

'The aim is to work together'

Creating a shared identity.

The Low Vision Services Report in 1999 outlined the need for a network of Low Vision Services Committees (LVSC's). This linking process will help ensure that there is an increase in the number of services and that all initiatives are developed in line with the standards recommended.

The National Implementation Group has recognised the need to create some form of shared identity so that local Committees (LVSC's) would feel part of this country-wide approach.

To strengthen this idea a logo has been designed. Care has been taken to ensure that the design reflects the active nature of Low Vision Implementation work.

The design takes the side profile of an eye looking forwards. This helps promote the idea that the role of an LVSC should be to reflect the views of the service-user. The upper and lower part of the eye profile are formed from a stylised letter 'l' and letter 'v', a reminder that the process is about improving low vision services, with emphasis on enabling people to make best use of their eyesight. Within the eye profile there is a dot forming the pupil of the eye which has three further dots leading from it. This strengthens the idea of an active outward vision, but also supports the idea of a collective or group approach – the four dots representing the need to work together to influence change.

Hopefully, when you pick up this newsletter or are reminded of our logo in the future, you will remember the important issues it represents.

Inside: News from Camden & Islington and Tameside LVSC's

What's the new view?

Since the last issue 8 more LVSC's have been established. These are Brighton & Hove, Gateshead & Tyneside, Hillingdon, Leeds, Nottingham, Plymouth, Wakefield, and The Wirral. In addition it should be noted that the Bexley Committee listed in the Spring edition also includes the area of Greenwich.

The newest LVSC centre

At the risk of offending Sheffield, Bucks or one of the other early LVSC's it seems likely that the Camden & Islington Committee was the first Committee to form.

Over the last 2 years the Committee has worked hard and in June this year it opened a new LV Centre. **This is what Marek Karas, from RNIB, says about the new service.** "The Centre is based at the RNIB headquarters in Judd Street and is a partnership project between Camden & Islington Primary Care Trusts (PCT's), and Camden and Islington Social Services.

The centre is staffed by rehabilitation workers and optometrists experienced in low vision work. Initially a person may be seen at Judd Street or in their home - where information is gathered about their situation and their needs. At the centre the optometrists assess a person's sight using special tests to assess LogMAR visual acuity (resolving details), contrast sensitivity (faded/pale targets) and visual fields (peripheral vision).

The results are used to relate a person's seeing ability to the problems discussed in the initial assessment. Working with a user they establish what magnifying devices and other equipment can assist. Afterwards a low vision therapy session is arranged so that the use of the device can be explained and tried out in a real life situation.

As the centre is situated on the ground floor of the new RNIB building, people using the service have access to other facilities such as a fully equipped resource centre and library. In addition people may be directed to other RNIB services or linked into statutory Social Services."



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Who is who in low vision?

Orthoptists are regular members at 15 of the 32 Committees.
In 5 areas they have been crucial

in helping start up an LVSC.

What does an Orthoptist do?

Orthoptists undertake 3 years of graduate training which involves learning about brain function, eyes and eye disease. They are health care professionals who form part of the eye care team, working with opticians, nurses and ophthalmologists.



An Orthoptist at work

They are specially trained in vision development, how the eyes move and how they work together as a pair. In particular, they help people who have an eye turn (squint or strabismus), lazy eye (amblyopia) and those with double vision.

Using various tests and observational skills they assess seeing ability in adults and children. Treatment may be offered in the form of exercises, patches or special optical devices such as prisms. Because of their skills in observation and assessment some orthoptists specifically work with people who have other disabilities (including learning disability). These skills together with the familiarity of a team approach mean orthoptists are ideally suited to low vision work.

For more details the British Orthoptic Society (BOS) have an information booklet. This is available through the LVSIG. Or visit www.orthoptics.org.uk

LVSC activity

 Birmingham is just about to publish a service directory listing services available in Birmingham.

✓ Leeds LVSC meets as part of the Modernisation Team and has sent out a questionnaire to service users.

 Wakefield is working on a carepathway to identify gaps and problems in accessing services.
 Cumbria LVSC is considering splitting into 2 sub-committees to serve the different parts of the area.
 Solihull has been trying to secure a post for an Eye Clinic Liaison Officer to be based in the Eye Department at the hospital.

We have moved

The Birmingham Office of RNIB, where the Implementation Group Office is based, has moved to a more central position in Birmingham. Our new address is: Low Vision Services Implementation Group, RNIB, Borough Buildings, 58-72 John Bright Street, Birmingham B1 1BN.

Bringing people together

Often it is recognised that some sort of initiative is required to focus attention on local issues. In Tameside, an authority in Greater Manchester, this was provided by an 18 month project undertaken by Tameside Social Services (SS) and West Pennine Health Authority. The result was the creation of a new low vision service and the setting up of an LVSC to develop and monitor this service.

It is a very exciting development as it brings together the local rehabilitation team and local optometrists to meet the needs of people close to their own homes.

An additional strength is that as a result of collaboration between, Tameside and Derbyshire Social Services and Tameside and Glossop Primary Care Trust (PCT) a permanent Low Vision (LV) Worker post has been created to co-ordinate this service.

People in Tameside now find it easier to access services by linking in to one person. After contacting the service, or being referred into it, a person is seen in their own home by the LV Worker who assesses their needs and makes various recommendations. They then choose to see one of the 5 local optometrists dedicated to the project. A clinical assessment is made and any magnifiers/LV devices are supplied. The LV Worker then visits the person at home and works with them to ensure that they make best use of their eyesight and/or LV devices.



Practical LV work in Tameside

Not only is this a good example of providers working together, but the way the funding is organised demonstrates how it is possible to pool resources to meet needs. The LV Worker is funded by Social Services while the clinical assessment and devices are paid for by the PCT.

In our next issue (Autumn) we will be featuring the youngest member of a local Committee.

'Bold View' is a quarterly newsletter written and edited by Mary Bairstow for the Low Vision Services Implementation Group. Comments and contributions are welcome. Copy date for inclusion in the Autumn issue is September 30th 2002.

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