

# New research shows the economic value of vision rehabilitation

Vision rehabilitation is crucial to ensuring that someone who loses their sight remains as independent as possible. Now independent research [1] has identified that good vision rehabilitation also avoids significant health and social care costs, the costs avoided are more than three times the cost of the service.

## Background

Sight loss can be devastating and overwhelming, whether it happens suddenly or gradually. The Care Act (2014) [2], and the guidance that underpins it, places a clear statutory duty on local authorities to prevent, reduce and delay care needs, including through vision rehabilitation support for blind and partially sighted people.

Vision rehabilitation is structured support, delivered by a rehabilitation worker, to help people adapt to their sight loss. They provide one-to-one training in daily living skills, mobility, and communications, to maximise people's independence, confidence and quality of life. Reviewing evidence, researchers at the University of York concluded there are 'strong indications' of vision rehabilitation having a positive impact on daily life and emotional well-being [3].

RNIB commissioned the Office for Public Management (OPM) to explore whether there is also an economic return from providing vision rehabilitation services. OPM applied cost avoidance analysis, informed by HM Treasury guidelines, to the service provided by the voluntary organisation Sight for Surrey ([www.sightforsurrey.org.uk](http://www.sightforsurrey.org.uk)), on behalf of Surrey County Council.

In 2015/6, 702 people received a 'specialist assessment' from Sight for Surrey, over two home visits which could include provision of equipment. 284 went on to receive in-depth rehabilitation, lasting from 1 to 30 sessions. The total cost of Sight for Surrey's service was calculated at just over £900,000; equivalent to £1,300 per referral.

## The analysis was based on:

Sight for Surrey monitoring data; interviews with service users, their families and informal carers, and professionals to capture the benefits resulting from vision rehabilitation; and, an extensive evidence search to put financial values on benefits. Little evidence directly relating to vision rehabilitation was found so where appropriate, evidence relating to reablement or occupational therapy was used and conservative assumptions applied.

## Key findings

Four areas of benefits for blind and partially sighted people from vision rehabilitation were identified:

- **Functional independence:** improved mobility, ability to travel, daily living and less reliance on families and carers.
- **Personal safety:** fewer accidents, A&E visits, GP appointments and hospital stays.
- **Emotional wellbeing:** increased confidence, acceptance, feeling safer and enjoyment.
- **Social participation:** increased community involvement and communications.

## Benefits for family and informal carers included:

- reduced burden of care
- increased confidence service users have support
- decreased feelings of worry or anxiety.

Even if these positive outcomes were experienced by just 10 per cent of Sight for Surrey's service users the total value of costs avoided, reduced or deferred is **£3,423,844** per year. This is **£3,168,022** of health and social care costs, including reduced need for home care and deferred need for residential care, and **£255,823** of costs for service users, their families and carers.



**“This research proves that vision rehabilitation services not only benefit blind and partially sighted people, their friends and family, it also shows the costs that can be avoided long term and that they far outweigh the actual costs of running these vital services.”**

Fazilet Hadi, Deputy CEO, RNIB

## Commissioners need to:

- protect existing vision rehabilitation services from further cuts;
- consider how they can provide good quality services for blind and partially sighted people which meet RNIB's 'See, Plan and Provide' criteria [4] and are informed by the '10 Principles of Good Practice in Vision Rehabilitation' [5]



## Rehabilitation service managers and rehab workers need to:

- use this evidence to protect their service;
- explore if outcomes and costs for their own service can be mapped.

## References

1. Demonstrating the Impact of Vision Rehabilitation (2017) [www.rnib.org.uk/rehabcostavoidance](http://www.rnib.org.uk/rehabcostavoidance)
2. Understanding the Care Act 2014 [www.rnib.org.uk/nb-online/understanding-care-act](http://www.rnib.org.uk/nb-online/understanding-care-act)
3. Vision Rehabilitation: What is the Evidence (2015) [www.pocklington-trust.org.uk/project/limited-evidence-hinders-potential-for-improving-sight-loss-rehabilitation-research-finds/](http://www.pocklington-trust.org.uk/project/limited-evidence-hinders-potential-for-improving-sight-loss-rehabilitation-research-finds/)
4. 'See Plan and Provide' criteria [www.rnib.org.uk/campaigning-current-campaigns-care-and-support/see-plan-provide](http://www.rnib.org.uk/campaigning-current-campaigns-care-and-support/see-plan-provide)
5. 10 Principles of Good Practice in Vision Rehabilitation (2016) <http://www.rnib.org.uk/professionals-social-care-professionals-complex-needs-social-care/rehabilitation-workers>

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with sight loss