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### **Royal National Institute of Blind People (RNIB) Scotland Response to the Healthcare Improvement Scotland and the Care Inspectorate Joint Inspections of Adult Services 2021 consultation**

#### Introduction

The Royal National Institute of Blind People (RNIB) Scotland is the country’s leading charity working with blind and partially sighted people. We support children and adults with sight loss and help them to live full and independent lives, campaigning for their rights.

In 2010, the date of the most recent figures published by the Scottish Government, the number of people registered as blind or partially sighted in Scotland was reported to be 34,492.[[1]](#footnote-1) Research suggests that around 10 per cent of eligible people do not register making the true figure closer to 40,000.

Around 178,000 people live with a significant degree of sight loss in Scotland, around 4,300 of which are children and young people.

This number could eventually double unless we act to prevent avoidable sight loss. The rise of sight threatening conditions such as diabetes and an aging population will increase the number of people affected by sight loss unless action is taken.

We welcome the opportunity to respond to the proposed engagement framework that consists of 12 statements about people’s experience of health and social care services. We are pleased to share feedback using information gathered from our public policy papers and previous consultations.

The Healthcare Improvement Scotland and the Care Inspectorate Joint Inspections of Adult Services 2021 consultation poses three questions, and we have responded to questions 1 and 3.

1. How far do the statements reflect the areas that matter to people using health and social care services and support?
2. Will the statements make sense/be meaningful to people?
3. What do we need to consider to ensure we develop meaningful conversations (using focus groups; one to one interviews and a survey) with the people you engage with?

##### RNIB Scotland response

##### Question 1 - How far do the statements reflect the areas that matter to people using health and social care services and support?

###### Accessible health information

Accessible health information is crucial.

Patients rely on good communication to ensure that they understand their health information and needs. For most people this is achieved through printed information, but for a person with sight loss, printed information is often inaccessible. Around 178,000 people live with a significant degree of sight loss in Scotland, so the need for accessibility is high.

People with sight loss should be informed about the accessible options available to them from the very beginning of their healthcare journey, giving them the opportunity to self-manage and control their own healthcare needs.

However, research for our “Communication Failure?”[[2]](#footnote-2) report found that blind and partially sighted people lacked confidence when considering requesting accessible formats from their health service. This was put down to feeling “a burden” or not wanting to be seen as “difficult”. They do not feel that they can enforce their rights to access information, as one respondent explained:

“No [I do not feel confident], because I worry I’m not worthy enough as I can just about manage with standard print for short lengths of time.”

Some respondents expressed a lack of trust in the health service and instead used their own supportive technology to make documents accessible at home, as one respondent explained:

“It’s easier to do it myself on a scanner so I don’t ask for information. If you’re ringing, they wouldn’t be there.”

The effects of not receiving information in a preferred and accessible reading format should not be underestimated. This is leading to people with sight loss feeling unable to take control of their own health needs whilst their patient confidentiality can be compromised.

It is also worth noting that during the pandemic many blind and partially sighted people are currently receiving less support at home due to the risks posed by Coronavirus. This has led to individuals being home alone for a significant number of days during which health-related letters could be potentially left for weeks unread or put in the waste as junk mail.

###### Prevention and falls assessments

In 2014, the Scottish Government’s ‘The Prevention and Management of Falls in the Community: A Framework for Action for Scotland 2014/15’[[3]](#footnote-3) acknowledged the link between sight loss and falls by including under Action 4.6, ‘Level 3 assessment and interventions offered are in line with current and emerging evidence… assessment and management of visual impairment.’

In 2018, an output from the ‘Falls and Fragility Fracture Strategy for Scotland Consensus and Commitment Workshop’ led by the Falls Programme received feedback from attendees to ‘Consider funding services within acute care to respond to people with a high risk of falls, including people with a visual impairment.

‘The Place Standard: How Good is Our Place?’[[4]](#footnote-4) which was developed by NHS Health Scotland and Architecture and Design Scotland, allows communities to work together to assess the quality of their place and prioritise areas for action. It maximises the potential of the physical and social environment to support health, wellbeing, and a high quality of life.

This encourages a collaborative approach, being applied prior to hospital discharge, to adapt surroundings that are suitable for a person with sight loss. However, a central issue here is that most falls prevention assessments are not nearly so effective for people with sight problems; they may in fact be counterproductive. Moving furniture or removing rugs may increase the risk of falls for people who rely on those ‘markers’ to help them negotiate the room, or even to help them balance.

Carers should be included in home adaption conversations when appropriate. As mentioned within the Strategy, ‘many people at risk of falls are not in a position to organise their own health and social care, so carers often take this responsibility on their behalf.’ The Carers (Scotland) Act 2016, clearly states that ‘taking account, so far as it is reasonable and practicable to do so, of any views given by the carer in making decisions relating to the discharge of the cared-for person.’

We welcome the action by the Scottish Government within ‘Age, Home and Community: Next Phase’[[5]](#footnote-5) to ‘…commit… to delivering at least 50,000 affordable homes over the lifetime of the current… which can be adapted for… people with physical disabilities.’ Acknowledging the needs and requirements for people with physical disabilities, including people with sight loss, can ensure that there are necessary preventive measures put in place from the onset to stop unnecessary falls at home.

##### Question 3 - What do we need to consider to ensure we develop meaningful conversations (using focus groups; one to one interviews and a survey) with the people you engage with?

A choice of engagement tools is always preferred when consulting with blind and partially sighted people - this allows people with sight loss the options to engage using a format that suits their needs. Options include online, through digital platforms; via telephone, using teleconference facilities; or after receiving an accessible printed or audible letter/leaflet which allows people to communicate through Braille.

In addition, RNIB Scotland holds regular focus group meetings which are hosted by a representative who is gathering feedback as part of a formal consultation. For example, last year, we held a focus group meeting with the Scottish Parliament Community Outreach Team who listened to personal experiences from blind and partially sighted people as part of the Health and Sport Committee inquiry “Impact of COVID-19 on equalities and human rights”.

##### For further information please contact:

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1. A National Statistics Publication for Scotland: Registered Blind and Partially Sighted Persons, Scotland 2010, Scottish Government, 2010. [↑](#footnote-ref-1)
2. Communication Failure? A review of the accessibility of health information for blind and partially sighted people, RNIB Scotland, 2020 <https://www.rnib.org.uk/scotland/reports-and-publications-rnib-scotland> [↑](#footnote-ref-2)
3. Scottish Government, The Prevention and Management of Falls in the Community: A Framework for Action for Scotland 2014/15, October 2014. <https://www.gov.scot/publications/prevention-management-falls-community-framework-action-scotland-2014-15/> [↑](#footnote-ref-3)
4. NHS Health Scotland and Architecture and Design Scotland, Place Standard. <https://www.placestandard.scot/guide/quick> [↑](#footnote-ref-4)
5. Scottish Government, Age, Home and Community: Next Phase, 2018. <https://www.gov.scot/publications/age-home-community-next-phase/> [↑](#footnote-ref-5)