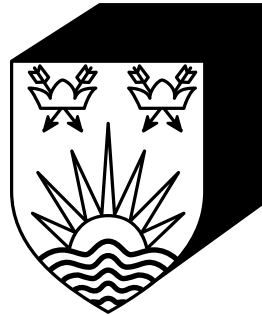


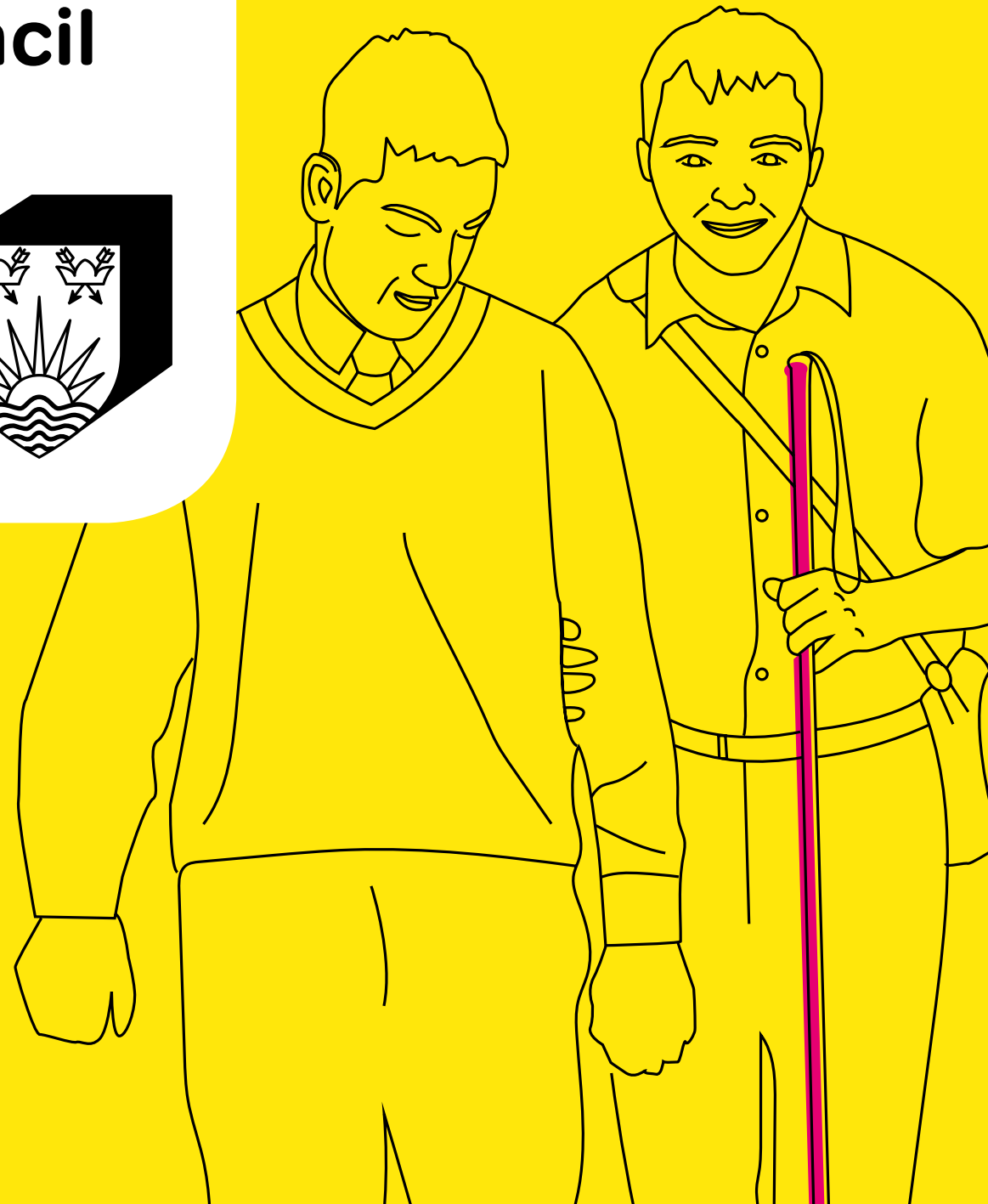
Suffolk County Council

Spotlight on vision rehabilitation



RNIB

Supporting people
with sight loss



Suffolk County Council

Caroline Carr, managing director of Sensing Change, tells us about Suffolk County Council's vision rehabilitation service. She highlights how they work towards the goals of See, Plan, Provide, seeing people for specialist face to face assessments and having plans in place within 28 days; and how they meet several Good Practice Principles.



How would you describe your service?

Suffolk County Council sensory team became Sensing Change in 2011 as part of a Department of Health pilot to test social work practising independently of the local authority. The pilot lasted over two years and Sensing Change continues to practise independently, currently holding a contract with Suffolk Council.

Sensing Change delivers a range of services including social work, vision rehabilitation, communication, interpreting and visual awareness training.

We support people who have sight loss across Suffolk and we have a population of around 735,000 across a large geographical area.

Who makes up your team?

We currently have a total of 38 health and social care staff, eight are qualified rehabilitation workers.

How many clients do you work with?

In Suffolk, there are around 4,265 people who are registered blind and partially sighted. We receive around 900 referrals a year for sight loss. The majority of referrals come from Certificates of Vision Impairments (CVIs), however, people can refer themselves and we encourage other professionals to refer to us. Everyone is offered an assessment and around 95 per cent of people receive an assessment.

What's working really well about your service?

Our streamlined referral process for CVIs works really well. Prior to Sensing Change being created, all CVI referrals and self-referrals were sent to our council's contact centre, who then sent them on to the sensory team. This would often cause huge delays as referrals would not always go straight to our team. It would sometimes take up to 14 weeks before we would be able to make contact and we had waiting lists of up to nine months at one stage seven years ago. All referrals now come directly through to us.

Once Sensing Change was set up, we spent a lot of time promoting our service, our location and our contact number. We developed a training course which was offered to all health and social care staff that's specific to working with people with sight loss. This was so that staff can articulate what vision rehabilitation is and the benefits for blind and partially sighted people.

As we now manage all CVIs, we can offer a more responsive service. We don't have a lengthy waiting list any more and we aim to see everyone within 28 days of contacting us.

I believe the structure of our social work and assessment team is key to how we're able to provide such an effective service. For every referral, we will go out to the person's home to talk to them face to face (**Principle 2**). This would usually be one of our qualified social workers or social care practitioners. They are the first person the client sees and they carry out the needs assessment which includes discussing benefits, registration and vision rehab as well as signposting or referring to other support services such as housing or voluntary agencies. This approach prevents delays if the client needs any other support services.

They can clearly identify when a rehabilitation programme is needed and will refer the client to a rehabilitation worker early in the process while continuing the needs assessment. The team is also able to offer "low level no risk" rehabilitation support such as issuing signature guides which can have a positive impact on the client's potential for maximising their independence.

We are really proud that rehabilitation workers are able to dedicate all of their time to delivering vision rehabilitation so they are able to focus their core skills on helping the client to maximise their independence.

We also carry out a customer satisfaction survey with everyone who uses our service. We use this feedback to shape and continually improve the way we deliver our services. From the information customers gave us, we knew they were happy with the service we were providing but they were waiting too long for it. We reviewed our referral and assessment process to ensure we get to people quicker.

Over the next 12 months, what are the main challenges you're facing and how will you look to address these?

As we are a smaller, independent organisation, we have been able to change our culture. We have involved social work staff at the beginning of the assessment which has been a big improvement. However we will always go back to the customer feedback to tell us if this is working as they are at the heart of everything we do.

Our main challenges are around seeking further independence from the council so that we can be even more creative in our approach. We've got to continue balancing financial constraints with the increasing demand for our service. We are in a position where we currently have enough rehabilitation staff but some have to cover a really wide geographical area so we have to make sure we make the most efficient use of their time.

Three steps of See, Plan and Provide

- **See:** everyone with a visual impairment must receive a specialist face to face assessment.
- **Plan:** everyone must have a plan in place, identifying the outcome of the assessment. The first two steps must take place within 28 days of first contact with the local authority.
- **Provide:** any agreed vision rehabilitation support must start within 12 weeks of the person's initial contact with the local authority.

10 Principles of Good Practice in Vision Rehabilitation

All blind and partially sighted people...

- 1** receive initial telephone contact within two working days of receipt of a Certificate of Vision Impairment (CVI), referral or self referral
- 2** are seen and receive a specialist assessment from someone with appropriate skills, knowledge, training and qualifications, within 28 days of initial contact

- 3** are offered a range of services at the specialist assessment. Services include those that address their eye health, emotional, physical, financial and social needs and those of their carer if appropriate
- 4** are provided with a vision rehabilitation plan within 28 days based on goals agreed in the assessment
- 5** are provided vision rehabilitation services free of charge, to meet agreed assessed needs
- 6** offered a full community care needs assessment when vision rehabilitation does not fully meet their needs
- 7** are provided with equipment, aids or minor adaptations free of charge, when it has been assessed that these help, reduce, prevent or delay the need for more costly care
- 8** receive information about services or support in a timely manner and in their preferred format
- 9** have the ability to access vision rehabilitation services in the future if required
- 10** are provided vision rehabilitation by someone who is trained to understand their sight loss related needs

To download a copy of the 10 principles
rnib.org.uk/rehab-principles



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