

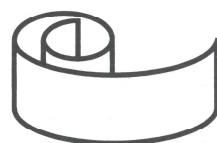
Visual Impairment Benchmarking Study Summary Report

January 2006



WLGA • CLILC

W C B



C C D



Llywodraeth Cynulliad Cymru
Welsh Assembly Government

Contact

Welsh Local Government Association

Local Government House
Drake Walk
Cardiff
CF10 4LG

Tel: 029 2046 8600
Fax: 029 2046 8601

Published: January 2006
ISBN: 1 901719 65 0

www.wlga.gov.uk

www.wcb-ccd.org.uk

www.wales.gov.uk

CONTENTS

INTRODUCTION	4
Background to the project	4
Establishing the principles of performance management in the public sector	5
Project Scope	6
Project Co-ordination	8
The Report	8
EXECUTIVE SUMMARY	10
VISUAL IMPAIRMENT AND ITS SERVICES IN WALES	10
Assessing local need	17
Service planning and review	20
Examples of PIs currently used by councils in visual impairment services	20
Consultation and user engagement	20
Service levels and structures	22
Staff development, recruitment and retention	24
Recommendations	25
Information provision	26
Recommendations & Recommended PIs	29
Referral, assessment and rehabilitation planning	30
Recommendations & Recommended PIs	34
Children and young people	36
Recommendations & Recommended PIs	37
MONITORING PROGRESS	38
APPENDIX 1: BIBLIOGRAPHY	39
APPENDIX 2: GLOSSARY	40
APPENDIX 3: BENCHMARKING GROUP MEMBERS	42

INTRODUCTION

Background to the project

In March 2003 the Association of Directors of Social Services (ADSS) in Wales agreed to support the establishment of a benchmarking club to consider visual impairment services in Wales, which had been requested by Wales Council for the Blind (WCB). Alongside ADSS and WCB, the work has been supported by all Welsh local authorities, the Welsh Assembly Government, Social Services Inspectorate in Wales (SSIW), the Royal National Institute of the Blind (RNIB) Cymru and various other voluntary organisations working with and for visually impaired people in Wales.

The group embarked upon a detailed benchmarking study which was facilitated by the Syniad Benchmarking Centre, subsequently subsumed into the Improvement and Governance Team of the Welsh Local Government Association (WLGA). The study provided an opportunity to conduct an assessment and comparison of current levels of capacity and performance levels across Wales.

Benchmarking can serve the following purposes:

- supporting local government to meet the requirements of the Wales Programme for Improvement;
- developing service and practice standards that can be recommended nationally; and
- understanding the current levels of capacity within local government and the good practice that is being delivered, and providing evidence of service impact and outcomes.

A key benefit from the study has been the opportunity to explore crucial links between services for people with visual impairment delivered respectively by social services, other local authority departments, health and partner agencies across sectors. Promoting better joint working will be key in driving up performance and standards in this service area.

The benchmarking study builds upon recent work undertaken by ADSS Wales to develop suggested inspection standards for services for people with sensory impairment, and studies undertaken by SSIW on this area of service in Wales. The recommendations and service standards coming from the study are consistent with the generic standards for sensory impairment services identified by ADSS.

Establishing the principles of performance management in the public sector

In their drive for high quality and responsive local services, both the Assembly and Westminster governments are clearly committed to establishing a culture of performance management within local government and the public sector. The relationship between performance management and benchmarking is close as both seek to:

- identify and state organisational/service objectives;
- have in place appropriate performance measurement systems to measure organisational/service performance against objectives;
- conduct data gathering and analysis;
- move from performance measurement to establish a 'Performance Reference Point';
- be in a position to be able to compare and contrast performance with other providers of services and make judgements on comparative performance levels;
- conduct process mapping;
- be able to define Critical Success Factors i.e. the high level objectives of the organisation/service;
- develop practice standards;
- promote self assessment and validation of performance;
- initiate action planning; and
- identify a programme of training related to the above.

The relationship between performance management and benchmarking becomes clearer if it is understood that a benchmark is a performance reference point, against which measurement and comparison can be made.

"[Benchmarking is].... a systematic approach to a business improvement where best practice is sought and implemented to improve the process beyond the benchmark performance."

'Benchmarking – the Challenge', the Department of Trade and Industry, March 1995.

The principles of performance management were formally established within local government under the Best Value framework, which took statutory effect from 1 April 2000. The Welsh Assembly Government viewed informed comparison as important for an effective Best Value service review.

“Comparisons are an invaluable tool for learning but it is recognised that they are only an approximate means of indicating success and failure. The learning potential of comparison is that they identify differences and allow us to search for explanations of those differences. The explanations will inform choices on alternative processes, objectives or priorities.”

*The Local Government Act 1999, National Assembly for Wales
Circular 14/2000, Page 17*

The Wales Programme for Improvement, which has superseded Best Value in Wales, maintains a requirement on local authorities to secure continuous improvement in the way in which they exercise their functions. Comparison remains an invaluable tool by which councils can self assess, learn from each other and identify and apply best practice.

Project Scope

The approach to the benchmarking project was to initially develop a **service profile** of visual impairment services. This was developed by gathering data from all participating authorities, taking into account:

- the organisational location and profile of the function;
- service costs;
- service resources;
- staffing – numbers and grades;
- service responsibilities;
- service priorities;
- use of ICT;
- relationships with other agencies and forms of inter-agency working;
- service quality;
- staff training;
- current performance levels;
- alternative methods of service delivery;
- staffing levels;
- service income;
- health and safety risk assessment; and
- e-government

Following consideration of these areas, the visual impairment benchmarking club agreed initially to focus its work on the following key areas:

- **information provision;**
- **service user involvement and consultation;**
- **referral, assessment and rehabilitation planning; and**
- **services for children and young people.**

The benchmarking study has provided a welcome opportunity for professionals in the visual impairment field to work together to identify measures which could improve the level and quality of service provision, thereby raising the profile and impact of visual impairment services in Wales. Implementing the recommendations contained in this report will require clear and tangible ownership and commitment by policy makers and managers at both national and local levels. Implementing some of the recommendations may require additional or reallocated funding, but we are confident that the majority are achievable through changed practice and efficiency gains achieved through revised structures and processes, rather than extra cost. Opportunities will also be taken wherever possible to achieve greater efficiency, in the form of higher levels of service delivered with the same amount of resources.

In addition to the report, a set of four **Good Practice Guides**, containing recommended service standards against key activities, have been produced and will be made available to participating authorities and other interested parties.

The study has benefited from contributions of professionals and stakeholders from a variety of sectors. This gives us confidence that this report provides a route map to vastly improved visual impairment services in Wales, in terms of quality and responsiveness. For that reason, whilst there will be no compulsion on local authorities to implement the recommendations or meet the standards contained in the Good Practice Guides, we would strongly urge councils to take them on board. In addition to re-evaluating their own services, we would also encourage social services departments to adopt a 'championing' role within their areas, promoting and encouraging better practice not only within their own services, but in other parts of councils and, indeed, among partners in the statutory and community sectors. We also support strongly the development of clear strategies for visual impairment services, and a greater profile for these in higher level plans such as Health, Social Care and Wellbeing Strategies.

The standards and recommended practice emanating from the study will not become part of the formal inspection framework for Social Services Departments and other local authority services. However, inspectors could use them as a tool in assessing councils' progress in these areas when undertaking programmed inspections.

Project Co-ordination

Syniad Benchmarking Centre was originally commissioned to co-ordinate and facilitate this study by working with the benchmarking club membership. In June 2004 the Centre closed, responsibility for this and other ongoing benchmarking studies transferring to the Improvement Governance team of the WLGA.

In coordinating the project, the Benchmarking Centre, and latterly the WLGA's Improvement and Governance team, have sought to demonstrate the application and value of benchmarking through performance comparison. The working approach uses the principles of performance management and works through the cycle of:

- performance measurement and comparison;
- developing good practice; and
- achieving service improvement.

The Report

This report has been made available to all organisations that participated in the study, and is available for sale to other interested parties.

The report comes in two parts. The first comprises:

- an **executive summary**;
- **introduction to the service**; and
- a summary of the **key strategic and service issues** identified, along with **key recommendations** and **suggested performance indicators (PIs)**.

The recommendations have been endorsed by members of the benchmarking group, representing both national and local organisations. Whilst there is no compulsion on local authorities or their national partners to implement the recommendations, the benchmarking group hopes that as far as practicable they will be taken on board.

Performance measurement in Wales is undergoing a fundamental review, with national and local partners working together to redesign the national set of Performance Indicators (PIs) that all councils are required to report against, and to develop more detailed 'core sets' of PIs in specified areas of service that councils can use for their own monitoring services. The recommended PIs contained in this report do not form part of either the national or core sets, and their use by councils is entirely a matter of local choice. However, their design has benefited from extensive discussion between practitioners across sectors, and the benchmarking group is of the firm belief that, alongside obligatory PIs they provide a potentially valuable tool for measuring performance, assessing trends and setting future targets.

The second part of the report contains detailed data analysis undertaken as part of the study, and accompanying charts and tables. The detailed analysis is also being made available electronically to authorities who wish to do further analysis at a local authority level.

Two principal themes are covered in the first part of the report. The first theme relates to levels of visual impairment across Wales and corresponding levels of service provision, the different forms that this takes, key areas of variation, and a number of issues that require attention nationally by representative and professional bodies. These will occasionally be issues that are outside the control of local government, which require consideration and attention by national partners, including the National Assembly for Wales and Welsh Local Government Association.

The second theme is about assisting local authorities to achieve continuous improvement in the selected aspects of visual impairment services. Specifically the report aims to assist local authorities to better understand current levels of service and identify opportunities for improved practice.

EXECUTIVE SUMMARY

Background

The majority of us take sight for granted. 90% of the information we receive about our surroundings and environment is visual. People without sight or with partial sight are therefore at an immediate and significant disadvantage in living their everyday lives and fulfilling their individual potential. The effects can be particularly acute when someone loses some or all of their sight suddenly at some stage of their lives.

Some 20,000 people are registered blind or partially sighted in Wales, although it is estimated that there are at least 60,000 more with serious visual impairment but who are not registered.¹

In recent years there have been significant strides in the development of policy and service delivery for people with disabilities, which have brought a number of benefits to service users, including vision impaired people. Recent legislation and the rights agenda have triggered considerable progress in this area. However there is still much to be accomplished in the provision of services to meet the specific needs of visually impaired people.

Visual impairment benchmarking study

This is why in 2001 Wales Council for the Blind approached the Welsh Local Government Association with a view to establishing a project to benchmark the service for people with visual impairment, concentrating on social services. In March of 2003 the ADSS in Wales agreed to support the establishment of a benchmarking club to look at visual impairment services across Wales. The project has benefited immensely from the support and direct involvement from the outset not just of the ADSS, but also the Welsh Assembly Government, SSiW, all 22 Welsh councils and voluntary organisations including RNIB Cymru and local societies for the blind. The study sits alongside other recent work carried out by the ADSS on developing standards for sensory disability services, and takes full account of national changes such as the introduction of the Unified Assessment Process in Wales.

¹Source: Welsh Health Survey 1998

The study provided a unique opportunity to conduct an assessment and comparison of current levels of capacity and performance levels across Wales. It has led to the formulation of recommendations in key areas of service, namely provision of information, referral, assessment and rehabilitation planning, and services for children and young people. These recommendations are accompanied by a comprehensive set of service standards on these service areas, contained in a series of Good Practice Guides, and designed to help managers and staff plan improvement in their own local areas.

Visual impairment services in Wales

Identifying the total need for visual impairment services in a given area presents local authorities with a considerable challenge. It is widely acknowledged that alongside people registered as having a visual impairment, there is likely to be a significant number of people in any location who are not formally registered but who nevertheless experience the limitations of a visual impairment. In some cases this might be due to them not being aware of the registration process, in others there may be a reluctance to admit need and to seek assistance from an outside agency. Authorities need to find effective ways of 'seeking out' these people in order to ensure they receive appropriate help. Currently councils use a range of approaches to do this; however there is a recognised need to identify leading practice approaches and encourage authorities to adopt it in their own areas.

Visual impairment services typically do not enjoy a high profile within authorities or indeed social services departments, in terms of either exposure or resources. Staffing levels vary markedly across Welsh councils, levels having no obvious correlation with identified need in a given area. Nationally, councils are experiencing considerable difficulties in relation to recruitment and retention. One apparent contributory factor is the absence of a consistent approach to continuous professional development.

Service planning and review need to be strengthened, in order to secure appropriate levels of resourcing and ensure continuous improvement in services. Equally, feedback from users needs to be used more effectively to shape services.

Information provision

Provision of accurate, up to date and timely information on services available and how to access them is vital in empowering people with visual impairment. Improvements are needed on a number of levels. There is a need to broaden awareness within the population of what services are available and how they can be accessed. More precise information regarding services needs to be provided at 'first points of entry' such as eye clinics, GP surgeries and libraries. This information should be collected jointly across sectors to produce a comprehensive 'directory' for each area. Information on other services provided by local authorities and their partners should also be provided in formats accessible to people with visual impairment, in keeping with the requirements of the Disability Discrimination Act.

Referral, assessment and rehabilitation planning

Ensuring a swift and clear route from initial referral through specialist assessment to provision of appropriate rehabilitative support is vitally important for people with visual impairment. Each interaction needs to be sensitive to the needs of the service user, in order to ensure that users obtain the right services without having to experience the trauma of prolonged assessment interviews or delays between different stages of the process.

Currently, there is a significant variation both in how people with an identified visual impairment get a specialist assessment and how the assessment is carried out. Differences include whether or not the initial and specialist assessments are carried out face to face, and in a location selected by the user; time taken to complete stages of the assessment; and how successfully the full range of potentially eligible users are identified and helped through the assessment process. Ensuring appropriate and timely referrals to specialist visual impairment services from health agencies, or other parts of the local authority, is crucial, as is obtaining a general reduction in the time taken between initial referrals and the signing off of a rehabilitation support package.

Rehabilitation

Despite a general increase in staffing and other resources within visual impairment services over recent years, deficiencies in staffing levels and in the availability of professional development remain. This means that

available services provision is variable across Wales, and in a number of cases is inadequate. There are a number of suggested reasons for this, including problems with recruitment and retention, and inadequate levels of continual professional development. The detrimental effects in quality of rehabilitation services available are accompanied by weaknesses in the ongoing evaluation of provision and revision of rehabilitation plans where necessary.

Children and young people

Addressing the needs of children with visual impairment poses specific challenges. Often these children are not referred to social services at all. Those that do enter social services through specialist children's teams often do not receive a full specialist visual impairment assessment, diminishing their prospects of receiving appropriate and rounded support and enjoying maximum independence. Only 7 Welsh councils have a policy for working with young people with visual impairment. Visual impairment in children is often not picked up, or can be afforded a lower priority, particularly when one of a number of needs presented by an individual user, with detrimental effects on the overall quality of service and the life chances of the individual.

Less than half the authorities in Wales report having regular formal interaction between staff in social services and education to consider the needs of young visually impaired people. Formalised links between social services, education and other services within local authorities and the health sector are needed if there is to be better diagnosis of young people's needs in these areas, and the provision of appropriate services.

The way forward

This report and its implementation represent important first steps in our aim of achieving consistently high standards and continuous improvements in visual impairment services across Wales. Regular evaluation of the impact brought by the study on the quality of visual impairment services will be vital, and the benchmarking group propose regular 'progress' meetings in the future, providing a forum for sharing progress and exchanging experience and practice.

VISUAL IMPAIRMENT – AN INTRODUCTION TO THE SERVICE AND RELATED ISSUES

The majority of us take sight for granted. 90% of the information we receive about our surroundings and environment is visual. People without sight or with partial sight are therefore at an immediate and significant disadvantage in living their everyday lives and fulfilling their individual potential. The effects can be particularly acute when someone loses some or all of their sight suddenly at some stage of their lives.

Some 20,000 people are registered blind or partially sighted in Wales, although it is estimated that there are at least 60,000 more with serious visual impairment but who are not registered.¹

Society as a whole needs to make significant adjustments to both the physical environment and methods of inter-personal interaction so that visual impairment ceases to be an obstacle to an independent and fulfilling life. Appropriate levels of support need to be provided for people with visual impairment, to help them learn new skills to cope with life's regular tasks, and to ensure access to services which will help them maintain their dignity and independence.

Our shared aim as strategists and practitioners across sectors in this field must be to support people with visual impairment to live independently and in the manner in which they would if they were fully sighted. People with visual impairment are members of society with particular roles and interests – parents, professionals, homeowners, political activists and service users. They want to be involved in their communities in the same way as sighted people. This means giving them full access to services that emphasise empowerment and focus on the needs of the individual. Some of these will be specific for people with visual impairment – for example, rehabilitation services. Some will be generic services requiring modification or adaptation so that people with visual impairment can use them effectively. We must be able to provide and monitor those services to see that they are of reliable and consistent quality across Wales so that we can refer people with confidence along the client pathway.

We must not ignore the eventual cost to the services of not promoting independent living effectively. We know that general levels of physical and mental health are lower for people who are blind and partially sighted compared with the general population; we know that the

¹ Welsh Health Survey 1998

incidence of accidents is higher; we know that the need for support services is greater and that typically, entry to residential care is earlier than among the general population.

It has long been a matter of concern that, while service developments and improvements have been implemented effectively in relation to other groups of service users in health and social care, this has not happened in the case of visually impaired people. This has been due in no small part to a significant shortage of data about this service and the needs of service users in comparison with other groups. Recent years have seen significant strides in the development of policy and service delivery for people with disabilities, which have brought a number of benefits to service users, including people with visual impairment. Recent legislation and the rights agenda have triggered considerable progress in this area. However, there is still much to be accomplished in the provision of services to meet the specific needs of visually impaired people. The anticipated Strategy for Visual Impairment in Health and Social Care will set the standards which we all acknowledge as much needed.

This is why in 2001 Wales Council for the Blind approached the WLGA with a view to establishing a project to benchmark the service for visually impaired people, concentrating on social services. The project has benefited immensely from the support and direct involvement from the outset of the Welsh Assembly Government, SSiW, ADSS, all 22 Welsh councils and voluntary organisations including RNIB Cymru and local societies for the blind.

We believe that this report represents a watershed in the development of services for people with visual impairment in Wales, providing a comprehensive baseline on the quality and levels of services for people with visual impairment, and clearly presenting the opportunities and challenges councils and their partners face in developing these services in the future. Whilst good practice in this area can be identified across Wales, it is clear that levels and quality of service vary across the country. Whilst this is understandable, we need now to work together, sharing and learning from each other, to achieve consistently high standards across Wales. The Good Practice Guides, drawn up by specialist working groups concentrating on four key aspects of service, provide an invaluable framework for driving this collective progress and improvement.

We look forward to seeing the fruits of this work over the coming months and years, in the shape of even better, more coordinated and responsive services for people with visual impairment.

Recommendations

We recommend that:

- The issues and recommendations contained in the report be considered in depth by the Welsh Assembly and all Welsh local authorities, and appropriate measures be taken to implement them at a national and local level.
- The Good Practice Guides contained within the report be used by authorities, and as far as possible partner organisations, to measure and improve performance. We recommend initially that councils undertake an internal review of their current performance against the Good Practice Guide Standards, and use the results of this to inform internal action plans for improvement. This review should cover not just Social Services Departments but corporate arrangements, and the capacity of other relevant services within the authority that have a direct contribution to visual impairment services.

VISUAL IMPAIRMENT AND VISUAL IMPAIRMENT SERVICES IN WALES

This section of the report provides an overview of levels of visual impairment across Wales and the way in which visual impairment services are planned, delivered and evaluated in different areas.

Assessing local need

A basic means of identifying levels of need is to measure the number of people in a given area that are registered as having a visual impairment. Registration occurs typically following the issuing of a BD8 – effectively a certificate of blindness or partial sight – by an eye clinic. Once a BD8 has been issued, local authorities have a statutory obligation under the National Assistance Act to register the user. In some cases users can be referred to specialist teams dealing with sensory or visual impairment from another part of social services or the local authority. Such cases can then be taken on immediately, or referred back to the eye clinic for registration prior to specialist intervention, depending on local practice.

It is widely accepted that people who have been formally registered represent only a relatively small proportion of those with visual impairment in the population at large. Assessing the full extent of visual impairment including those not registered is not simple, although a number of different approaches have been developed across Wales. In one area the Local Disability Forum ran a household survey to assess different levels of need within the area, while in another the council has developed a form which captures the details of people making contact with social services who have a visual impairment which is not severe enough to qualify them for registration.

However the problem of identifying and responding to the needs of those who are unable or unwilling to present themselves to any official agency clearly remains.

The difficulty in assessing unmet need means not only that there is likely to be a high number of vulnerable people across Wales who are not aware of, or do not have access to, available support – but also that it is impossible to make any sensible assessment of levels and volume of service provision needed to meet the full extent of local need.

Service planning and review

Every local authority in Wales is now required to produce a Health, Social Care and Wellbeing Strategy, linked to an overarching Community Strategy, assessing need and setting service priorities and targets for its area based on those needs. These Strategies are a powerful means of raising the profile of specific services and focusing resources and effort on delivering them in partnership with other agencies.

Less than half of councils have sections within their plans containing specific service aims, objectives and targets for visual impairment services in their area. This suggests that there is still some way to go in raising the status and profile of visual impairment services to equal that of other disability services. Only 8 authorities report having a budget specifically dedicated to visual impairment services – in others the allocation for visual impairment services is subsumed into wider budgets. Whilst this in itself need not mean a constraint in resources for visual impairment services, the need is clear for effective financial management to ensure adequate budgetary provision in all areas.

Similarly, less than half of authorities have developed local standards and performance indicators to measure the quality of services, or set performance targets to drive ongoing improvement. Less than a third report that they regularly use sources such as epidemiological data, care management records, complaints, certification and registration records to measure outcomes against service aims, objectives and targets.

CASE STUDY: NEWPORT CITY COUNCIL

Newport City Council formed a Visually Impaired Development Group in 2003. The group's purpose was seen as promoting a partnership approach to planning and developing services for visually impaired people, and identifying ways of improving services through joint working.

Since its inception, the group has met quarterly, chaired by the Service Manager (Adults with Disabilities). The group has been multi-agency and has included user representation.

A number of areas have been tackled by the group, including:

- **production of information leaflets in large print, and plans to provide information on CD;**
- **discussions between the council, NHS Trust and the local voluntary organisation for people with visual impairment, on providing emotional support for people newly diagnosed with a sight loss; and**
- **introduction of an interim registration form pending the introduction of the new BD8 in Wales.**
- **Provision by the local association for the blind of visual awareness training to social services staff, and inclusion of refresher sessions in the department's annual training plan.**

An absence in many councils of strategic planning means it can be difficult to secure adequate levels of funding, or ensure that the resources available are appropriately deployed. The lack of meaningful performance information means that councils and their partners are often not well placed to objectively evaluate delivery and modify and improve services, identify and address service deficiencies, or recognise and learn from more positive trends in performance. A lack of information relating to users' preferred formats for information, or where they live, further impedes effective planning.

Examples of PIs currently used by councils in visual impairment services

- number of referrals responded to within 10 working days;
- number of rehabilitation plans prepared within 5 days of specialist assessment;
- percentage of rehabilitation plans reviewed annually; and
- percentage of care plans reviewed annually.

Consultation and user engagement

Engaging service users in the planning and evaluation of services is vital if the services provided are going to be truly responsive to changing needs and expectations. This is true of local services generally, but the need is made greater in the context of specialist services provided to a client group with specific and challenging needs.

There is some encouraging practice in this area across Wales, and other respects in which improvements are clearly needed. It is encouraging that 18 councils are actively involved in establishing and maintaining user support groups for people with visual impairment.

CASE STUDY: TORFAEN COUNTY BOROUGH COUNCIL

Specialist social workers in Torfaen have established a gentle exercise class, a fitness group that meets at a local leisure centre and 2 information technology classes helping users work towards a Computer Literacy and Information Technology (CLAIT) qualification.

Combined with the stated objectives of improved health, learning, wellbeing and social inclusion, these groups play a vital role as forums for obtaining user feedback and views and ideas on service development. As a result of ideas emanating from these groups, the Council has organised an information day for service users and provided support for users in the development of assertiveness.

The same number of authorities run periodic postal surveys inviting users to comment on the services they have received, with telephone surveys and focus groups being used by an increasing number of councils. Other approaches that have been used include workshops for providers and users, incorporating questions relating to visual impairment as part of generic council surveys, and providing the opportunity for electronic feedback via websites.

Although only 7 councils report having a formal policy or strategy for consulting with users and potential users of visual impairment services, just over half of Welsh authorities have a structured framework for feeding back the results of consultation to those that were involved, and more widely to service users. Ensuring this happens is vital if confidence in consultation processes are to be developed, and greater participation encouraged.

16 councils report having processes in place to feed consultation findings into the future planning, commissioning and evaluation of visual impairment services. However, there is a recognition that these need to be refined, and that mechanisms need to be put in place in all authorities to ensure that consultation data informs the future development of services.

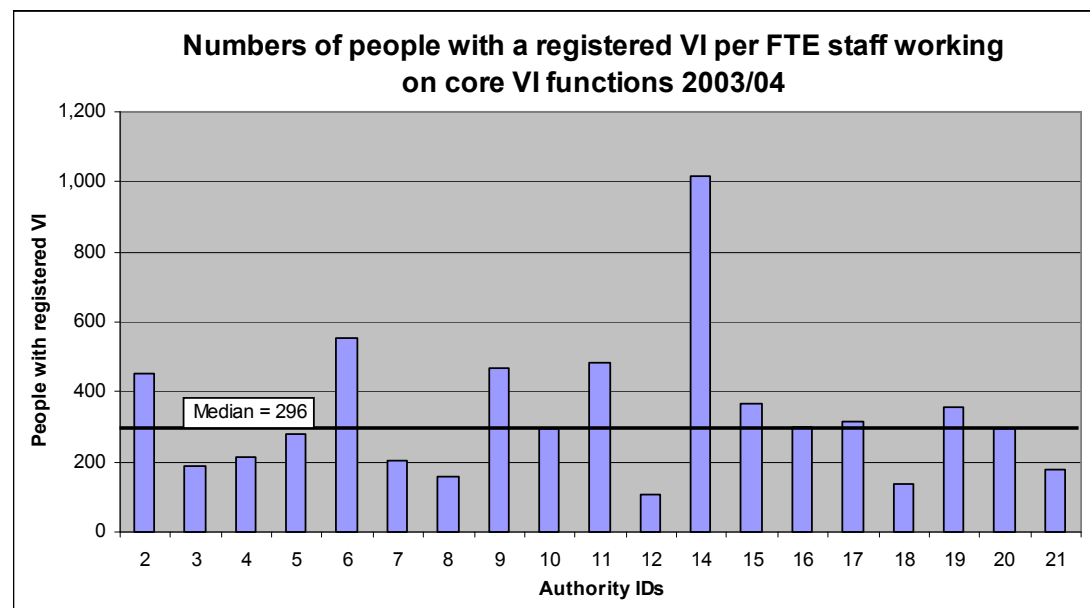
CASE STUDY: FLINTSHIRE COUNTY COUNCIL

Flintshire County Council and the Flintshire Local Health Board (LHB) have established a strategic partnership which meets quarterly to plan and evaluate services for visually impaired people in the County. The partnership comprises representatives from statutory agencies and the voluntary sector, and includes user representatives. Funded by the County Council, the partnership provides an invaluable vehicle for ongoing consultation and dialogue with users of visual impairment services in Flintshire.

Service levels and structures

There is a very mixed picture across Wales when it comes to the size and shape of visual impairment services. Approximately half of Welsh councils have dedicated sensory services or impairment teams, whilst in other councils visual impairment and other sensory services are incorporated into specialist teams with a wider set of responsibilities.

Staffing levels also vary considerably, with councils having between 1 and 9.1 Full Time Equivalent (FTE) staff working in visual impairment (including managerial and admin staff). The median figure across Wales is 3 FTE. Actual staffing levels do not appear to have any direct correlation with the number of local people with a registered visual impairment, as evidenced by the following graph which shows the numbers of people with a registered visual impairment per 'frontline' FTE working on core visual impairment functions (excluding managerial and administrative staff).



This suggests a widely varying ratio of FTE staff per person registered with a visual impairment, from 1 FTE per 1,019 people, to 1 per 109.

A number of authorities seek to broaden the scope of services available to people with visual impairment by commissioning rehabilitation and other support from partner agencies. One council, for example buys in services including rehabilitation, welfare benefits advice and a talking book service from its local Association for the Blind. Another buys in rehabilitation, supervision and specialist training from the Guide Dogs for

the Blind Association. Whilst this 'mixed economy' of provision is to be welcomed in that it provides enhanced levels of service and potentially more responsive support, it highlights the need for robust commissioning arrangements, and for providers across sectors to work effectively together in providing seamless and joined up services.

CASE STUDY: NEWPORT CITY COUNCIL

A DeafBlind Services Group was established in Newport in 2002. The Group meets quarterly, is chaired by the Service Manager for Adults with Disabilities and is multi-agency in nature. It has been involved in a number of tasks, including:

- **compiling a list of Deafblind people identified as per categories referred to in Welsh Assembly Government Circular 10/1;**
- **undertaking specialist assessments of those identified;**
- **developing specialist service provision through a working partnership with Sense Cymru;**
- **running a Multi-Agency Conference;**
- **developing a Training Policy for staff;**
- **ensuring that services for Deafblind people are also available for ligible users within Children's Services;**
- **focusing on specialist needs, for example Usher Syndrome, and considering how to meet them through service delivery;**
- **receiving presentations from users and their guardians on their service needs and experiences; and**
- **developing a strategy for future service development which will be included in departmental service plans and discussed within the Health, Social Care & Wellbeing policy groups.**

Staff development, recruitment and retention

Currently visual impairment services across Wales suffer from a lack of a clear, recognised career structure. There are particular problems in relation to rehabilitation services, namely:

- The service lacks a strong, recognised career path or clear route through to management.
- There is no consistent approach to continual professional development.
- Development and other support for staff are also inconsistent across Wales. Whilst all councils report providing regular individual supervision for staff, in most councils this is not undertaken by rehabilitation specialists. Other more innovative methods such as job-related training and cross-organisational peer exchange are used by only a small number of authorities.

Moreover, there is no standardised qualification structure for people working in visual impairment services generally, although commonly held qualifications include Diplomas in social work and rehabilitation, CSQW, Certificate in counselling and various levels of NVQ in care.

More than half of the authorities report having experienced difficulties in recruitment and retention of visual impairment staff. Suggested reasons for this include applications by unsuitable candidates, internal financial constraints forcing a freeze on recruitment, and a lack of benefits such as essential car user allowance for staff working in this field. Moreover, the general shortage of qualified workers in this area is well rehearsed.

The establishment of a Welsh programme for training rehabilitation workers is a goal long aspired to. Discussions are underway with the Welsh Assembly Government over funding such a programme. In the meantime, a WCB officer provides support to Welsh rehabilitation workers undergoing an existing course at the University of Central England, and a programme of seminars as a contribution to continuous professional development.

Good Practice Guide 3 contains detailed recommended standards in respect of staffing levels, structures and training and development.

Recommendations

We recommend that:

- Local authorities review their current arrangements for identifying need for visual impairment services within their communities. Local approaches should focus on awareness-raising and need to take into account national estimates of prevalence, alongside other factors such as age and deprivation profile.
- Social Services use data from local needs assessment to inform and review existing service levels and resource allocation. These levels need to be reflected locally within Health, Social Care and Wellbeing strategies, and should be reviewed regularly in consultation with ophthalmic practitioners, other partners and users.
- All Social Services Departments establish a specialist team of qualified workers for people with visual impairment.
- Each local authority considers identifying an elected member 'champion' for visual impairment services. They should be responsible for and effective in raising the profile of visual impairment services within the council and the wider community.
- A nationally sponsored research study be conducted on best practice approaches to consultation with people with visual impairment. These approaches need to provide ways for meaningful input by users into the planning, commissioning and delivery of services.
- The findings of the ADSS report 'Social Work in Wales: A Profession to Value' recommending the development of a national strategy for the recruitment and retention of social care workers, be applied to those working in visual impairment.

INFORMATION PROVISION

Provision of accurate, up to date and timely information on services and how to access them is a crucially important factor in empowering people with visual impairment and ensuring they receive appropriate levels of specialist services, and enjoy the same benefits from other services as the remainder of the population.

Problems in this area have been identified at a number of levels. Firstly, general awareness among the population, and particularly vulnerable groups, of visual impairment services appears to be typically fairly low although a number of authorities have launched initiatives to publicise services over recent years. Examples include:

- councils inviting a visit from the Action for Blind information bus to their area;
- regular awareness training for non-specialist staff in care homes, schools and carers; and
- holding open days at the local sight resource centre.

More critically, high quality information on visual impairment services available in a given area is not routinely available to users or potential users. Such information is not automatically available to people identified as having a visual impairment, usually at an eye clinic, nor is it consistently displayed in locations such as GP surgeries or libraries. This undoubtedly hinders awareness of services available and how to access them.

CASE STUDY: CONWY COUNTY BOROUGH COUNCIL

A social services presence in the Eye Clinic at Ysbyty Llandudno was established six years ago. The Social Worker attends the clinic twice weekly, working with nursing staff and ophthalmologists to promote social care and raise awareness of services available.

Patients attending the clinic are given the opportunity to speak to the social worker regarding their visual difficulties, and this discussion often takes place prior to them seeing medical staff.

Advice and information is available in the clinic setting and referrals are also taken for input from the Sensory Impairment Team at the County Borough Council or Low Vision Clinic.

The work is preventative and prepares patients for registration as either blind or partially sighted. The registration process can be extremely difficult for people adjusting to sight loss and can have an air of finality, especially when there is no further medical intervention available to them. Offering early advice on the process, and any rehabilitation services to which they are likely to be entitled, can significantly reduce anxiety and help prevent isolation.

Medical staff agree that the presence of a social worker in the clinic is a good practice and emphasises the benefits of partnership working.

More importantly, clients or patients can access information on services available at the most appropriate time.

However, a number of councils enter formal agreements with voluntary sector providers to support the development and provision of information on local services – for example, one council provides a joint directory of services in partnership with Vision Support, and another authority sponsors the production of a pilot information leaflet by Wales Council for the Blind. But the current picture is one of information being provided in an ad hoc and inconsistent manner, and there is no evidence that users across the country have equal access to timely, up to date and accurate information on services available and how to access them.

Finally local authorities need to take appropriate measures to ensure that generic information on their services is available to users in an accessible format, in accordance with the letter and spirit of the Disability Discrimination Act. Less than half of authorities have an 'accessible information strategy' to address the requirements of the Act, although a number of councils have supporting initiatives in place, such as corporate access strategies, and clear print guidelines outlining the use of appropriate fonts. The general picture is that councils are prepared to do their utmost to provide accessible information on request, but they tend to be reactive, and the onus remains very much on the user to make an initial request.

CASE STUDY: GWENT ASSOCIATION FOR THE BLIND

Responding to criticism of the local statutory authorities' performance in providing information in accessible formats, a joint health and social care working group was set up to review the issues and propose some key actions. An initial meeting included a presentation by RNIB Cymru and input from the local deaf community. After reporting back initial findings to the Council's Strategic Director for Corporate Governance and the Health, Social Care and Wellbeing Physical Disabilities & Sensory Issues Group, the Provision of Information in Accessible Formats (PIAF) group was formally mandated to identify some short term gains (for example standardising Arial 14 font in all publications) and outline a longer term strategy to improve performance in this key area.

Good Practice Guide 1 contains detailed recommended standards in respect of information provision.

Recommendations

We recommend that:

- Social Services Departments take proactive measures, working with health partners to ensure that appropriate information on specialist services, benefits and entitlements available to people with visual impairment is available at eye clinics, and all known points of access. This information should relate to services provided by the local authority and its partner agencies.
- Local authorities take proactive steps at a corporate level to ensure that all information and publicity relating to their services is available in formats accessible to people with visual impairment, as required by the Disability Discrimination Act, and Disability Equality Duty from December 2006.
- Official correspondence and communication between local authorities and visually impaired users be made available in preferred format.
- All contact databases held and maintained by local authorities and their partners include a field for preferred format for information and communication.

Recommended PIs

Percentage of people with a registered visual impairment whose preferred formats for information and communication is recorded by the authority.

Percentage of people with a registered visual impairment receiving personal information in preferred formats relating to (i) visual impairment services and (ii) local authority services generally.

REFERRAL, ASSESSMENT AND REHABILITATION PLANNING

Referral and assessment

Ensuring a swift and clear route from initial referral through specialist assessment to provision of appropriate rehabilitation is vitally important for people with visual impairment. Wherever people enter the system, it is imperative that they are treated sensitively, are signposted to services to which they are entitled, and receive appropriate levels of support within the shortest possible timescale. It is vital that prolonged assessment processes and delays between different stages are avoided as far as possible.

From April 2006, all local authority adult social care services are required to comply with the Welsh Assembly Government's Unified Assessment and Care Management Process. This is to ensure that all agencies, including the health service, take a holistic approach to assessing and managing care. Assessment and rehabilitation planning needs to be person-centred and proportionate to need. The duplication between health and social care agencies of information, assessments and paperwork should be minimised with advantages therefore for service users, their families and carers.

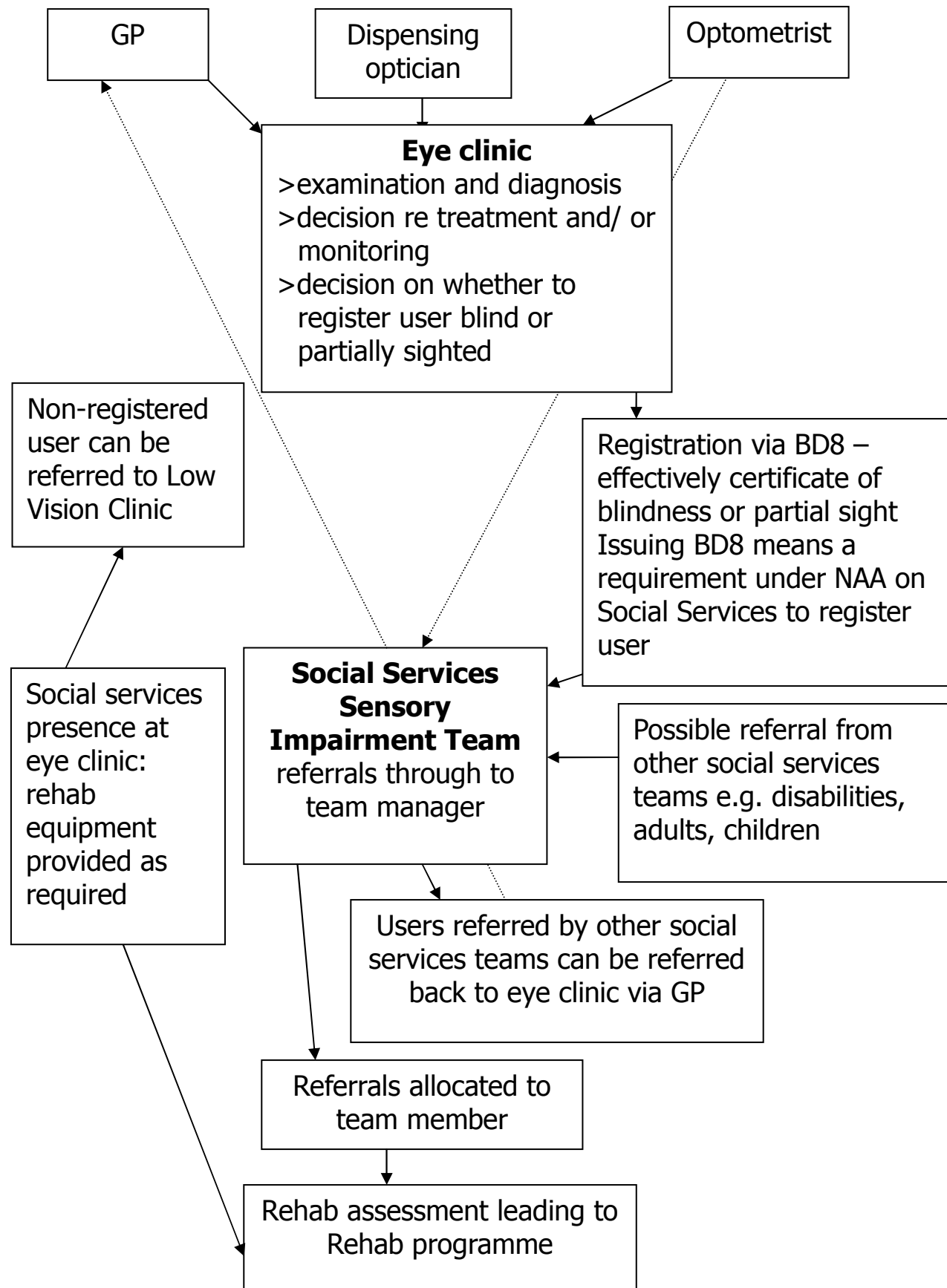
At the current time, there is a significant variation both in how people with an identified visual impairment get a specialist assessment and how the assessment is carried out. Differences include whether or not the initial and specialist assessments are carried out face to face, and in a location selected by the user, time taken to complete stages of the assessment, and how successfully the full range of potentially eligible users are identified and helped through the assessment process. A number of issues need to be addressed. These include:

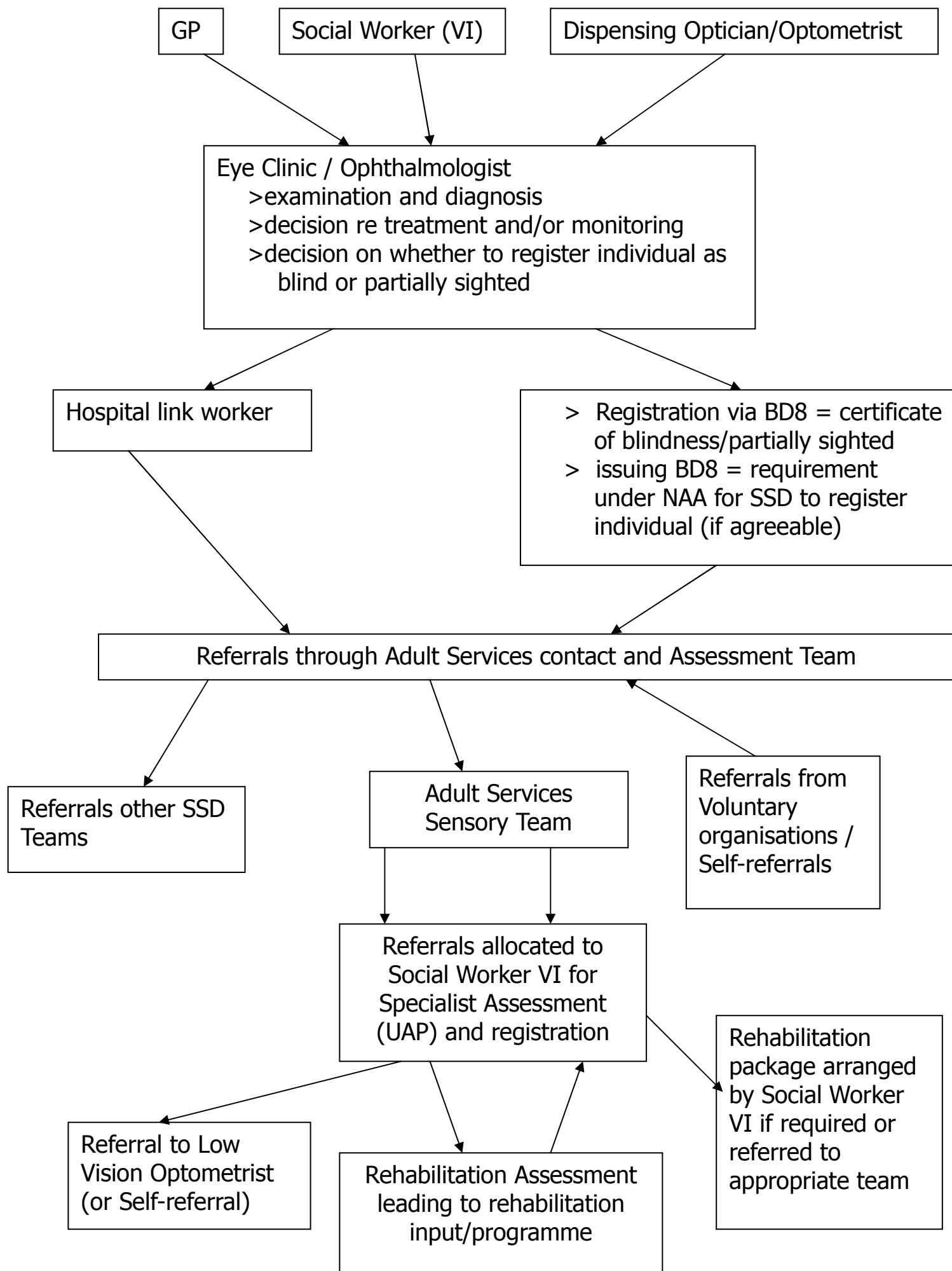
- Enhancing processes for accurate and timely referrals from health via BD8 registration.
- Ensuring appropriate referral to specialist sensory or visual impairment teams from other parts of the local authority, or points of access in the health and voluntary sector. This will require training and awareness raising among first point of contact staff in different parts of local authorities, and in other agencies.
- Reducing the time taken between initial referral to completing the specialist assessment and agreeing a rehabilitation package. Setting clearly defined targets and monitoring delivery against them is likely to help drive improvement in this area.

CASE STUDY: WREXHAM COUNTY BOROUGH COUNCIL

Specialist social workers for visually impaired people within Wrexham Social Services provide visual impairment awareness training to a cross section staff working in the authority. The training, which is provided on a regular basis and is usually over-subscribed, is aimed primarily at direct care staff and frontline staff. It aims to increase sensitivity and understanding to those dealing with people who are blind or partially sighted. The training is practical and covers a wide spectrum of issues, from eye conditions to daily living tasks, including mobility. The training team includes a blind service user whose contribution, which includes an account of their personal experiences, is usually regarded as the most valuable part of the course.

On the following page is an example of the referral and assessment processes in Rhondda Cynon Taf and Cardiff Councils:





Good Practice Guide 2 contains detailed recommended standards in respect of referral and assessment processes.

Rehabilitation

Once specialist assessment has been completed, it is crucial to ensure that people who are eligible for rehabilitation support receive a package of support that meets identified needs, is provided and supervised by appropriately qualified people, and is subject to regular review.

Practice and service quality varies across Wales in this area, with a marked inconsistency in levels of rehabilitation available, and the experience and qualifications of staff involved in providing and supervising support. Due in no small part to the difficulties encountered in recruitment and retention, a large number of councils do not have adequate numbers of staff, or suitably experienced workers, to manage and oversee rehabilitation plans. As well as having potentially detrimental effects on the quality of services provided, this also means that effective ongoing evaluation of the care, and revision of plans where appropriate, does not always take place.

Good Practice Guide 3 contains detailed recommended standards in respect of rehabilitation.

Recommendations

We recommend that:

- All people registered with an identified visual impairment be provided with an individual specialist assessment, unless specifically declined.
- Specialist assessment be carried out either by a social worker with a suitable qualification or experience in visual impairment services, or a qualified rehabilitation worker.
- Throughout the assessment process there is ongoing coordination with other specialist services as appropriate, in keeping with UAP requirements.

- The specialist assessment results in a written rehabilitation plan
- Local authorities ensure all first point-of-contact staff and staff involved at any stage in the assessment have initial visual impairment awareness training as part of their induction, and ongoing 'refresher' training at regular intervals.
- Formal mechanisms are established to ensure appropriate referral for specialist visual impairment assessment from children's and other specialist teams.
- Initial information on local services provided to people identified with visual impairment includes information about rehabilitation services.
- All users who have a rehabilitation plan in place receive regular reviews of the plan.
- All local authorities employ a minimum of one suitably qualified rehabilitation worker in place to manage this area of service (see Good Practice Guide 3).

Recommended PIs

- Number of people in local authority area with identified visual impairment
- Number of specialist visual impairment assessments conducted per annum
- Number of specialist visual impairment assessments conducted on behalf of non-registered people with a visual impairment
- Percentage of adults registered as blind or partially sighted who have received visual impairment rehabilitation from a specialist worker within the past year
- Percentage of people who have undergone specialist assessment who have a written Service Delivery Plan

CHILDREN AND YOUNG PEOPLE

Across Wales, many children and young people receiving specialist care through children's teams have a complex set of needs, which in a number of cases includes visual impairment. Evidence suggests that a significant proportion of these children and young people miss out on a specialist visual impairment assessment, either because the condition becomes 'lost' among their other needs, or because staff working in the children's teams are unaware of the services provided by sensory or visual impairment teams in the same authority.

This situation can be compounded where, as in the majority of cases, sensory and visual impairment teams reside solely in adult services. There is a continuing presumption in many authorities that children's social workers are best placed to deal with all aspects of care, and a lack of awareness of, or in some cases access to the services provided by specialist teams in other parts of social services to respond to specific needs among children and young people.

Only 7 councils in Wales have a specific policy for dealing with children with a visual impairment. Less than half of councils report having regular formal interaction between staff in social services and education to consider the needs of young visually impaired people. This can result in the needs of young people not being picked up or addressed, and mitigate against effective planning for transition arrangements post 16.

As a result, children and young people with a visual impairment frequently face diminished prospects of receiving appropriate and rounded support and enjoying maximum independence.

Good Practice Guide 4 contains detailed recommended standards in respect of children and young people.

Recommendations

We recommend that:

- Local authorities develop local policies for working with children and young people with visual impairment and their carers. Local policies should require that all children and young people with an identified visual impairment have access to the specialist visual impairment team within the local authority. The policies need to ensure appropriate sharing of information between specialist and children's teams.
- Similar arrangements be established with respect to users with learning and physical disabilities, who access these teams initially and are identified as having a visual impairment.
- Local authorities establish local policies for joint working between sensory / visual impairment teams and education, to ensure that children and young people with visual impairment receive a joined up and consistent services. These should include stipulated arrangements for transition to post-16 services.
- Rehabilitation assessment and relevant services be made available to all children and young people with an identified visual impairment.
- Local authorities take appropriate steps to raise awareness of visual impairment issues and services among staff working in children's and disability teams.

Recommended PIs

- Percentage of children registered as blind or partially sighted who have received visual impairment rehabilitation from a specialist worker within the past year.
- Number of specialist visual impairment assessments conducted on children per annum.
- Number of specialist visual impairment assessments conducted on behalf of non-registered children with a visual impairment.
- Percentage of children who have undergone specialist visual impairment assessment who have a written Service Delivery Plan.

MONITORING PROGRESS

The benchmarking group recognises that the production of this report and accompanying Good Practice Guides is only the first step in our aim of achieving consistently high standards and continuous improvement in visual impairment services across Wales. In order to ensure that this work has maximum impact over the coming months and years, the group considers it important that progress against the recommendations and standards that have been identified is monitored on a regular basis. One way of doing this would be to continue to meet as a visual impairment network on a regular basis, and take the opportunity to evaluate whether improvements are being achieved, and whether any further work is needed to support and promote better practice. In particular, through regular meetings of this type the network would be able to:

- consider how far the recommendations and standards contained in the Good Practice Guides have stimulated changes in local (and national) policy, resource levels, structure of services etc., and to identify the need – if any – for modifications to the recommendations and standards;
- determine whether, as intended, the outcomes of the study have provided a means for managers and staff working in this area to raise the profile of the service, and if not what the obstacles to this have been;
- report back on positive changes that have resulted from the study and share good practice with each other; and
- continue to discuss national and local policy changes and consider how best to respond to these at a local level.

Arrangements for facilitating and resourcing the network will be discussed further over the coming months.

If you have any comments on this report, or would like to provide your own views on the impact the study has made on visual impairment services in Wales, you can contact the visual impairment network through:

Vanessa Webb
Director, Wales Council for the Blind
3rd Floor, Shand House, 20 Newport Road, Cardiff, CF24 0DB
Tel: 029 20 473 954 / Fax: 029 20 433 920
Email: staff@wcb-ccd.org.uk

APPENDIX 1: BIBLIOGRAPHY

A range of source materials were used during the study. The key documents used for reference during the study include:

'Progress in Sight: National Standards of Social Care for Visually Impaired Adults' ADSS, RNIB and Guide Dogs, 2002

'A Sharper Focus: Inspection of services for adults who are visually impaired or blind' Social Services Inspectorate/Department of Health, 1998

Educational Services for Visually Impaired Children and Young People Welsh Assembly Government, 2004

The Role of the Rehabilitation Worker Wales Council for the Blind, 2001

APPENDIX 2: GLOSSARY

BD8	<p>The BD8 has been used since 1948 when the National Assistance Act stated that statutory bodies were to maintain records of those who were certified blind. It is completed by the Consultant Ophthalmologist in the hospital, recording the diagnosis level of vision present and certifying the individual as eligible for registration with the local authority Social Services as blind or partially sighted.</p> <p>The system in England has been revised where the BD8 is no longer used in its present form. The Welsh Assembly Government are currently reviewing the situation Wales with a view to altering the procedure similarly to England.</p>
Benchmarking	<p>A systematic approach to a business improvement where best practice is sought and implemented to improve the process beyond the benchmark performance.</p>
Community Strategy	<p>A strategic plan prepared by local authorities and their partners setting out how they will work together to promote the social, economic and environmental wellbeing of the local authority area.</p>
Good Practice Guide	<p>Written guides that enable services to assess current performance against minimum, good and better service standards as identified by the benchmarking study. They can then use these standards to set goals for future improvement.</p>
Health, Social Care and Wellbeing Strategy	<p>Statutory plans produced by local authorities and partners setting out how they will develop and improve services to meet the overall health, social care and well being needs of the local population.</p>

GLOSSARY (CONTINUED)

Local authority	A principal council, elected democratically and covering a defined geographical area responsible for a range of local services including education, social care, transportation and housing.
Performance Indicator (PI)	A measure of performance against objectives.
Performance management	The process by which an organisation achieves the aims and aspirations that define its purpose by setting direction and monitoring impact.
Process mapping	A logical step by step representation of business activities showing key inputs/outputs.
Rehabilitation	Rehabilitation is the process of maximising the independence and confidence of an individual by providing for example training in low vision, mobility, activities of daily living, sign-posting to others services and raising awareness.
Visual impairment	Visual impairment is one of the terms used to describe severe sight loss where medical solutions are no longer useful, resulting in functional difficulties.

APPENDIX 3: BENCHMARKING GROUP MEMBERS

Neil Abraham	Bridgend County Borough Council
Colin Allen	Carmarthenshire County Council
Dave Bamforth	Merthyr Tydfil County Borough Council
Jenny Beaton	Caerphilly County Borough Council
Nigel Bone	Newport City Council
Jill Bourne	RNIB Cymru
Carolyn Bowles	Flintshire County Council
Eryl Bray	Ceredigion County Council
Sue Browne	Torfaen County Borough Council
Isabell Bull	City & County of Cardiff Council
Nicola Bull	Torfaen County Borough Council
Liz Butterson	Wrexham CBC
Joyce Chatterton	RNIB Cymru
Michelle Chilcot	Bridgend County Borough Council
Andrea Cook	Torfaen County Borough Council
Helen Davies	City & County of Cardiff
Stuart Davies	RNIB Cymru
Susan Davies	Powys County Council
Nicola Davison	Merthyr Tdfil County Borough Council
Myfanwy DeFriend	Ceredigion County Council
Pam Dennis	Gwent Association for the Blind
Joe Dudley	Wrexham County Borough Council
Dafydd Eckley	Isle of Anglesey County Council
Angela Edmunds	Vale of Glamorgan Council
Diane Evans	Vale of Glamorgan Council
Mary Evans	Torfaen County Borough Council
Maureen Farley	Powys County Council
Melanie Firminger	Torfaen County Borough Council
Lucie Fowler	Pembrokeshire County Council
Matthew Gatehouse	Monmouthshire County Council
Martin Goodman	Welsh Local Government Association
Margaret Goodwin	Wrexham County Borough Council
Joanna Griffiths	Conwy County Borough Council
Tesni Hadwin	Conwy County Borough Council
Kirsty Hartley	City & County of Cardiff
David Hartwell-Williams	Torfaen County Borough Council
Vincent James	Torfaen County Borough Council
David Jervis	Blaenau Gwent County Borough Council

BENCHMARKING GROUP MEMBERS (CONTINUED)

Gordon Jones	Bridgend County Borough Council
Linda Jones	Carmarthenshire County Council
Margaret Jones	Wrexham County Borough Council
Mike Jones	Merthyr Tydfil County Borough Council
Gwenda Lewis	Rhondda Cynon Taf County Borough Council
Liz Lewis	Carmarthenshire County Council
Wayne Lewis	Ceredigion County Council
Paul Littlewood	City & County of Swansea
Shan Lloyd Williams	Isle of Anglesey County Council
Gerry Lynch	National Assembly for Wales
Tracy Martin-Smith	Pembrokeshire County Council
Martyn Palfreman	Welsh Local Government Association
Geraint Parry	Isle of Anglesey County Council
Gaynor Preece	Merthyr Tydfil County Borough Council
Deborah Price	Monmouthshire County Council
Janet Price	Pembrokeshire County Council
Myra Price	Powys County Council
Adrian Read	Caerphilly County Borough Council
Pauline Richards	Vale of Glamorgan Council
Stewart Robertson	Torfaen County Borough Council
Phil Robson	Powys County Council
Tom Shufflebotham	Powys County Council
Cath Simmonds	Powys County Council
Andrea Smith	Torfaen County Borough Council
Guy Stenson	Monmouthshire County Council
Paul Swann	Wrexham County Borough Council
Nicola Sweet	Rhondda Cynon Taf County Borough Council
Mary Taster	City & County of Cardiff
Jo Taylor	Flintshire County Council
Lyn Teague	Vale of Glamorgan Council
Glyn Tomos	Gwynedd Council
Jane Tonks	City & County of Swansea
Fiona Trolley	Torfaen County Borough Council
Anthony Troy	Neath-Port Talbot County Borough Council
Brenda Turner	Neath-Port Talbot County Borough Council
Annette Tyler	Blaenau Gwent County Borough Council
Evelyn Wigley	Ceredigion County Council
Andrew Winfield	WLGA
Eileen Woods	Denbighshire County Council
Steve Vaughan	Wales GSI
Vanessa Webb	Wales Council for the Blind