work on going forward into 2018. We took that longlist to our AGM in October 2016 and asked our members to add to the list of with themes, ideas and topics which were important to them and to prioritise the items.

We then took the refined list and created a series of discussion cards which we asked people to build on, refine, and prioritise at our annual "My Voice Matters" event on 8th December 2016. Over 40 disabled people and supporters attended the event and told Merton CIL what they want us to focus on over the next few years.

Feedback from the event was really positive with people highlighting the importance of Merton CIL's current services, as well as asking us to do even more going forward! In particular, people wanted us to build on our current services and offer more long-term and day to day support. In addition to our core work on benefits, community care, and housing, people wanted more help accessing health care and attending health appointments, and more support for mental health service users who have seen a cut in services in Merton over the past few years. Merton CIL has been piloting support for disabled people who have experienced Hate Crime, and attendees at My Voice Matters really wanted this work to continue.



Picture: Graphic facilitator Sandra Howgate captured people's thoughts throughout the event – <u>www.sandrahowgate.com</u>

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Young disabled people were identified as a key group of people who Merton CIL should be talking to and working with, and there were lots of good ideas to support young disabled people to be more independent. People had lots to say about access to services, buildings and transport too, with many sharing experiences of poor access. Merton CIL was asked to work with the Council to ensure that services in Merton are accessible to disabled people, and they asked us to raise awareness with local businesses.

Finally, people at the event shared their own ideas and asked Merton CIL to work harder to raise awareness of disability and explain the Social Model of Disability to people, which says that people are disabled by barriers in society, not by their impairment.

We created a short video following the event https://www.youtube.com/watch?v=ELcQ-XxydEU as well as a summary document, and sought further input from members and supporters through our newsletter and social media



We then took the refined ideas back to our staff team and our user-led trustee board and reviewed each of the ideas and assessed that against a matrix which reviewed our ability to undertake the work and whether other

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organisations were already supporting people in those areas. We worked really hard to develop a plan which responded to need and demand, but which we believe we can deliver.



This in-depth work with the trustees led to our final strategy for 2018-23 and we created a written version of the strategy and a graphic version, in order to make it more accessible. We then reviewed what resources would be necessary to deliver the plan and developed a series of bids for grants and contracts to deliver our strategy.