



See and plan

Vision rehabilitation: empowering people to live independently

RNIB

Supporting people
with sight loss

Sight loss or a deterioration in a person's sight can be an overwhelming and challenging time. Everyday activities can seem like daunting obstacles to overcome. Making a cup of tea; shopping; crossing a road safely; reading post; how to cook; how to continue working, all of these and many other everyday activities can feel insurmountable.



The impact that this can have should not be underestimated. RNIB regularly hears from people who report feelings of isolation, frustration, depression and fear over their future.

There is a clear need for people to receive the right support at the right time. Early support means that people are able to learn and develop the right skills to ensure that they are able to continue with the work, activities and the way of life that is important to them. This can reduce or prevent a person from needing far more costly care provision.

Vision impairment rehabilitation support

The good news is that there is support; councils across England provide a vital service known as vision impairment rehabilitation. This service provides crucial training and advice to people with a visual impairment on how to maintain and

live in their home safely, and how to negotiate the many obstacles and risks outside of their house. Rehabilitation provides people with the skills and confidence they need to maximise independence, to access and participate in their community.

Rehabilitation support should be made available at all stages of a person's sight loss journey.

A person may experience a change to their sight, or experience a change in circumstances, for example moving to a different area or a friend or carer moving away.

“Without these services I would have been totally lost. They taught me ways to adapt to my disability and showed me that there is life outside my front door and how to find it.”

(Rehabilitation participant, West Midlands)

Putting your life on hold

No one would argue that such support isn't vital and shouldn't be provided. In fact, the government agrees that rehabilitation support is important. The Care Act requires local authorities to deliver this preventative support. Statutory regulations and guidance that accompany the Care Act recognise the importance of rehabilitation support for people with a visual impairment.

However, we know that people have to wait for far too long before they receive support. A common theme in RNIB's My Voice research is that the issue is not the level of support that they received, but how long they had to wait to receive support. Rather shockingly some people reported having to wait years, not just months to receive the support they needed [1].

RNIB believes that this is unacceptable. Long waits can mean that people are left to struggle on their own. They may give up work or stop the activities that they love to do, and can often become isolated at home.

RNIB is calling for every person with a visual impairment to be seen and to have a plan in place within 28 days.



Worryingly just under half of the 109 councils in England that responded to our FOI request do not specify that visually impaired people must be assessed within 28 days from the point that they first have contact with the local authority.

An additional 20 per cent of councils indicated they try to aspire to work towards a 28 day assessment time frame as best practice. However, our findings indicated that those that mandate this as a 'must do', are more likely to meet the 28 days target.

RNIB is extremely concerned that too many people are left waiting for the support that they need to rebuild their lives. We know that there has been a trend of reducing budgets for rehabilitation support. In fact our research shows that these budgets have fallen by an average of 15 per cent over the last five years.

This has been accompanied by a steep decline in the number rehabilitation officers employed, with 32 per cent of councils only having one or less full time officer [2].



Too many people are left waiting for the support that they need to rebuild their lives.

See and plan

RNIB is calling for all local authorities to **see and plan**. Rehabilitation services must be organised so that everyone with a visual impairment is seen and has a plan in place within 28 days of first contact with the local authority. No one should have to sit at home and put their lives on hold.



See: every person should be seen by someone who is experienced, knowledgeable and competent in understanding the difficulties that blind and partially sighted people can face.

RNIB is concerned that blind and partially sighted people are denied the rehabilitation support they need. The use of generic assessments that do not adequately identify the needs of a person with a visual impairment can mean that people are signposted away from vital support that they are entitled to.

RNIB is calling for every person with a visual impairment to be seen by a person who is experienced, knowledgeable and competent. Sight loss impacts on every element of life, and means that new strategies have to be developed to organise and carry out daily tasks.

Every person with a visual impairment should receive a specialist assessment that identifies the unique challenges that they face.

A face to face assessment is essential to understand how a person is coping and to recognise what specify support, training and information may need to be provided. A home visit enables the assessor to identify whether there are any risks when cooking, cleaning or maintaining personal care and to indentify any trip hazards. These issues cannot necessarily be identified via telephone assessment.

Our recent freedom of information (FOI) request found that 60 per cent of local authorities only offer a specialist assessment if a person is referred to the rehabilitation or sensory loss team.

The findings of our FOI indicate that when a specialist assessment is applied, that this leads to a higher number of people being assessed for and receiving rehabilitation support.

Some local authorities that do not specify a 28 day timeframe for assessments and also carry out a generalist assessment have the lowest number of people in receipt of rehabilitation.

One local authority reported that 88 people with a visual impairment had been in contact with the local authority between April and November 2015, but only seven of these people were referred for a rehabilitation assessment. Another local authority reported that 251 had been in contact, but shockingly only 4 people were referred for a rehabilitation assessment.

“Overall I thought that the council [was] useful in relation to putting me in contact with some services. However, I felt like a lot of information was not given to me which should have been, due to the person making a judgement that my sight was much better than what it was because of my age and how I present myself. I feel that this has resulted in me not obtaining service[s] which could really benefit me such as cleaning support”

(Rehabilitation participant, North East)

Plan: every person should be seen, have an assessment and a plan in place within 28 days.

By plan we mean that as part of the assessment process, a plan of action must be discussed, agreed and recorded. The plan should be tailored to reflect the level of support needed. The plan should outline the agreed plan of action; whether it is that a person has been referred onto another organisation or for a care assessment. It should also outline any rehabilitation support required.

RNIB recognises that not everyone will be ready for intensive rehabilitation support; therefore, a plan could specify that the person is contacted within an agreed timeframe for a further assessment.

A plan for rehabilitation support should record what support will be provided and what outcome is wanted to be achieved. Rehabilitation support should be provided as long as it is needed to meet the agreed outcome, this may mean more than six sessions. However, there should also be



a point that the rehabilitation support is reviewed, and if it has not met the agreed outcome, then an assessment for care support should be carried out.

RNIB is extremely concerned that some local authorities have said that they do not produce a plan for rehabilitation support.

Case study

Rachel, North East

Rachel has been in contact with her council on two occasions. Her most recent contact was to ask for some mobility training, so that she could learn a route to get to her friend's house. The route was complicated, and involved learning two separate bus routes, followed by a difficult route on foot from the bus stop to her friend's house.

Rachel knew exactly what support she wanted, and contacted her local council to ask for rehabilitation support. Eventually someone came to Rachel's home to assess her needs. Rachel explains that "the lady was very negative, and explained that I could get support, but that I would be on a waiting list. She said that I wouldn't receive any more than four mobility sessions. This really upset me, as I was really anxious about learning the route, and wasn't sure that I would be able to do it in four weeks. I felt that the council didn't seem to care or understand visual impairment and how scary it can be to go out to unfamiliar places."

"Not being able to see my friend and independently socialise had a huge impact on me"

A number of months went by before the rehabilitation officer got in contact. Rachel clarifies that the officer was excellent, but that it was explained to her again that she would only receive four sessions. "It was really frustrating, I tried hard to learn as much as I could about the route, but it just wasn't enough time. There also wasn't a discussion afterwards about whether or not the training had been successful. The rehabilitation officer knew as well as I did that the support hadn't been enough."

"Not being able to see my friend and independently socialise had a huge impact on me. I had to rely on my parents to take me when they were free; I was stuck inside, I could only go to the boundaries that I knew. I didn't even attempt the route independently following the four sessions – I felt the confidence I had following the support would deem even trying too risky and unsafe."

"In the end the training felt like a waste of time because I hadn't been able to learn the route. I felt angry, upset and frustrated."

Why 28 days

As our findings show, 28 days is a timeframe which local authorities can meet. Previous guidance required local authorities to provide an assessment within 28 days; this is a recognised and achievable outcome if the right resources are put in place.

A clear timeframe enables a person to know what they can expect and will ensure that people are not left on their own for a long period of time to struggle.

Within the 28 days, there will still be a need to prioritise the most urgent cases. But by ensuring that everyone has had an assessment and a plan within 28 days will enable local authorities to plan their services and ensure that there is enough resource in place to provide the quality rehabilitation support that the person requires.

See, plan and provide

Ensuring that everyone is seen and has a plan in 28 days will ensure that people know what support they will be receiving. Any agreed rehabilitation support should be started within 12 weeks of the person having contact with the local authority, in short the person should be seen, have a plan, and start to receive their support within this 12 week period of time.

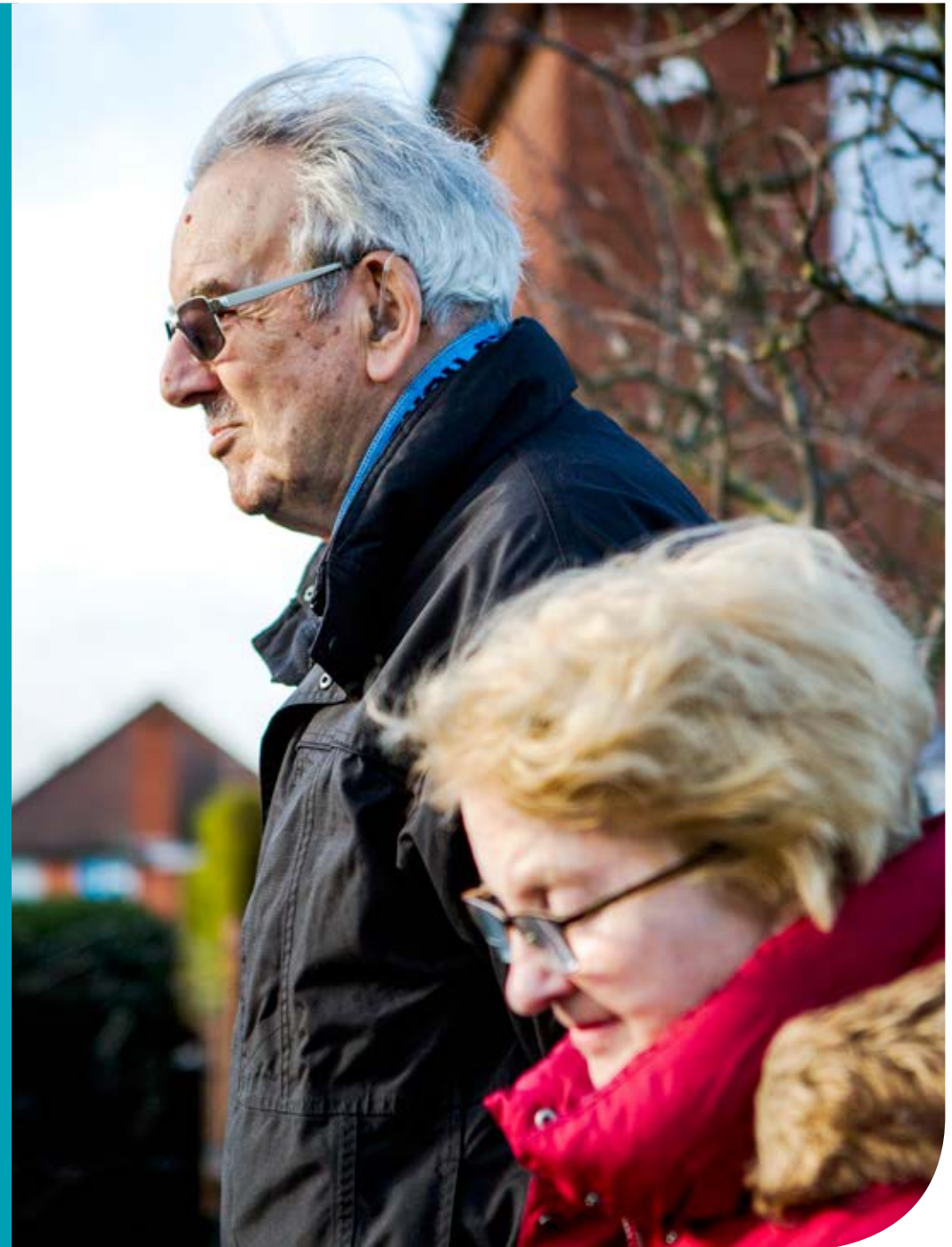


Action

RNIB is calling on local authorities to:

- commission services, whether provided in-house or contracted out, that ensure that everyone with a visual impairment is seen and has a plan within 28 days of their initial contact with the local authority
- ensure that every person with a visual impairment receives a specialist assessment
- ensure that everyone starts to receive a service within 12 weeks
- ensure that services are adequately funded and structured in order to achieve this.

We are also calling on the government, as part of their monitoring activities of the implementation of the Care Act, to collect data on rehabilitation services across England.



References

- [1] My Voice 2015: The views and experiences of blind and partially sighted people in the UK: John Slade and Rose Edwards: RNIB: 2015
- [2] Information based on an RNIB FOI (freedom on information request) made in January 2015.

National Helpline 0303 123 9999
helpline@rnib.org.uk

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