



Professional Name Change

RWPN is changing the way that we refer to our registrants. Henceforth, we will be referring to them as Vision Rehabilitation Specialists and Vision Habilitation Specialists.

RWPN is the professional body that represents both rehabilitation and habilitation professionals. We are a membership organisation and in September we consulted our members and registrants on the proposed name change. Over 40% of our 400+ registrants responded and 90% of respondents backed the change.

Why the name change?

The acronym ROVI (standing for Rehabilitation Officer Visual Impairment) is simply outdated, and - more importantly - does not reflect the multi-faceted and specialist support our registrants provide to blind and partially sighted adults, often in highly complex situations. These are situations, often at times of great social and emotional stress, that require carefully planned co-produced outcomes, and where risk is constantly being evaluated.

Vision Rehabilitation and Habilitation Specialists are required to be registered with RWPN to demonstrate fitness to practise and continued learning. RWPN's register is accredited with the Professional Standards Authority, the body that oversees the regulatory frameworks for statutory professions such as Occupational Therapists, Nurses, GPs, Pharmacists and many more. In October this year the Association of Directors of Adult Social Services (ADASS) endorsed professional registration with RWPN as best practice for employers in England.

The key to getting the support that blind and partially sighted people are legally entitled to, is to raise the profile and status of those that support them, particularly in settings where vision professionals are working alongside Social Workers, Occupational Therapists, GPs and mental health practitioners.

Raising the status of a workforce is not about self-promotion, it is about ensuring expertise is recognised and shared.

Although the term “ROVI” is often used in work with adults and will doubtless continue to be used in conversation, we believe its use underplays the specialist support our registrants can offer. In doing so, it inadvertently risks allowing health and social care services to ignore the severity of the barriers that face people who are blind, partially sighted or losing their vision.

We hope that our partners in the sector understand the need for this change and can support us by adopting the title Vision Rehabilitation Specialist in place of ROVI in written communications.

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