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Foreword

The circumstances and experiences of people living with a visual impairment are unique to each individual. The challenges they experience could be anything from using public transport to safely performing tasks that were once considered simple, such as making a cup of tea. When people begin to lose their sight they may feel that the life which they were familiar with has come to an end. Getting used to what is happening can be difficult, frustrating and frightening. Similarly, finding out that your child has a visual impairment can feel like a ride on an emotional roller coaster.

Recognising the challenges that health and social care services face in significant cuts to budgets; an ageing population; and changes in public expectations; we welcome and support this Visual Impairment Strategy by Kirklees Blind and Low Vision Group. The strategy will: help to remove and overcome the barriers faced by people with a visual impairment; help us to develop new ways of working; maximise the impact of what we do; and think more creatively about how we can work together to prevent avoidable blindness in Kirklees.

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1 Introduction

Demographic forecasts show that by 2021 40% of the population will be over 50 years. A significant proportion of visual impairment is related to age; 1 in 8 over-75s and 1 in 3 over-90s have a serious visual impairment. Diabetes, and hence diabetic retinopathy among children and young adults is also increasing and this too will prove a challenge to service providers. Research suggests a clear economic case for early and effective intervention: an Australian study found that for each dollar spent on eye care and the prevention of sight loss, there could be a five-dollar return to the community [1].

Kirklees Blind and Low Vision Group, made up of blind and visually impaired people and professionals working in the field, have developed this strategy taking into consideration consultation with local groups and individuals with a visual impairment and national and local legislation, guidance and reports. The document gives an overview of where we are now; what outcomes are important for visually impaired people; and what we can do to remove or overcome barriers that exist locally.

The strategy is primarily aimed at adults with a visual impairment and although it contains some recommendations, it is not intending to be comprehensive for children with a visual impairment.

Throughout this document the terms ‘visually impaired’ and ‘visual impairment’ are used to include people who are born blind and people who acquire a visual impairment, terms such as ‘sight loss’ are only used when quoting from other documents.

2 Aim of Kirklees Visual Impairment Strategy

The overall aim of this strategy is to improve outcomes for people with a visual impairment and prevent avoidable blindness across Kirklees reducing demand on high cost services.

The values and principles that will influence; underpin and guide the work we undertake to achieve our aim include: a social model approach challenging the barriers faced by visually impaired people; the well-being, independence and participation of visually impaired people locally; a focus on equality; outcomes and person centred support; and dignity, safety and respect.
3 Outcomes

‘Seeing it my way’ launched at the UK Vision Strategy conference in 2012 is a universal quality and outcomes framework outlining ten outcomes that visually impaired people say are important to them:

1. That I understand my eye condition and the registration process
2. That I have someone to talk to
3. That I can look after myself, my health, my home and my family
4. That I can receive statutory benefits, information and support that I need
5. That I can make best use of the sight I have
6. That I can access information making the most of the advantages that technology brings
7. That I can get out and about
8. That I have the tools, skills and confidence to communicate
9. That I have equal access to education and life-long learning
10. That I can work and volunteer

The importance of these outcomes was reflected locally, we have therefore used them in this strategy to link with our key themes and objectives later in the document.

4 Where we are now

Progress over the last six years
A number of local activities took place during 2006/7 including a commissioning review of adult sensory services; the development of a strategy to support adults with a visual impairment; and an ad hoc scrutiny review of services for visually impaired people. As a result there has been some real progress in service provision and access to support for people with a visual impairment including: A Council Adult Sensory Service; A Rehabilitation, Equipment, Information and Advice service; An Eye Clinic Liaison Officer (ECLO) Service; and Kirklees Blind and Low Vision Group.

Visual impairment data
Nationally the UK Vision Strategy tells us that currently ‘2 million people across the UK live with sight loss’ and by 2020 this number will have increased by 22%. Locally at February 2014 almost 7,000 people were known to Kirklees Council as having a visual impairment representing approximately 1.6% of the total population: The majority if these (81%) were 65 years and over.
The above figures include those people registered as partially sighted or blind that have been issued with a Certificate of Visual Impairment (a legal document provided by Ophthalmic Consultants at the time of registration). Kirklees Council register of blind/partially sighted people showed at 1 April 2014 that there were almost 2,000 people registered in Kirklees with a visual impairment. More data can be found in Appendix A.

Prevalence among black and minority ethnic communities
Among older people living in the UK, white people have the greatest risk of developing Macular Degeneration. Asian people have a higher risk of cataracts compared to other population groups. Black and Asian populations have a greater risk of diabetic eye disease than other population groups and the risk of glaucoma is much higher for the black population compared to the white population [5].

National and local drivers
In developing the strategy it was important, in addition to local consultation, to consider national and local policy and guidance to: find supporting evidence; identify additional priorities; and identify existing resources that can support implementation of our action plan. Listed below are two key documents. More detail and web links can be found in Appendix B.

- Kirklees Physical and Sensory Impairment Goals 2010-2020 sets a 10 year vision and is used by Kirklees Physical and Sensory Impairment Partnership Board to help prioritise its work programmes.
- UK Vision Strategy 2013-2018 sets a strategic framework for improvement to eye health and outcomes for people with a visual impairment.
Safeguarding adults
Protecting an adult’s right to live in safety, free from abuse and neglect underpins everything we do. It is about working together to support people to make decisions about the risks they face in their own lives, and protecting those who lack the mental capacity to make these decisions. Kirklees has a well-established and effective Safeguarding Adults Board whose core purpose is to protect those adults at risk as defined in legislation and guidance. The Board’s priority is to promote an environment where abuse is prevented and have developed a plan that lays out our shared goals and vision. Safeguarding Adults Strategic Plan

Visual impairment pathway
The pathway for people with a visual impairment in Kirklees reflects the UK Vision Strategy pathway. The aim of the pathway is to help people with a visual impairment get the right support at the right time and from the right person whether they work for health, social care or the voluntary and community sector.

It is a process map describing how the principles of best practice can be applied to service delivery to ensure early Interventions to:
- Address presenting needs
- Rehabilitation delivered by specialist, qualified professionals
- Interventions that help maximise functional vision
- A community care assessment of eligibility for adult social care if people have un-met needs after receiving early intervention services

The range support available to people with a visual impairment across Kirklees is outlined in Appendix C.
5 Local issues and barriers

As well as identifying current and future population; eye condition trends; and support available locally we need to consider local needs and issues. These are the things that may impact on the health of the local population, or the likelihood that populations will seek access to prevention, eye health and visual impairment support. These include issues that emerged during local consultation with visually impaired people and the people who support them.

Prevention
Prevention is the golden thread running throughout all of the themes in this strategy. Having a preventative approach includes raising awareness of eye health; promoting independence and self-care; and ensuring early diagnosis and intervention to delay progression of visual impairment and reduce demand on high cost services.

The UK Vision Strategy tells us that commissioners will spend an average of £4.27 million on eye care per 100,000 head of population and yet over 50% of sight loss is due to preventable or treatable causes [1].

A Public Health Indicator for Preventable Sight Loss was introduced in England April 2013. Its aim is to measure the numbers of all people who are certified sight impaired, or severely sight impaired, and the numbers of people who have lost their sight from one of three major causes of preventable sight loss in the UK: glaucoma; age-related macular degeneration; and diabetic retinopathy [5]. Kirklees Blind and Low Vision Group welcome this measure and recommend the development of a local cross sector prevention and early identification strategy alongside a new visual impairment and eye conditions section of Kirklees Joint Strategy Needs assessment (JSNA), showing links to such things as deprivation, ethnicity and other health conditions to help identify local priorities to prevent avoidable blindness.

Raising awareness
We know that, for various reasons, there are many people with a visual impairment not known to services. Living with a visual impairment is complicated and each person has a different story; some people are born blind; some are not aware they have lost part of their sight; some people have a visual impairment secondary to other conditions such as stroke, dementia or a learning disability and this is sometimes overlooked; some people may not seek help because of a belief that visual impairment is just part of getting old and nothing much can be done about it; and others may be struggling to come to terms with their visual impairment and feel too embarrassed or vulnerable to let others know they are experiencing problems.
This is not an issue specific to Kirklees although it does need tackling locally, increased awareness activities such as Sensory Awareness training, outreach activities during National Eye Health Week and supporting partner organisations to have a presence in public places such as town centres should help more people to understand their visual impairment, encourage them to make themselves known and where necessary seek support at an early stage.

Access to health services
Ophthalmology outpatient attendances are rising year on year and the demand for eye care is set to increase significantly as the population ages [2].

RNIB research indicates that primary eye care services have a limited awareness or understanding of eye health and a symptom-led demand for eye examinations. In secondary eye care services the research identified that many patients found the eye care system fragmented and confusing which can exacerbate an already anxious experience.

Locally people told us about how difficult it can be to access health services generally, including the lack, or wrong format, of information regarding hospital appointments; navigating around hospitals; eye care professionals that lack an understanding of other health conditions such as dementia; and forms that need completing by a visually impaired person before they can have dental treatment.

People have different levels of sight and therefore require information in different formats. The Blind and Low Vision Group would like to see increased awareness raising and understanding of eye health in primary eye care services and a move from a symptom-led demand for eye examinations to one which encourages people to have regular eye examinations in order to detect eye conditions in the early stages.
The Blind and Low Vison Group would also like to see improved communication from hospitals regarding a patient knowing about and attending an appointment; eye care professionals with a better understanding of other health conditions such as dementia; improved physical access in hospitals such as signage, steps and handrails; and staff in other health services such as dentistry that have a basic understanding of how to support a person with a visual impairment.

Certification and registration
The Royal College of Ophthalmologists believes that an important component of good clinical care by Ophthalmologists is the offer of a Certificate of Vision Impairment (CVI) to eligible patients. The College encourages its members to promote the uptake of the CVI amongst patients who are likely to benefit from it and to facilitate the process of registration as far as it is in their power to do so. To support this work they have partnered with RNIB and VISION 2020 UK to promote the benefits of CVI and RNIB have produced a you tube video for patients encouraging registration [Registering your sight loss YouTube Video](#).

Nationally there is a decline in new visual impairment certifications and registrations. Locally we saw an 11% decline in new registrations between 1 April 2011 and 31 March 2014. Kirklees Blind and Low Vision Group would like to see more encouragement and support around the certification and registration process as this not only helps people to get early support but it also helps commissioners to plan and develop the right services for the right people in the right places.
**Moving around safely and independently**

People told us that signage and landmarks can be a problem in hospitals and many mainstream services in the community can be difficult to access because for example they have steps where people cannot see where they start and end; no handrails to guide people; no contrasting flooring; and very few ramps. These are all barriers that prevent visually impaired people from navigating safely in indoor and outdoor environments, escalating their risk of falling and jeopardising their independence.

The increased risk of falls can have a significant adverse health impact on people with a visual impairment. ‘Older people with sight loss are 1.7 times more likely to have a fall and have 90% higher odds of multiple falls than a person with no sight loss’ [1]. ‘Falls are the most common cause of hospitalisation for people aged over 65 and women with Macular Degeneration fall at nearly twice the rate of women without’ [2].

Kirklees Blind and Low Vision Group would like visually impaired people to have more influence on local planning applications to try and improve access; local falls prevention activities that include, and are sometimes targeted at, visually impaired people and include awareness of ‘obstacles’ to help people understand what causes an obstacle for a person with a visual impairment.
Information and advice
Local people told us how important it is that the approach to supplying information is flexible and responsive making sure it is offered or easily available to the person with a visual impairment at the appropriate times. Support at the point of diagnosis is vital but if people are coming to terms with an initial diagnosis they may not want to think about anything else at that point. It may be that their circumstances change over time and therefore offers of information and referrals should be made on multiple occasions. In addition some Kirklees residents go through eye clinics in neighbouring authorities for example people with Macular Degeneration are likely to go through Calderdale eye clinic, it is important that these people are aware of the support available locally.

Visually impaired people also have an important role to play in helping others in similar situations. They have a wealth of knowledge and experience and within the right environment people feel it is important to share their coping strategies and provide mutual support.

Kirklees Blind and Low Vision Group would like to see ongoing information and advice to people newly diagnosed with a visual impairment and continual work to explore new ways of providing information for people and carers of people with a visual impairment including ongoing publicity of the support and activities available in Kirklees; the availability of alternative formats; and the role of the Transcription Service.

Rehabilitation and independence
Some visually impaired people use guide dogs; technology; and peer support, amongst other things to lead full rewarding and independent lives but without support to learn to do things for themselves some people rely heavily on family and friends which, they say, can sometimes affect their confidence.
Local people told us that access to support, as early as possible, to learn new ways of doing daily tasks and training to remain mobile and get out and about is an important part of rebuilding a sense of identity and confidence. Suggestions were that this could include some kind of ‘living with a visual impairment’ course that has been trialed in other areas.

The local rehabilitation and equipment service is important in helping people to regain or remain independent, along with equipment and assistive technology. Local visually impaired people feel that it is important that they have involvement in the development of local strategies relating to equipment and assistive technology and are able to view and try equipment where necessary. Kirklees Blind and Low Vision Group also welcome a wider discussion and agreement on what should be included in the core list of equipment for people with a visual impairment and what people can reasonably be expected to provide for themselves.

Locally people talked about embracing technology whilst others thought that it was not for them. Barriers to technology include the expense which restricts who can purchase it and having to purchase something before you know whether it is useful. People talked about the need to share knowledge and experiences about technology to help reduce concerns people may have, including information on cheaper alternatives to expensive items.

**Social isolation and depression**

Studies estimate that mild age-related macular degeneration (AMD) causes a 17% decrease in the quality of life of the average patient, moderate AMD causes a 40% decrease in quality of life: and severe AMD causes a 63% decrement in quality of life a decrease similar to that associated with a severe stroke that leaves a person bedridden [1].
Visual impairment irrevocably changes people’s lives, affecting their view of themselves, their relationships and their world. During local consultation people talked about experiencing fear, confusion and lack of confidence which can sometimes lead to social isolation. Some people feel that they need support to take to the streets again and to start enjoying the everyday community activities that they used to enjoy.

The UK Vision Strategy says that people with sight loss are likely to live alone indicating they can be amongst the most vulnerable and isolated. And although some community activities exist locally Kirklees Blind and Low Vision Group would like to see more work done to prevent the social isolation of people with a visual impairment especially older people.

The UK Vision Strategy also highlights the ‘increased risk of depression as a significant adverse health impact associated with sight loss. Older people with sight loss have an increased risk of depression at a rate of 13.5% compared to 4.6% in people with good vision’. Kirklees Blind and Low Vision Group would like to see a visual impairment and eye conditions section of Kirklees JSNA and associated links with mental health.

**Other health conditions**

Visual impairment may be due to, or present alongside, other health conditions including stroke; diabetes; dementia; and a learning disability. The combination of both can be overwhelming for the individual and family and if not recognised and treated can be much harder for individuals to benefit from rehabilitation.
During local consultation we heard how intense these situations are for carers and concern that some patients may leave hospital for example after a stroke with an undetected visual impairment. This particular concern is currently being addressed in south Kirklees with the development of a stroke pathway led by Orthoptists.

‘Sight loss may be under-diagnosed in people with dementia and vice versa, because the effects of each condition may conceal the presence of the other’ [4]. People who have no cognitive impairments may learn to adapt to sensory loss. But when they have dementia this may affect their perception of the world. As a result, people may make visual and auditory mistakes, which can lead to illusions and misperceptions. For instance, a shadow may be seen as an animal or hallucinations may be felt to be real [5].

During the writing of this report we learned how sight tests for people with a learning disability transformed peoples’ lives. Kirklees Blind and Low Vision Group feel strongly that people with dementia, or a learning disability, should have access to regular sight tests and for more optometrists to register on the SeeAbility website.

**Sport and leisure**

In July 2012 the Federation of Disability Sports Organisations carried out research to look into the provision of sport activities for disabled people living in Kirklees. Some of the issues highlighted in the report were that people with a sensory impairment expressed a concern over safety in public swimming sessions and struggle to take part in organised classes or lessons as the instructor is not always understanding of their communications needs.
Kirklees Blind and Low Vision Group would like to know more about the progress in implementing the recommendations in the report especially those around sensory awareness training for staff and ensuring peoples’ safety.

Discussions locally highlighted the need to: improve access to mainstream leisure activities for people with a visual impairment; develop more inclusive leisure and sporting activities; and where necessary develop specific activities for people with a visual impairment including those with a learning disability and people with dementia.

**Education and employment**

Blind and partially sighted people are significantly less likely to be in paid employment than the general population or other disabled people. Only one in three registered blind and partially sighted people of working age is in paid employment. They are nearly five times more likely than the general population to have had no paid work for five years. Those with a degree or higher award still only have the same chance of getting a job as someone with no qualifications in the general population. Perhaps this is unsurprising, when nine out of ten employers rate blind and partially sighted people as either “difficult” or “impossible” to employ [3].

Kirklees Blind and Low Vision Group would like to see barriers to employment for visually impaired people minimised and recommend more work locally to ensure that health and social care recruitment and employment procedures do not discriminate against visually impaired people.

They also feel it is important to: make people aware locally about the support available through Access to Work; continue to develop opportunities for visually impaired people to build confidence and improve skills; and for information and support to be in place for those people who want to undertake lifelong learning/training.
Children and young people with a visual impairment
Kirklees Blind and Low Vision Group recommend work locally to identify how we measure up to the recommendations in the UK Vision Strategy (2013-18) regarding transition and identifying and addressing potential sight problems among children and young people to:

- ‘Establish or maintain a clear and smooth transition pathway from children’s and young people’s services to adult services, thus ensuring young people are enabled to fulfil their potential and build their confidence; and that rights to benefits and support are not lost during the transition. This applies equally to health services and social care services’.
- ‘Identify and address potential sight problems among children and young people. Plans should include increasing implementation and awareness of the National Screening Committee programmes that follow existing best practice particularly for those at higher risk of sight loss’.

6 How we will achieve our aim

The overall aim of this strategy is to improve outcomes for people with a visual impairment and prevent avoidable blindness across Kirklees reducing demand on high cost services. Using the themes of the Physical and Sensory Impairment Partnership Board Goals; ‘Seeing it my way’ outcomes; and national and local emerging evidence, the following objectives have been developed to help us achieve our aim.

For children, progression through the themes will be at an age appropriate level. Qualified Teachers of visually impaired children along with specialist support assistants, resource technicians and rehabilitation officers provide support from birth to adulthood in a variety of settings. These professionals will work in partnership with others to support the development of all key themes for visually impaired children.
Theme 1 - Living independently

Including: rehabilitation; equipment and assistive technology; communication; mobility; and transport.

Outcomes for people with a visual impairment:
- I can look after myself, my health, my home and my family
- I can make best use of the sight I have
- I can get out and about
- I have the tools, skills and confidence to communicate

Example of support currently available:
- Sight Kirklees Independent Enablement Services (SKIES) provide rehabilitation, equipment, information and advice
- Kirklees Council Sensory Service (adults) assess visual impairment support needs, provide information and advice and referral to specialist professionals and signposting relating to all aspects of independence
- Visual Impairment Team (Kirklees Education) includes pre-school, school support and rehabilitation training for children and young people
- Kirklees Visual Impairment network (KVIN) have computer and telephone equipment for people to view and try
- Low Vision Aid Services in north and south Kirklees

Key objectives of this strategy are for:
1.1 People with a visual impairment, where needed, to have access to local rehabilitation support
1.2 People with a visual impairment to have access to suitable equipment and assistive technology
1.3 People with a visual impairment to able to move around Kirklees independently and safely
1.4 People with a visual impairment to receive their full benefit entitlement
Theme 2 - Choice and control

Including: information and advice; leisure; social; and sport

Outcomes for people with a visual impairment:
- I have someone to talk to
- I can access information making the most of the advantages that technology brings
- I can get out and about

Example of support currently available:
- Eye Clinic Liaison Officers provide support at point of diagnosis
- Kirklees Council Transcription service provides a talking newspaper, search for audio books and information e.g. leaflets in different formats
- Kirklees directory of services for people with sight loss
- Kirklees Council Care Navigation Service to access community activities
- Directory of sport and physical activity for disabled people in Kirklees
- Various sporting activities including Kirklees disability swimming club, indoor bowling, and Goal ball for adults; and Actionnaires for 4-16 years and Flame club for over 14 years

Key objectives of this strategy are for:
2.1 People with a visual impairment to have access to information, advice and emotional support by knowledgeable people and in appropriate formats
2.2 People with a visual impairment to have access to, and a choice of, a wide range of leisure and social activities
Theme 3 - Active and equal citizens

Including: paid work; voluntary work; life-long learning; training; and involvement

Outcomes for people with a visual impairment:
- I have equal access to education and life-long learning
- I can work and volunteer

Example of support currently available:
- A variety of computer/IT training via voluntary organisations and community venues such as libraries
- Disability Employment Advisors at Job Centre Plus provide advice and support to take the first steps to employment
- Ambitions for Kirklees empowering and building the skills for work and independent living of young people and adults with disabilities
- Access to Work can offer practical and financial support for example specialist equipment, travel and a communicator at a job interview
- Supported Volunteering Service via Gateway to care (Kirklees Council)
- Kirklees Education Visual Impairment Team provides transition support from education to further education or work.
- Kirklees Blind and Low Vision Group provides an opportunity for people with sight loss to get involved in planning and developing services locally

Key objectives of this strategy are for:
3.1 People with a visual impairment to have access to local employment opportunities and opportunities to develop their skills and knowledge
3.2 People with a visual impairment to guide the development of services to support visually impaired people locally
Theme 4 - Health and well-being

Including: access to health and social care services; eye health; and self-care

Outcomes for people with a visual impairment:
- I understand my eye condition and the registration process
- I can look after myself, my health, my home and my family
- I can receive statutory benefits and information and support that I need

Example of support currently available:
- Health Trainers provide support and motivation on a range of long term health conditions
- Eye Clinic Liaison Officers act as a bridge between health and social care/community support
- Yorkshire Transport Services provides support for hospital appointments
- Visual Impairment identification cards
- Welfare Benefits (and quality of life) Assessments

Key objectives of this strategy are for:
4.1 People with a visual impairment to attend hospital appointments independently where they choose to do so
4.2 Visually impaired people with dementia or a learning disability to have equal access to eye care services locally
4.3 People with, or at risk of, a visual impairment, to understand and take responsibility for their own eye health
4.4 People with a visual impairment to receive the right eye care support at the right time
4.5 A clear and smooth transition pathway from children’s and young people’s services to adult services
Theme 5 - Prevention
Including: raising awareness and prevention of blindness

Outcomes for people with a visual impairment:
- I can look after myself, my health, my home and my family
- I can make best use of the sight I have

Example of support currently available:
- Various screening programmes such as: UK National Diabetic Screening; Glaucoma Screening; and Vision Screening Programme (4-5 years)
- Vision Screening at Child Development Unit (CDU) and Special Schools
- Stroke Pathway to diagnose sight problems and provide early intervention
- Basic Sensory Awareness e-learning package available to all council staff and Sensory Awareness Training for key staff
- Self-Care Hub

Key objectives of this strategy are to:
5.1 Collect and collate improved data on visual impairment in Kirklees
5.2 Increase activities to prevent avoidable blindness in Kirklees and delay visual impairment progression

Working in partnership and measuring success
Kirklees Blind and Low Vision Group have a critical leadership role and board members have an individual and collective responsibility to champion the changes required to ensure success in achieving the aim of this strategy. The group will do this by spreading clear and consistent messages about what we want to achieve; forming constructive relationships and engaging partners to support its implementation; thinking creatively and breaking down barriers.

In terms of feeding into the decision making process, the Partnership Commissioning Manager for physical and sensory impairments will feed into Kirklees Physical and Sensory Impairment Partnership Board and Integrated Commissioning Group for Physical Wellbeing, Ageing well and Independence. This group ensures a single approach to commissioning across health and social care services in Kirklees and includes representatives from Greater Huddersfield Clinical Commissioning Group, North Kirklees Clinical Commissioning Group and Kirklees Council.
7 Conclusion

The number of people with a visual impairment in Kirklees is set to increase alongside a growing older population resulting in more people living with a visual impairment alongside other complex health conditions such as diabetes, stroke, dementia and learning disability. Significant progress has been made over the last six years to improve the independence, involvement and quality of life for people with a visual impairment. This strategy builds on this progress and provides a framework to further progress over the next six years to help prevent avoidable blindness across Kirklees and shape local support.

The next step is to translate the recommendations in this report into an implementation plan that outlines: the actions needed; the people responsible for making them happen; the timescales; and what success will look like. Kirklees Blind and Low Vision Group will monitor the plan on a regular basis and continually update as progress is made, taking into account new emerging issues and changes in laws, policy or service provision that may affect the plan, and address any areas not previously considered.

References

[1] UK Vision Strategy (2013-18), Setting the direction for eye health and sight loss services, a VISION 2020 UK initiative led by RNIB


Appendices

Appendix A – Visual impairment data
Appendix B – National and local drivers
Appendix C – Services locally
Appendix A – Visual impairment data

Nationally
The UK Vision Strategy tells us that currently ‘2 million people across the UK live with sight loss’ and by 2020 this number will have increased by 22%.
- ‘The vast majority of people with sight loss are older people, although an estimated 80,000 working age people and in excess of 25,000 children in the UK are affected by sight problems’.
- ‘Around 980,000 of people live with irremediably or certifiable sight loss. The leading causes are age-related macular degeneration (AMD), glaucoma and diabetic retinopathy’.
- ‘Cases of diabetic retinopathy show the most marked increase, particularly among the over-65s, where figures have more than doubled’.

Locally
The collection of local data can help us to identify where there are gaps in support. It can also help us to target prevention activities at high risk groups to lessen the likelihood of visual impairment and raise awareness of eye health.

In 2014 it was estimated that 170 people aged 18-64 living in Kirklees had a serious visual impairment and 6,123 people age 65 years and over had a moderate or severe visual impairment which was predicted to rise by 12% to 6,862 by 2020.

At February 2014 6,976 people were known to Kirklees Council as having a visual impairment representing approximately 1.6% of the total population:
- 5,635 (81%) were 65 years and over
- 97 (1%) were deaf blind
- 4,950 (71%) were dual sensory loss
- 4,521 (65.5%) were female and 2,379 (34.5%) were male
- 2,755 (40%) were from north; and 3,760 (54%) were from south Kirklees

The above figures include those people registered as partially sighted or blind that have been issued with a Certificate of Visual Impairment (a legal document provided by Ophthalmic Consultants at the time of registration). Kirklees Council register of blind/partially sighted people showed at 1st April 2014:
- There were 1,889 people registered with a visual impairment
- 1007 (53%) were registered as blind or severely sight impaired
- 882 (47%) people were registered as partially sighted or sight impaired
- The majority 1,334 (71%) were age 65 years or older
- 555 (29%) were between the age of 18 and 65 years
Eye conditions

The National Eye Health Epidemiological Model (NEHEM) Website accessed May 2013 tells us that in Kirklees:

- There is a best (mean) estimate of 3,338 cases of Glaucoma - 1.42% of the 30 years and over population
- There are a suspected 13,268 cases of Glaucoma – 8,030 under 60 years and 5,238 60 plus years
- There is a high estimate of 11,510 cases of Cataracts - 6.54% of the 40 years and over population
- There are an estimated 2,090 cases of Neovascular age-related macular degeneration (wet AMD) - 1.69% of the 50 years and over population
- There are an estimated 13,554 Drusen cases – 10.94% of the 50 years and over population
Appendix B – National and Local Drivers

Kirklees Physical/Sensory Impairment & Long Term Conditions (PSI/LTC) Goals 2010-2020 was based on three consultation events during 2009. The aim is to show how things should be for people with a PSI/LTC by 2020 and is used by Kirklees PSI/LTC Partnership Board to help prioritise its work programmes; gain shared agreement on commissioning priorities; and act as a means of measuring our performance in improving services and support. The Blind and Low Vision strategy is one of a number of strategies to have fallen out of the 2010-20 Goals and shows what will be done to achieve the goals outlined under the themes: Living Independently; Choice and Control; Active & Equal Citizens; and Health & Well Being.

Kirklees 2008 Vision for Older People ‘Living life to the full’ was developed to help people aged 50 and over to plan for the future and find the information they need to live their lives to the full. The document recognises that most people over the age of 60 will need to wear glasses and the importance of caring for eyes is stressed under the theme Health and Wellbeing. People are advised to have regular eye tests, which are free to the over 60’s and can pick up early signs of eye conditions which they may not otherwise be aware.

The first Joint Health and Wellbeing Strategy (JHWS) for Kirklees 2013-2020 sets out a vision for improving the health and wellbeing of local people and reducing inequalities at every stage of people’s lives by 2020. It was developed by Kirklees Health and Wellbeing Board that took on its statutory duties in April 2013. The Board includes representatives from Kirklees Council; the two local NHS Clinical Commissioning Groups and Healthwatch.

The Care Act (2013) brings together existing care and support legislation into a new, modern set of laws that build a system around people’s wellbeing, needs and goals. It sets out new rights for carers, emphasises the need to prevent and reduce care and support needs, and introduces a national eligibility threshold for care and support.
Everyone Counts: Planning for Patients 2014/15 - 2018/19 by NHS England outlines a vision and purpose flowing from the single idea that they exist to ensure high quality care for all, now and for future generations. NHS England want everyone to have greater control over their health and wellbeing, supported to live longer, healthier lives by high quality health and care services that are compassionate, inclusive and constantly improving.

The Social Care for Deafblind Children and Adults Guidance 2009 defines deaf/blind as “if their combined sight and hearing impairment cause difficulties with communication, access to information and mobility. This includes people with a progressive sight and hearing loss”. This wide definition means that people do not have to be completely deaf and blind to be covered by the guidance that lists an important set of actions for Local authorities including: To identify, make contact with and keep a record of Deafblind people in their catchment area; To ensure that when an assessment is required or requested, it is carried out by a specifically trained person/team; and to ensure services provided to Deafblind people are appropriate, recognising that they may not necessarily be able to benefit from mainstream services or those services aimed primarily at blind people or deaf people who are able to rely on their other senses.

The UK Vision Strategy 2013-2018 (a Vision 2020 UK initiative led by the RNIB) has three strategic outcomes: Everyone in the UK looks after their eyes and their sight; Everyone with an eye condition receives timely treatment and, if permanent sight loss occurs, early and appropriate services and support are available and accessible to all; and a society in which people with sight loss can fully participate. Over 650 individuals and organisations played a direct role in developing the original strategy and people who use services were instrumental in its formulation. This powerful combination gives the UK Strategy a credibility that cannot be ignored.

‘Seeing it my way’ developed by the ‘sight loss sector’ and launched at the UK Vision Strategy conference in 2012 is a universal quality and outcomes framework for blind and partially sighted people.
Appendix C – Services locally

Services to support the Visual Impairment pathway in Kirklees:

Optometrist (Optician) - An Optometrist is a primary health care specialist trained to examine eyes looking for defects in vision, injury, ocular diseases and general problems. They test sight, prescribe and fit glasses and contact lenses and give advice and guidance on eye problems.

Ophthalmologist is a medical doctor who specialises in diagnosing and treating diseases of the eye. The Ophthalmologist may then judge whether they are eligible to be certified as a visually impaired person either sight impaired (partially sighted) or severely sight impaired (blind) and issue a Certificate of Vision Impairment.

Eye Clinic Liaison Officer (ECLO) service provides emotional support, information and advice. There are two ECLO’s in Kirklees based at Huddersfield Royal Infirmary and Dewsbury District Hospital. The ECLO service provides a bridge between the medical and social agencies involved in the sight loss journey and will refer or signpost as necessary. The ECLO will also check the Certificate of Vision Impairment and explain the process and benefits of becoming registered.
ECLO - Dewsbury and District Hospital Tel: 01924 512459
ECLO - Huddersfield Royal Infirmary Tel: 01484 342454

Kirklees Council Adult Sensory Service - An assessor from the team will contact the individual and can go to a person’s home and talk with them about how they are getting on and if there are any areas that they are having difficulty with. They can provide small items of equipment such as liquid level indicators, give advice on assistive technology, and provide information on and refer to other support including welfare benefits, rehabilitation or social work teams who can offer a Person led Assessment (PLA) which could provide a personal budget to be used to purchase care for a persons assessed need. Email sensory.services@kirklees.gov.uk Tel: 01484 414933
Text: 07973 464202 Minicom: 01484 456815 (By appointment only)
www.kirklees.gov.uk/sensoryservices

Visual Impairment Team (education) provide assessments concentrating on education and habilitation and working in partnership with other agencies to address social needs of children and young people with a VI. For school age children habilitation training is predominantly provided in schools but may also take place in the home and local environment depending on the level of need. Any training for pre-school children would be either in the early year setting or in their homes.
**Calderdale and Kirklees Local Optical Committee (LOC) Schemes**
North Kirklees, Greater Huddersfield and Calderdale Clinical Commissioning Groups have introduced several locally enhanced optometric services to reduce unnecessary referrals to hospital eye services, reduce patient anxiety with a greater number of patients being managed within the primary care setting. These services include:

- Primary Eye care Assessment and Referral Service (PEARS) pathway
- Pre- and Post-Operative Cataract pathway
- Glaucoma Referral Refinement (GRR)
- OHT (ocular hypertension) Monitoring pathway
- Screening for Diabetic Retinopathy

**Low Vision Aid (LVA) Services** – Are dedicated Orthoptic led services in north and south Kirklees. LVA services provide a low vision assessment; advice; provision of low vision aids such as magnifiers; as well as essential referrals to both consultants and the Eye Clinic Liaison Officer Service.
LVA service - Huddersfield Royal Infirmary Tel: 01484 342355
LVA service - Boots (Birstall Retail Park) Tel: 01924 472469

**Rehabilitation, Equipment, Support, Information and Advice** - People with sight loss often need support to learn how to do things which were once familiar. Working across Kirklees this specialist team works with the individual to enable them, where possible, to make the best use of their residual vision. A Rehabilitation Officer can provide practical help such as advice on lighting, colour contrasts and magnification as well as a wide range of equipment that can be viewed, ordered and purchased. Other examples include orientation and mobility training to use a long cane safely outdoors to access their own environment and local services, make a hot drink and prepare a meal safely.
Loft 16, The Creative Lofts, 15 Northumberland St, Huddersfield
Tel: 01484 823198 Email: support@skies-bid.org.uk

**Transcription Service** - Kirklees Transcription Service creates alternative formats i.e. braille, large print and audio for people with a visual impairment. They can also produce tactile images such as maps, plans, diagrams and simple pictures. The service is open to people with a visual impairment and to organisations wanting their documents in alternative formats. There is also a drop in service providing support and information around issues relating to visual impairment.
Huddersfield Library, Princess Alexandra Walk, Huddersfield, HD1 2SU
Tel: 01484 221955 Email: transcription.service@kirklees.gov.uk
Voluntary and Community support:

**Better Future for the Blind** is run by volunteers and works in south Kirklees to provide outings, exercise sessions and a befriending service. Tel: 01484 542320 Email: betterfuturefortheblind@yahoo.co.uk

**Colne, Holme and Dearne Valleys Society for the Blind** is run by volunteers and works in south Kirklees offering home visits, information and advice. There is also an annual Christmas gathering. Tel: 01924 848549

**Huddersfield Society for the Blind** provides activities and facilities to blind and partially sighted people living within the Huddersfield area. Facilities offered by the society includes social activities – once a month, day trips, town hall concerts, holidays, transport and bus escorts.: Tel: 01484 538384

**Kirklees Visual Impairment Network** is a user led organisation promoting equal inclusive access to all products, services and environments and provides educational, training and social activities for visually impaired people across Kirklees. Tel: 01484 817584 Email: info@kvin.org.uk

**Macular Society** is run by volunteers and covers all of Kirklees and Calderdale, specifically for people with Macular disease the society provides meetings usually including a speaker, at the start of meetings people are met at the door and escorted to their seat. Days out are also organised. Website: [www.macularsociety.org](http://www.macularsociety.org)

Kirklees Blind and
Low Vision Group

Visual Impairment Strategy

March 2015