Surrey
Spotlight on vision rehabilitation

RNIB Supporting people with sight loss
How would you describe your service?
We are a local sight loss charity and we have held the vision rehabilitation contract from Surrey County Council for 22 years. Our services also support people with hearing loss or who have dual sensory loss. The contract covers the whole of Surrey, which has a population of 1.15 million people with an even mix of urban and rural areas.

We offer a range of services including an ECLO (Eye Clinic Liaison Officer), vision rehabilitation, low vision and resource centre, and benefits and employment advice.

How many clients do you work with?
In Surrey, there are approximately 4,320 registered blind and partially sighted people. We carry out around 800 assessments each year for both sight and hearing loss. The majority of referrals are from Certificates of Vision Impairment (CVI). We also receive referrals from professionals or direct from clients. We also hold the register for blind and partially sighted people.

Who makes up your team?
For people with sight loss we have eight rehabilitation workers, three rehabilitation support workers, two specialist administrators, one equipment manager and one equipment advisor.

What’s working really well within your service?
All members of the team are trained in how to support people with sight loss, including the administrators. All our teams share one database of referrals, including our ECLO. This means that if a team member identifies someone as needing urgent help, they can make sure it is prioritised. This also helps with information sharing between the team so that everyone is up to date on a client’s progress.

We do the initial assessment by phone within two working days of the person being referred to our service (Principle 1).
This quick response is really important to enable us to prioritise the needs of our service users, especially urgent cases.

All those carrying out telephone calls have excellent communication skills to enable them to build a picture of the individual’s life, to understand their level of need. I then review each case and one of our rehabilitation officers then arranges a face to face specialist assessment within 28 days where possible (Principle 2).

These assessments are always at a person’s home (Principle 2), so we can understand their environment, and assess the support they need, indoors and outdoors. A significant number of people will go on to receive vision rehabilitation training. We cover mobility, daily living and communication skills. The assessment may be done over a number of visits depending on the complexity of a person’s situation. We can signpost or refer on to other key services around employment, benefits, and social care at this point (Principle 3).

We also have an excellent after-care service. Once a case closes, our rehabilitation assistants follow up after three months, and again after 12 months, to check how they’re managing and whether new issues have developed. This enables clients to be referred back into the service (Principle 9), reducing the risk of a person’s needs escalating. This allows the rehabilitation worker to stay focused on delivering rehabilitation.

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

The main challenge is achieving our aim to provide a specialist assessment within 28 days. We currently carry out the initial specialist assessment within two home visits. The first is to assess and identify what will meet client’s needs. The second is to issue and demonstrate equipment.

We want to use our time as efficiently as possible so we are moving towards one home visit instead, but making it longer. Staff will carry a standard kit of equipment that they can issue straight away (Principle 7). We will have to evaluate the results to see if this provides a more efficient service to our clients.
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: rnil.org.uk/rehab-principles