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Out of Sight Project Report



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Background to the Project

Henshaws Community Services enable people of all ages living with sight loss and a range of other disabilities to make informed choices about their future. We are here throughout their journey offering expert support, guidance and skills, helping people to fulfil their potential. Independence and friendship are at the heart of what we do to help people find the confidence to go beyond their expectations.

Our operational delivery model is our Pathway to Independence which can be seen below.

pathway to independence

Enabling people of all ages living with sight loss and a range of other disabilities to make informed choices about their future

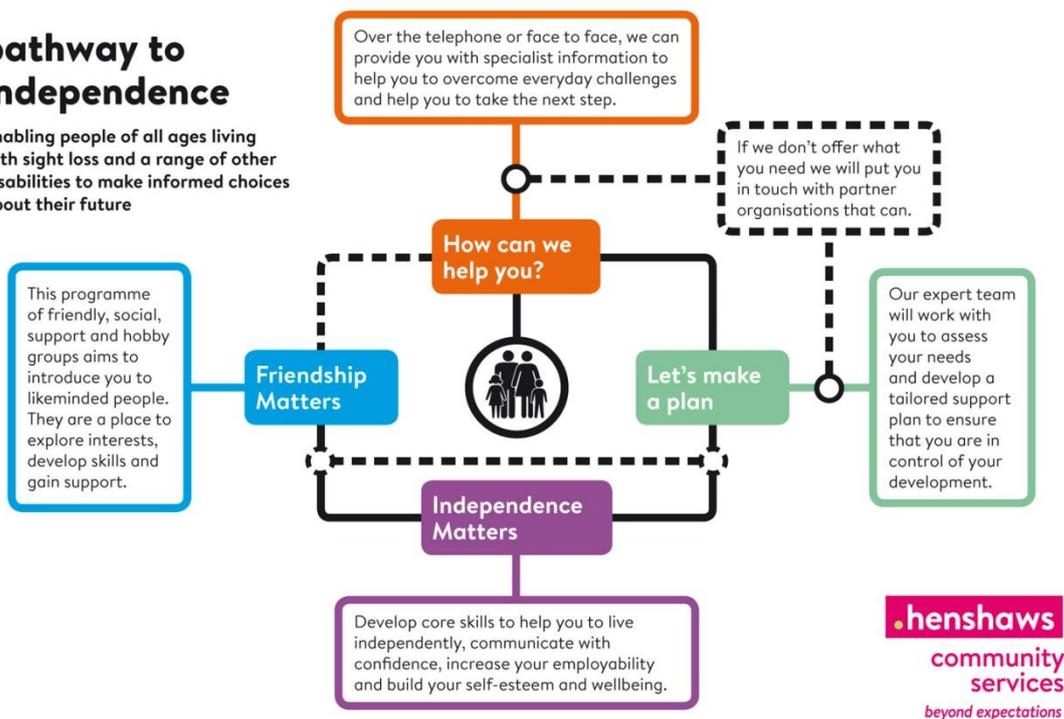


Fig 1

Henshaws Community Services operates across Greater Manchester and Merseyside responding to the specific needs of the communities in which we work and partnering with key organisations across the locations to achieve better outcomes for people with sight loss (Cooper, Ridgway and Doyle 2015).



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A key part of Henshaws' recent work has been the creation of our Knowledge Village. This is where and how we can share our expertise in all things visual impairment (VI) with VI people, their families and friends, professionals and partners - this project is a shining example of this in action. We also work with organisations who are working with people who may have sight loss - informing, enabling and supporting them to effectively support their service users.

In Greater Manchester, we have been working with the Ambition for Ageing (AfA) Equalities Board to find out if organisations know about the needs of older people with visual impairment and the simple, practical things they can do to make sure their services are easier for older people with sight loss to use. The Equalities Board (EB) is made up of older people who may have experienced discrimination and professionals from various organisations, and their role is to try and understand how different communities experience ageing. They are then able to advise the AfA Programme Board and delivery partners so that the programme is able to meet the needs of all older people.

This has been possible through AfA, which is a £10.2 million programme in Greater Manchester (GM) aimed at creating more age-friendly places and empowering people to live fulfilling lives as they age. It is funded by the Big Lottery Fund's Ageing Better programme, which aims to reduce older people's social isolation. The key objectives are to create places that are age-friendly and empower people to live fulfilling lives as they age, ultimately reducing social isolation.

The five-year project is aimed to help communities, businesses and public services work together to better understand what older people need and want.

The Ambition for Ageing project vision is to:

- Connect communities and people through the creation of relationships.
- Help to create places that are age-friendly and that will empower people to live fulfilling lives as they age.
- Embrace the celebration of age, creating the opportunity for people to contribute to the ageing agenda, offering choice and helping them to make more and better connections so that they can live fulfilling lives in their communities.

Henshaws, working with the AfA Equalities Board, aimed to make 24 organisations including Equalities Board member organisations, more aware of the issues facing older people with visual impairment and more confident about the simple changes that will



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their own services become more accessible. The project aimed to highlight the issue of VI and make organisations more confident in the steps they are able to take to prevent older people becoming further marginalised or isolated.

This report is based on the findings of an engagement event held with people who live in or around the Alexandra ward area of the town; and secondary and desk research focussed on current needs and provision in the area.

Project Aims and Methodology

The aims of the project were:

- To investigate what organisations in Greater Manchester working with older people know about visual impairment and how it might affect the people they work with.
- To offer free Visual Impairment Awareness Training (VIAT) to organisations working with older people to provide information and advice about simple, practical changes they can make themselves and where to go for additional support/advice.
- To assess whether the training changes anything in practice around raising awareness and meaning older people with VI are better supported and non-specialist organisations are better able to meet their needs.

The key outcomes of the project will be to provide:

- Insight into current provision for older people across GM and how accessible organisations are for people with sight loss.
- A further understanding of what works well in terms of VIAT and what else could be done to improve provision.
- A full report of findings to include recommendations.

Methodology

The methodology adopted for this project triangulated data from a range of sources to ensure depth and breadth of information.

Secondary and desk-based research was carried out to provide context and background and to map provision - this included analysis of the RNIB sight loss data tool, local



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strategic plans, and academic and other specialist sector research into the experiences of people with sight loss. Henshaws' own primary research findings from recent surveys and evaluations were also utilised to provide local context.

This was then followed by the primary research which consisted of:

- 1 x baseline survey to targeted organisations working with older people across GM using existing EB and allied organisations, and mailing lists.
- 1 x training feedback survey administered at the end of the training session to assess what had been learned and what changes could be made as a result of participating in the training.
- 1 x follow up survey to delegates 3-4 weeks post-training to assess any longer term impact and to see whether the delivery of training and support had changed anything within their organisations.

Context

Circumstances of older people

Older people in the UK currently face a range of factors which can impact on their quality of life, independence and health and well-being. Firstly, we know that the older population is increasing - between 2005/06 and 2015/16 the total number of people aged 65 or over in England increased by close to 21%, representing nearly 1.7 million extra people. The numbers of people aged 85+ in England increased by almost a third over the last decade and will more than double over the next two decades (Age UK 2017). There has at the same time been a £160 million cut in total spending in real terms on older people's social care in the five years to 2015/16 (Age UK 2017). The social care system in its current form is struggling to meet the needs of older people. Six consecutive years of cuts to local authority budgets have seen 26% fewer people get help (Humphries et al 2016). We also know that the numbers of older people attending accident and emergency (A&E) departments have increased significantly in the last five years (Age UK 2017). As well as being more likely to need emergency services, older people generally have health as well as care needs. By the age of 65, most people will have at least one long-term condition and by the age of 75, most will have at least two (Oliver et al 2014).



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There is also recognition at a Greater Manchester level that new ways of thinking need to be applied to tackle the issues raised by an ageing population. Twenty years from now in Greater Manchester:

- 1.1m people will be aged over 50, accounting for 37% of the population.
- 650,000 people will be aged over 65, with the fastest population growth among older cohorts. (New Economy and GMCA 2017).

Recent research carried out by Age UK shows that loneliness is a real problem for older people in the UK with the following key headline statistics indicating just how much of an issue it is:

- Over 1 million older people say they are always or often feel lonely.
- Nearly half of older people (49% of 65+ UK) say that television or pets are their main form of company.
- Loneliness can be as harmful for our health as smoking 15 cigarettes a day.
- People with a high degree of loneliness are twice as likely to develop Alzheimer's as people with a low degree of loneliness.
- Only 46% of over 65s said they spent time together with their family on most or every day, compared to 65-76% for other ages. 12% of over 65s said they never spent time with their family.
- Over 65s also spent less time with friends: only 35% spent time with friends most or every day in the last 2 weeks, and 12% never did.
- People who took part in more health-maintaining and independence-maintaining behaviours were less likely to feel isolated and more likely to feel that their community was a good one to grow old in.
- Nearly half (49%) of all people aged 75 and over live alone.
- 9% of older people feel trapped in their own home.
- 6% of older people (nearly 600,000) leave their house once a week or less.
- 30% say they would like to go out more often.
- According to research for DWP, nearly a quarter (24%) of pensioners do not go out socially at least once a month.
- Nearly 200,000 older people in the UK do not receive the help they need to get out of their house or flat.
- 41% of people aged 65 and over in the UK feel out of touch with the pace of modern life and 12% say they feel cut off from society. (Age UK 2014)



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The evidence shows that older people are facing a multiplicity of issues; however there is also evidence to show that working with communities to develop solutions and groups can have enormous benefits to the lives of older people. Peer support is a well-tested part of social care, mental health, physical health and, at an everyday level, it forms the basic structures of our families, friendships and communities, which practitioners and providers have long understood to be important to health and wellbeing. Less formal or specialist peer support is highly effective with older people. This group is often living with complex comorbidities of more than one condition. In neighbourhood networks, shared medical histories are less important than simple proximity and a shared social history, which enables frequent connection and mutual support. In other parts of our life we might call relationships like these friendships, and successful peer support results in friendships which are not necessarily defined by their health origins (Nesta 2013). Enabling older people to feel more connected and more embedded in their communities with access to social support through their peer networks can help to mitigate against all of the factors which can adversely affect their quality of life.

There are also significant societal benefits if social isolation among older people is improved. When people are socially isolated, there has been shown to be an increased use of health and social care services, a higher number of emergency admissions and GP consultations, and slower discharge from hospitals with the ensuing pressure on financial resources and health services. Being isolated deprives communities from older peoples' knowledge and experience, and the roles that they could play in communities and neighbourhoods. It is also clear that 'healthy' older people are more likely to be volunteers and to provide informal care which increases social connectedness and alleviates pressure on statutory services (Minocha et al 2016).

Projects such as Ambition for Ageing recognise that there are solutions which can be implemented to improve older peoples' lives. At a Greater Manchester level, the challenges of the ageing demographic led to the establishment in spring 2016 of the GM Ageing Hub. This was a landmark moment for ageing in GM, creating a mechanism via which action could be taken on a city-region basis to generate resource, insight and impact. The Hub's ambition is to establish the city region as an International Centre of Excellence for Ageing, built around a vision - for older residents to contribute to and benefit from prosperity and enjoy a good quality of life (New Economy and GMCA 2017).



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The circumstances of older people with sight loss

Many of the issues facing older people are compounded when people are also visually impaired - a double whammy.

Sight loss is closely linked to ageing:

- More than 10 per cent of over 65 year olds have some form of sight loss.
- One in five people aged 75 and over are living with sight loss.
- One in two people aged 90 and over are living with sight loss.

Recent research suggests that the circumstances of people with sight loss or visual impairment have significantly worsened in recent years and that statutory support is increasingly under pressure due to government cuts (Lord and McManus 2002; Byron et al 2013).

There has been a decline in the number of people receiving local authority provided social care and this has affected people with visual impairment more than some other groups. In 2005 and 2012 there was a 35% decline in the number of VI people receiving local authority social care compared with a decline of 16% for service users as a whole (Byron et al 2013). Not only was the recession more likely to have had a disproportionate impact on VI adults but they are seven times more likely to feel unhappy or be depressed than those with no VI; half of people with VI experience problems outside the home and are three times more likely to have difficulty accessing health care services (Lord and McManus 2012).

For older people with VI, the double whammy effect has a significant impact on their quality of life. They experience higher levels of depression and anxiety and there is a clear link between visual impairment and reduced psychological wellbeing for older people (Hodge, Barr and Knox 2010).

Older people with sight loss are at greater risk of social isolation than the general population. In a recent survey carried out by RNIB, almost 50% of older VI people lived alone; almost 40% never, rarely or only sometimes got as much social contact as they would like and a similar proportion could not make all the journeys they want or need to (Flynn and Lord 2015).

We also know that many older people have more than one health issue to contend with. However, visual impairment *“propels the disabling effect of other conditions - the double jeopardy of sight loss”* (Dr David Geddes, NHS England, presentation to National Optical



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Conference, 2015). Over 83% of older VI people also have additional health problems (RNIB 2015).

Again though, as for older people generally, with the right support and networks in place, older people with sight loss can lead fulfilling and independent lives. A recent RNIB report recommended the following:

“We must work together to ensure that those in later life are empowered to make their voice heard. Policy makers and those designing services should engage with older people with sight loss at all stages of the process.” (RNIB 2015).

Prevalence of Sight Loss in Greater Manchester

Alongside all the developments and the shifting landscape of health and social care and the circumstances of older people and those with sight loss, there is also evidence to show that there are more people with sight loss than ever before and the prevalence is expected to increase into the near future, with Greater Manchester no exception to this trend.

According to the latest figures, there are 15,150 people in Greater Manchester registered as sight impaired or severely sight impaired. This is almost 6% of the total registered population in England. The registered figures are only a small minority of the actual number of people living with sight loss, with an estimated 75,070 people currently living with sight loss in Greater Manchester. Of this total, 47,780 are living with mild sight loss, 18,420 are living with moderate sight loss (partial sight) and 8,870 are living with severe sight loss (blindness). Every day in Greater Manchester, another 2 people are formally certified with sight loss. By 2030, it is expected there will be 103,220 people in Greater Manchester living with sight loss, an increase of 37.5%.

In Greater Manchester:

- 16% of the population are aged 65 and over; 33% are aged 50 and over.
- There are 436,537 people aged over 65 in GM. 53,575 of these people are aged over 85.
- There are an estimated 57,530 people aged 65 and over living with sight loss.

Greater Manchester as an area also has a number of key risk factors which increase the potential for sight loss among its population:



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- People from non-white ethnic groups are at a higher risk of certain sight conditions. 16% of the total population of Greater Manchester are from a non-white ethnic group, compared to 14.6% in England as a whole.
- The wider demographic, social and health context of an area can have a significant impact on the level of different sight conditions in that area, how the conditions are treated and their outcomes. People living with sight loss are likely to be more detrimentally affected by the challenges and costs of their condition in areas of deprivation or where transport and mobility is more of an issue. People from more deprived communities are more at risk of sight loss for a range of reasons. Over one in five Greater Manchester residents live in the 10% most deprived areas nationally. Six out of ten local authorities within GM are ranked in the most deprived third across England.
- People with diabetes are at risk of developing Diabetic Retinopathy, the leading cause of sight loss in adults of working age. 7.5% of the Greater Manchester population currently have diabetes and there is predicted to be a 16% increase in the number of adults living with diabetes by 2030.
- There is an established link between lifestyle factors such as obesity and smoking and sight loss. 65.3% of the Greater Manchester population are overweight or obese and the average smoking rate across Greater Manchester is 19.8%.
- One of the main ways people can reduce their risk of sight loss is by attending regular sight tests. The rate of testing across Greater Manchester is currently low with only 24.5% of the Greater Manchester population having had a sight test in 2015/16.

Other health conditions and falls also need to be considered in the context of sight loss across Greater Manchester. The prevalence and incidence of dementia increases with age; affecting 8% of the total population aged 65 and over, rising to 22% of the population aged 80 and over. It is estimated that around 28,799 people in Greater Manchester have a form of dementia and of these 16.6% are known to also have significant sight loss. In addition, 9,908 people in Greater Manchester have a longstanding health condition after experiencing a stroke. Both of these conditions can magnify the effects of sight loss and people affected require greater support to prevent further problems. People with sight loss are also at greater risk of falls especially if they have not received the right support to manage their condition: there were 9,113 falls in people over 65 with sight loss in Greater Manchester in 2015, 47% of which were directly attributable to sight loss.

The costs of sight loss to the local economy are hugely significant with the direct costs being over £84 million across Greater Manchester in the period 2013/14. It is also important to consider indirect costs. These include a range of factors, the largest element being unpaid care provided to blind and partially sighted people by family and



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friends. Other significant elements are lower rates of employment and the cost of specialist equipment. The total indirect cost of sight loss in Greater Manchester is estimated to be over £200 million; this equates to a cost per person of £78 in the general population.

Table 1 below highlights some of the main issues for each Local Authority area and the region as a whole:

	No of people registered (2017)	% people registered with an additional disability (2017)	Estimated No of people with sight loss in 2016	Estimated No of people with sight loss by 2030	Total annual healthcare expenditure (£) on problems of vision (2013/14)	Estimated indirect costs of sight loss (2015) (£million)
Bolton	2,035	22%	8,010	10,800	£8,299,404	£21,880
Bury	1,035	68%	5,650	7,700	£4,545,519	£15,440
Manchester	2,770	55%	9,810	12,180	£14,381,583	£26,800
Oldham	1,335	28%	6,300	8,420	£5,337,326	£17,210
Rochdale	985	22%	6,020	7,890	£6,229,092	£16,540
Salford	1,800	59%	6,320	8,170	£7,450,966	£17,270
Stockport	1,130	67%	9,760	13,040	£10,619,104	£26,660
Tameside	1,070	11%	6,470	8,760	£7,202,456	£17,680
Trafford	1,385	28%	7,320	9,620	£8,540,103	£20,000
Wigan	1,605	25%	9,510	13,310	£11,487,465	£25,980
Greater Manchester	15,150	38.5%	75,170	99,890	£84,093,018	£205,370

Table 1

(Data sources: NHS Digital (2017) Registered Blind and Partially Sighted People; Year ending 31 March 2017 England and RNIB Sight Loss Data Tool (2017) v3.6)

This project has been carried out in the context of all these drivers, to highlight how to better meet the needs of VI people through supporting the organisations they most commonly come into contact with and to ensure that any interventions are proactive rather than reactive. The premise of the work was the belief that many older people could see better and be more independent if everyone was more aware of correctable sight loss. We wanted to uncover whether other organisations and groups in GM working



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with older people knew about the problem of undiagnosed sight loss. We also wanted to investigate the uptake of services and activities across Manchester by VI people where the services are not specifically aimed at people with sight loss. Helping organisations understand more about VI should make services, groups and organisations more accessible for all older people.

Primary Research Findings

Stage 1

The first stage of the project was to gather information from organisations across the region to find out more about the older people with VI that they may be working with. The aim of this survey was to find out what they already knew about sight loss and services for older people with VI.

The findings from this survey highlighted some interesting trends:

17 people responded to the survey from 15 organisations. The organisations were:

- Stroke Association
- Age UK Oldham
- The LGBT Foundation
- Ambition for Ageing Bolton
- Altogether
- Kashmir Youth Project
- Action Together
- Bolton CVS
- Groundwork
- Ambition for Ageing Tameside
- Action Together
- Manchester Metropolitan University
- Royal Exchange Theatre
- Bolton Newstalk
- Care and Repair England

The survey respondents were working in a range of positions within these organisations and roles included Chief Executive, Operations Manager, Chairperson, Elders Programme Leader and Housing Action Officer. Organisations ranged in size from between 2 and 150 staff and all also used volunteers, ranging in number from 10 to over 300. In terms of



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service users, most organisations stated they had up to 500, with three stating they had between 1 to 5000 service users.

The range and size of organisations and staff roles indicates a good level of representation from across the region.

The type of services provided can be seen in Figure 2 below:

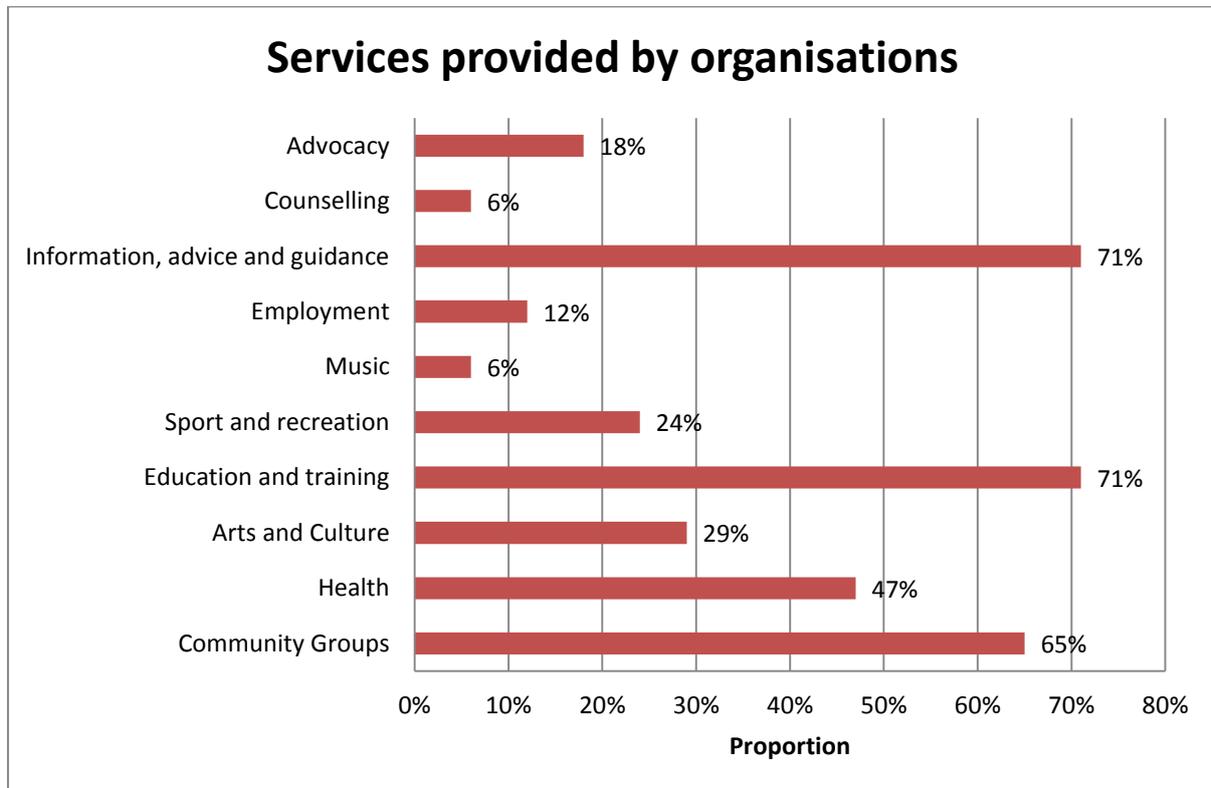


Fig 2

The main services offered by the organisations we spoke to were Information, advice and guidance, education and training and community groups. We then went on to ask who the organisations' target audience was with most (81%) stating it was older people. Others were working with specific target groups such as carers, disabled people or Black and Minority Ethnic (BAME) communities; however older people would still also make up a large proportion of their service users.

Respondents were asked whether they were aware of sight loss in any of their service users, staff or volunteers and the results can be seen in Figure 3 below. This shows that



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there do seem to be a large number of VI people accessing and working within organisations across GM.

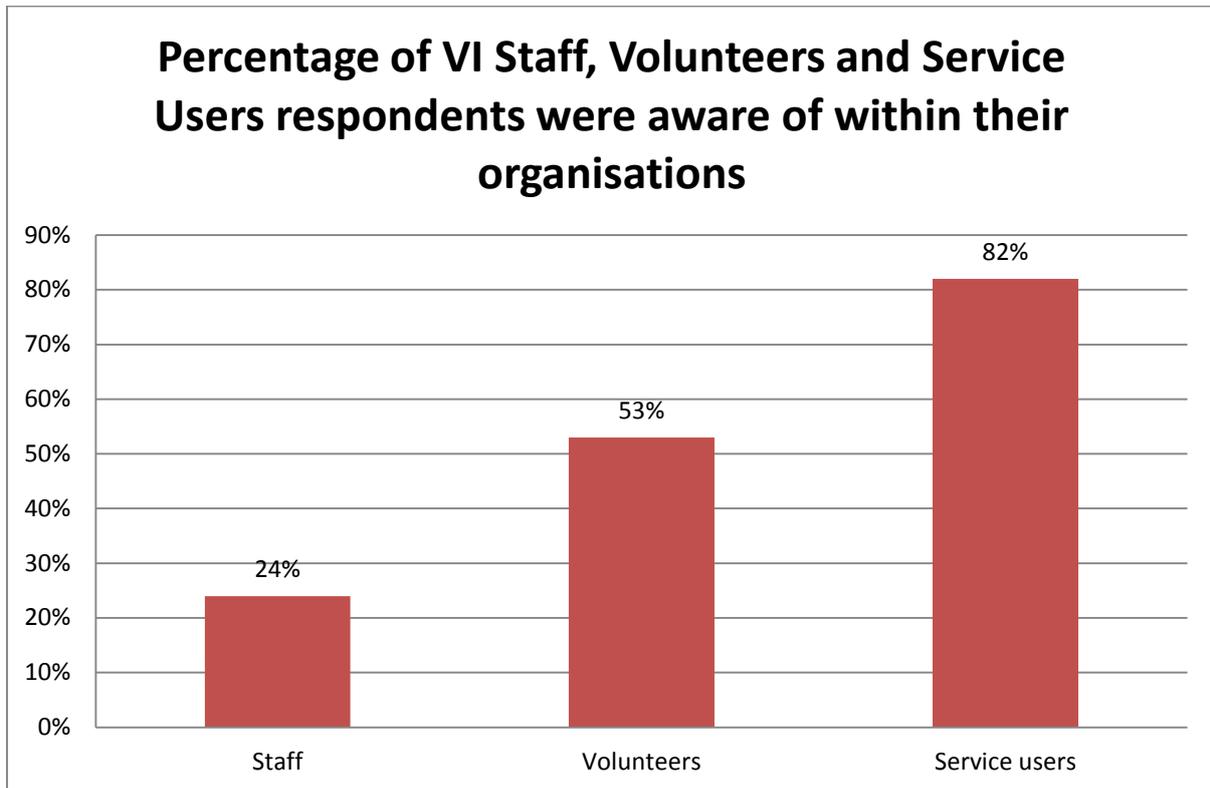


Fig 3

It was not surprising therefore, due to working with a number of people with VI, respondents largely felt they would be able to recognise the possible signs of someone struggling with their sight with 82% confident they would be able to and 18% saying they didn't know. All respondents recognised that when someone is registered blind, it doesn't mean they have no sight at all.

Encouragingly, levels of awareness were high among respondents and the results will be compared with the post-training analysis later in this report. To unpick what organisations were doing about involving VI people in a bit more depth we asked an open-ended question to respondents and found some interesting approaches:

Awareness of sight loss



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“I often refer to Henshaws... and the sensory team for an assessment. On any home visit we ask about having a sight test after a stroke and the importance of them. I often clean my client’s glasses as so many of them are filthy.”

Practical measures

A number of respondents mentioned providing their information in the right formats which is important in terms of ensuring their services are as accessible to VI people as they are to sighted people:

“We have always tried to identify ways of making it easier for those with visual impairments by enlarging text, using yellow paper, having powerpoints, pre-planning requirements etc.”

“Audio newsletters, information printed larger.”

Direct service provision

“We work with groups affected by sight loss through our Get Going Together physical activity programme. We provide audio information (e.g. audio versions of life story books, audio dementia service guides).”

“We have provided transport and offer 1-to-1 support around social isolation.”

“We are engaging with people who have experience sight loss and supporting them to set up their own social group.”

“We offer touch tours of our stages before some performances in a run.”

Working in partnership

“Ambition for Ageing Bolton have been working with Bolton Newstalk to have audio versions of our newsletters produced which are recorded onto MP3 USB format and posted to people who are on the Newstalk network in our target wards.”

“We have worked with Bolton Society for the Blind and Henshaws and work with their teams on increasing and improving access.”



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'We are working with Tameside's Deaf Blind Rehabilitation Officer to improve how we can provide a service to people affected by sight and hearing loss.'

Governance and co-production

"We have people with sight loss on our organising/steering groups."

Although this baseline survey showed a high level of awareness and some excellent examples of good practice across the organisations in terms of engaging and working with VI people, **83% stated they felt they would benefit from further training and information about how to support people with sight loss.** Comments made as to why this would be helpful were also illuminating:

'More training would be useful for staff and volunteers. More awareness raising for service providers in Oldham, community groups etc to help make groups and activities more accessible for people with sight loss. Information and advice about the physical environment would also be useful.'

'We are currently in the process of looking at how to improve our accessibility generally so any advice or support with this would be appreciated.'

'it is my understanding that people who are partially sighted but have a certain level of sight loss can be registered as blind but I would love to find out more and also look for ways we can engage with more individuals who have sight loss.'

Stage 2

The second stage of the project was to run some half-day training workshops for organisations working with older people throughout GM. 21 people attended the training sessions which were run as 2 half-day sessions, and along with some of the organisations mentioned above, others represented were:

- Trafford Carers Centre
- Chorlton Good Neighbours
- University of Manchester
- Wythenshawe Community Housing Group



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Henshaws have been running Visual Impairment Awareness Training (VIAT) courses for staff, volunteers and external organisations for a number of years, raising awareness around VI and sharing our expertise. Our VIAT course is an interactive and engaging training session, aimed at helping people understand the needs and concerns of people with a visual impairment. The training has practical tasks, simulation glasses (these give people an idea of what it's like to be visually impaired) and how to sight guide people. The training is usually chargeable but the aim within this project was to deliver shorter training sessions with no charge and to invite organisations working with older people to attend and learn more about VI and the simple, practical changes they may be able to make to ensure their services are accessible for older people with VI and also where they can go for any extra advice or support.

Feedback forms were completed by all attendees on the day so we could assess their understanding of the key areas focussed on in the training and what the main take-away messages were for them.

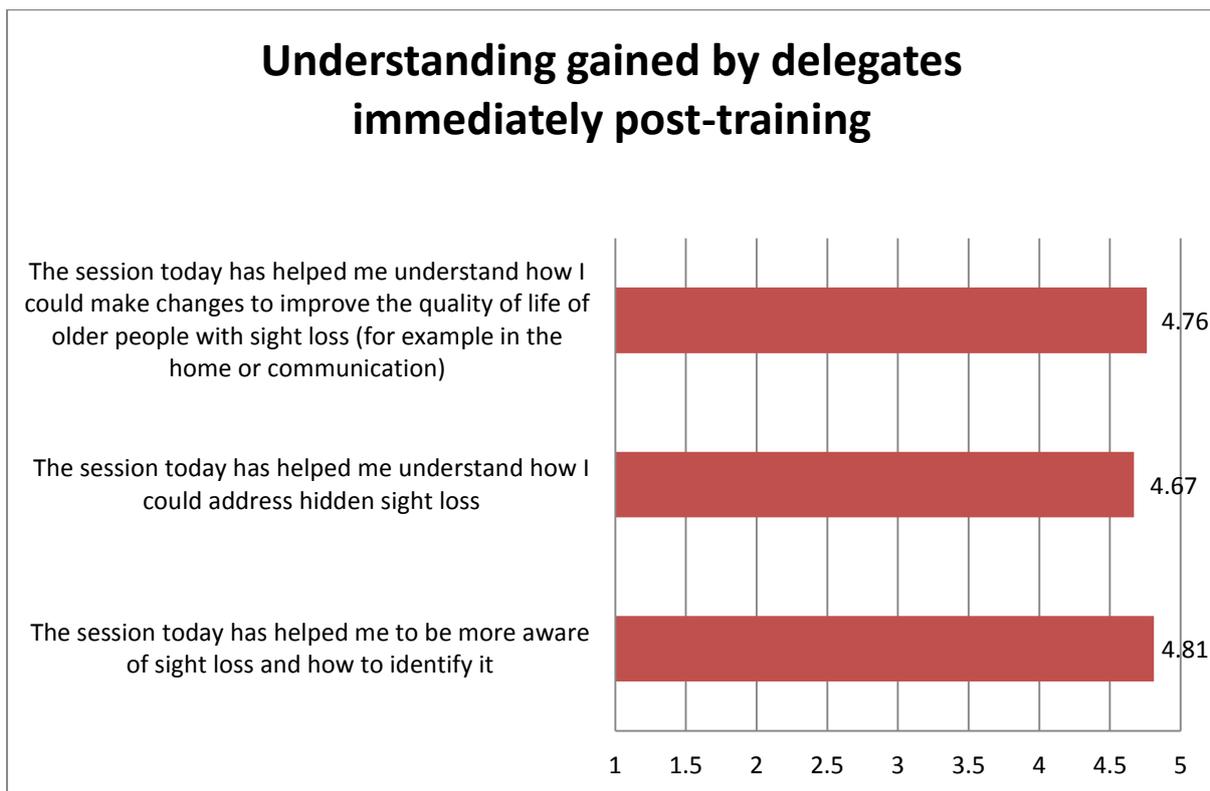


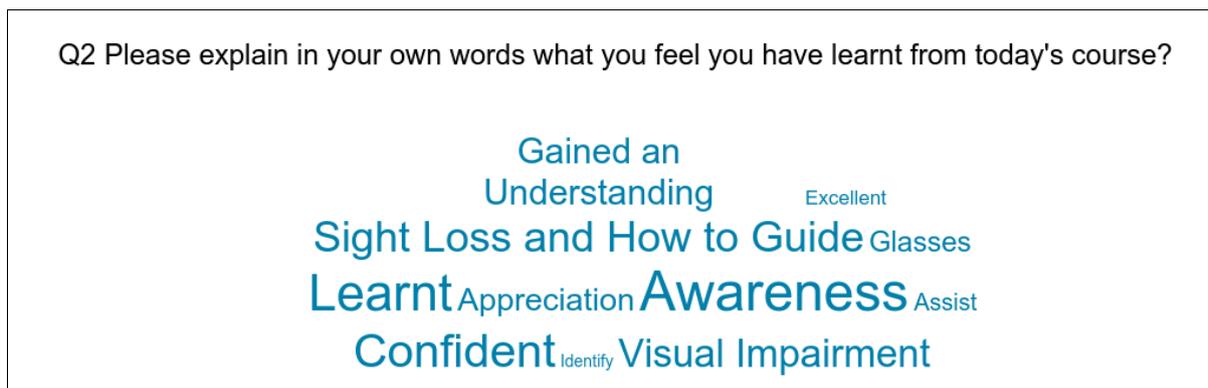
Fig 4



Figure 4 above highlights the high levels of insight and understanding attendees felt they had gained. The feedback form asked them to rate on a level of 1-5 how they felt about the three statements where 1 = strongly disagree and 5 = strongly agree. The chart shows that the average scores for responses were all close to 5, showing that delegates felt the session had really helped them to:

- Be more aware of sight loss and how to identify it.
- Understand how they could address hidden sight loss.
- Understand how they could make changes to improve the quality of life of older people with sight loss.

We then went on to ask delegates in their own words what they felt they had learnt from the course. The word cloud below pulls together the top phrases or words used in the responses which highlights the main areas people talked about.



It is also useful to share some of the comments in full to further understand what people felt they had gained from attending the training:

'I learned about the reality of cataracts and visual impairment. And practical things I hadn't thought of e.g. guiding hand on bannister/chair. Also to have patience/curiosity when someone is taking time or does things unusually - it may be due to sight loss.'

'How it can feel to have a variety of types of sight loss. Ways to identify sight issues which may present as a different issue and how to guide someone.'

'Learnt to ask the right questions when people appear to be struggling.'

'I feel more confident and more aware of sight loss Very knowledgeable session.'



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'My awareness and appreciation of working/supporting someone with a visual impairment has improved a great deal.'

'Excellent training. It has given me knowledge and confidence to assist people living with visual impairment.'

'I am now aware of how to pick up on discrete clues that someone is VI and may need assistance.'

'I am much more aware of how to recognise signs of sight loss and how to help guide those with sight loss and point them towards help. Much more confident'

The comments and word cloud above really illustrate that the training had helped people to be more aware of sight loss, of how to recognise that someone may be struggling with their sight and what to do if that is the case. People felt they had more understanding around what the impact of sight loss might be and the practical things they could do to help support someone with sight loss.

We also wanted to gain insight into one change delegates might make to their practice after the training and the main themes can be seen in the word cloud below:

Q3 Please state one thing you will do differently after today?

Sight Issue Ask Afraid Sight Loss Aware Signs
Guide

Delegates talked about being more aware of the signs of sight loss, of not being afraid to ask people if they felt they might be struggling and of being more willing to offer to guide someone.

'I will ask when people last went to opticians and check if they have clean glasses.'

'I will be more confident to offer myself as a guide.'



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'I will look more carefully into someone's behaviour and living condition. Could it be an undiagnosed sight issue?'

'I will suggest eye tests to older people. I know about what to recognise now in terms of the signs of VI e.g. Charles Bonnet Syndrome could be visual not mental wellbeing related.'

'I will be much more observant in looking out for signs of sight loss.'

'I won't be afraid/concerned about offering guidance or assistance.'

'I will be more aware of those with VI and be less afraid of helping them.'

The overall views on the course delivery and session facilitator were extremely positive:

'Great training - informative, useful and engaging.'

'Great knowledgeable trainer.'

'Great course'

'Excellent session, very well presented, Simon [the facilitator] made it easy to understand.'

'Session was very interesting and I was made aware of things I didn't know about.'

'Excellent delivery'

'I would recommend this course to my peers.'

'The hands on experimental activities are an excellent way to get a powerful learning sense of reality.'

'The guidance tasks and explanation of different canes was particularly useful. I had no idea about the white walking aid or the red and white stick.'



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It is clear from the feedback that delegates found the training session useful, informative and that it had clearly raised their awareness about sight loss and how to approach it within their own organisations.

Stage 3

The final stage of the project was to follow up with as many people as possible who had attended the training to find out what if anything had changed for them since participating. Respondents were asked the same questions as they were in the first (baseline) survey so we can compare some of the key areas and highlight any changes.

The first key question was about whether respondents recognised sight loss in any of their service users and the pre and post results can be seen in Figure 5 below:

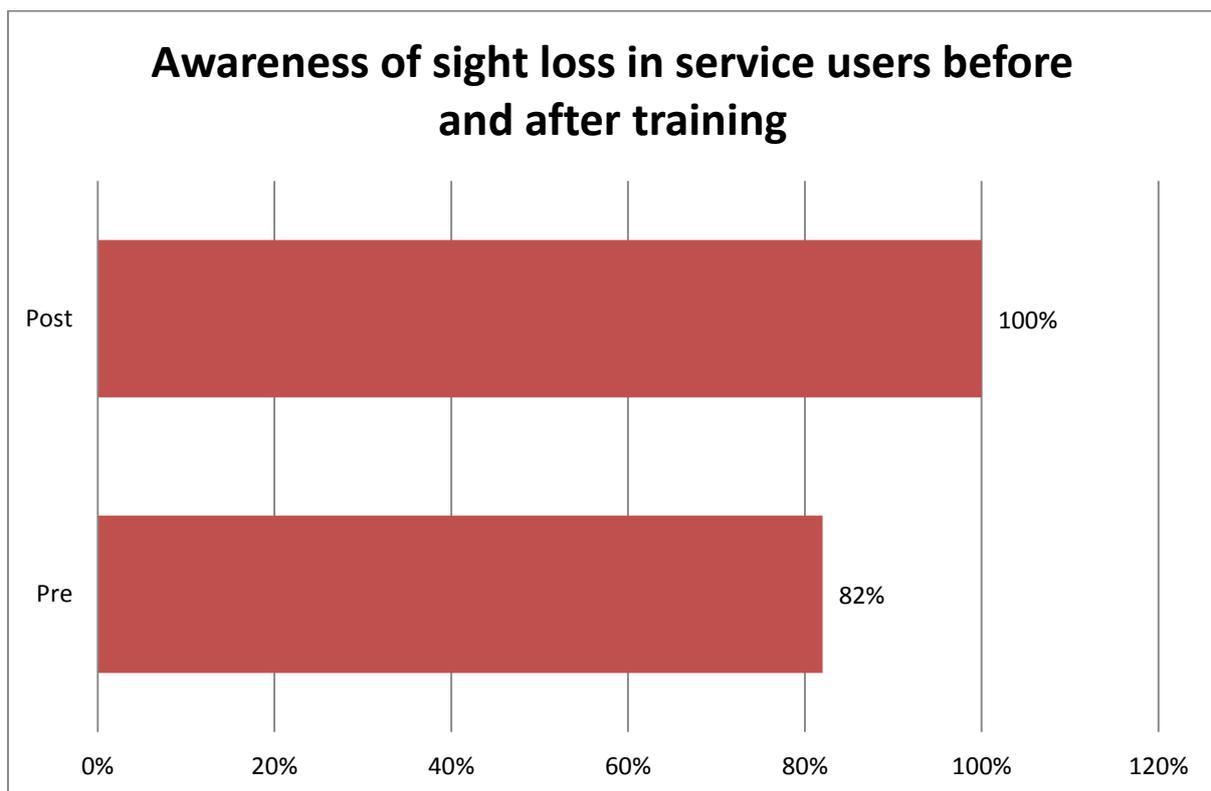


Fig 5



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Although the level of awareness of sight loss in service users prior to the project was high at 82%, we can see that post-training, this has risen to 100%, indicating respondents are more aware of the signs of sight loss. Similarly, we can compare whether respondents felt they would be able to recognise the signs of someone struggling with their sight and there was a 21% increase in this area. **All respondents 1 month post-training felt they would be able to recognise the possible signs of someone struggling with their sight.**

Respondents were asked about any key changes which they had noticed within their organisations and in their own and colleagues' approaches 1 month post-training and the results can be seen in Figure 6 below:

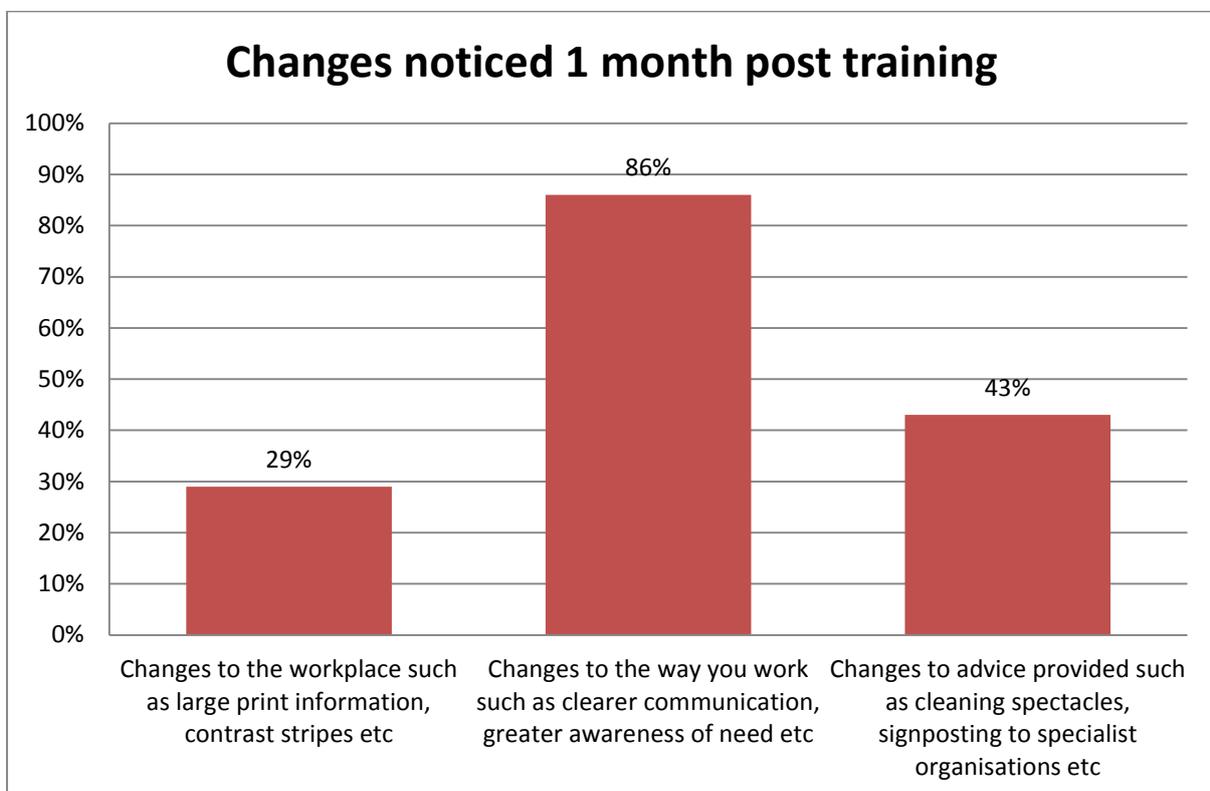


Fig 6

These results clearly show the impact of the training, particularly around the way individuals are working with people and then subsequently supporting them in the most appropriate ways. Almost one-third of organisations have already made some key accessibility changes to their work environments which is significant as it might be



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expected that these organisational changes would take longer to filter through and implement.

Some respondents also expanded on their answers with some of the following comments received:

'I have been able to pass on information to colleagues about different eye conditions.'

'More awareness of difficulties in the outside environment for people with sight loss issues'

15% of respondents stated that their older service users and their families had already noticed a difference in support following the training. This is particularly significant as these would have been unsolicited comments from service users as we did not ask people to specifically ask this question. To be making a noticeable difference to service users 1 month on does bode well for these changes to be sustained over the longer period.

15% of respondents stated they had already been able to direct more people for an eye test. Again, in such a short space of time this is a significant finding. We know that only 24% of the population across GM have had an eye test, so if we scale up our project and reach more people and organisations, there could be significant improvements to the uptake of sight testing which we know is so important in terms of preventing sight loss and managing existing eye conditions.

43% of respondents stated that 1 month post-training either themselves or their colleagues had been able to direct more people to organisations that could help them with their sight loss. If people receive the appropriate expert support and advice around their sight loss they are able to live better lives, be more independent and manage their sight loss much more effectively so again this really underlines how effective training and awareness raising can be. The value of working in partnership with other organisations who are working with older people who may not know about us is again a really effective way of reaching more people through building a network of organisations who understand the issues and are able to work with people in a holistic way signposting where necessary.

Finally, we asked respondents about their experience of attending the training thinking about it 1 month on and the results can be seen in Figure 7 below:



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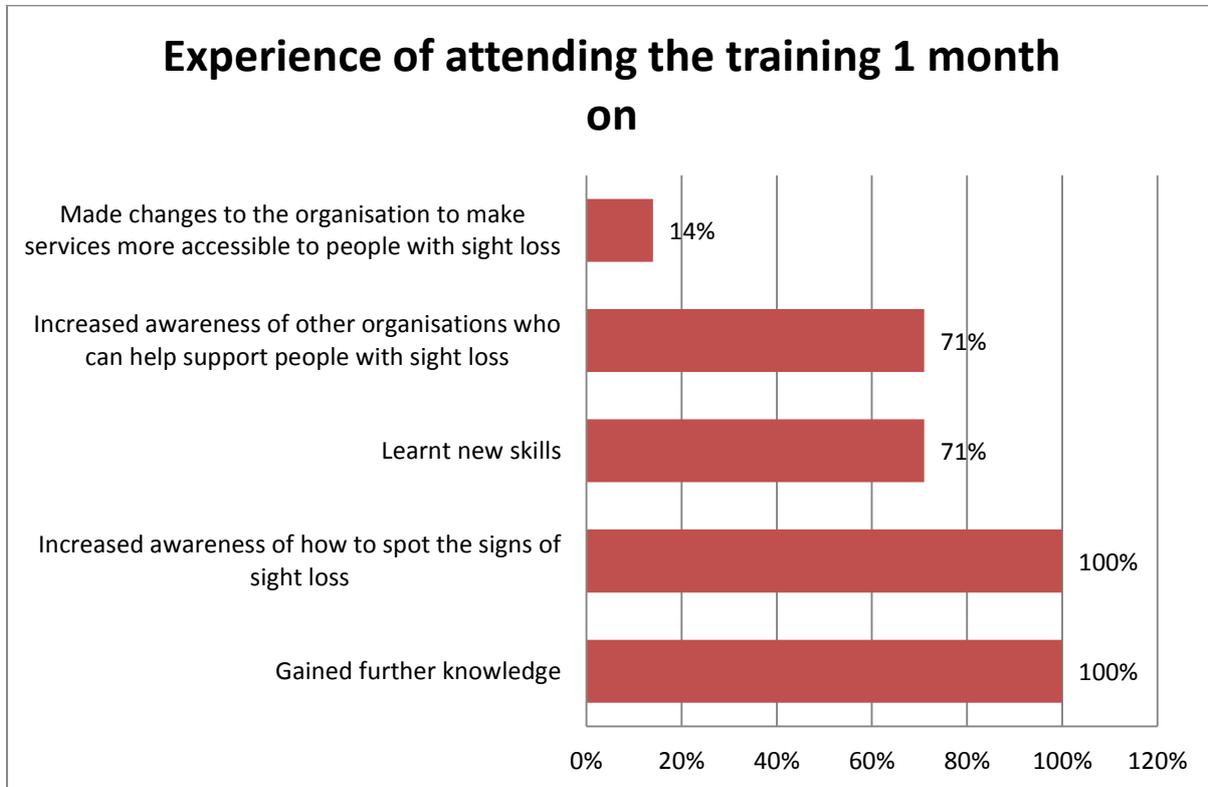


Fig 7

These findings reiterate the findings from some of the previous questions, in which respondents felt their awareness and knowledge around VI had increased.

Recommendations

The following recommendations from the Out of Sight project are as follows:

- Conduct further research/mapping exercise to identify organisations/groups/projects working with older people and their reach into the VI community.
- Use these findings to target information across these organisations to share knowledge, expertise and opportunities for further support around VI.



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- Work on an ongoing basis with partner organisations to identify people who may need additional support and utilise cross-referral routes.
- Embed a structure whereby the number of people referred for an eye test can be recorded.
- Share the positive evaluation and training impact findings widely across the region so other organisations can take up the opportunity of attending.
- Share report with the wider Ambition for Ageing programme and Equalities Board.

Conclusion

This project has revealed a number of important findings about the benefits of working in partnership and sharing expertise in providing better and more equitable services for older people in Greater Manchester. The findings show that the provision of a short training course can make a significant difference in raising awareness around sight loss; the implications of which are hugely significant mostly for older people with sight loss but also for the wider social environment. If older peoples' needs are fully understood and services are wholly accessible then they are able to move towards living better lives for longer and moving much more closely to the following statement:

“An age-friendly world enables people of all ages to actively participate in community activities and treats everyone with respect, regardless of their age. It is a place that makes it easy for older people to stay connected to people that are important to them. And it helps people stay healthy and active even at the oldest ages and provides appropriate support to those who can no longer look after themselves.”

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References

Age UK (2014) Evidence Review on Loneliness in Later Life.

Age UK (2017) The Health and Care of Older People in England.

Buffel et al (2015) Risks of social isolation.

Byron,C, Blake,M, Bridges,S (2013) Secondary analysis of adult social care data, NatCen Social Research, London.

Cooper,R, Ridgway,A, Doyle, H (2015) Henshaws Pathway to Independence: A new model of service delivery for people with visual impairment: International Journal of Ophthalmic Practice, Vol 6, No 1 Feb/March 2015 pp30-35.

Fight for Sight 2017

Flynn, K and Lord, C (2015) Living with sight loss; updating the national picture.

Greater Manchester Poverty Commission 2013

Hodge, Barr and Knox (2010) Evaluation of emotional support and counselling within an integrated low vision service, University of Liverpool.

Humphries, R et al (2016) Social care in older people: Home truths, The King's Fund, London.

Lord,C, McManus,S (2012) Circumstances of people with sight loss, NatCen Social Research, London.

Minocha et al (2016) Social isolation and loneliness in people aged 55 and over in the UK, Open University.

Nesta (2013) People helping people: Peer support that changes lives.

New Economy and Greater Manchester Combined Authority (2017) The future of ageing in Greater Manchester.

Oliver, D, Foot, C and Humphries, R (2014) Making our health and care systems fit for an ageing population, The King's Fund, London.



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RNIB (2015) Evidence-based review: People with sight loss in later life, V2.

RNIB Sight Loss Data Tool v3.6, 2017.

UK Vision Strategy 2013-2018 Setting the direction for eye health and sight loss services.

Ulldemolins AR, Lansingh VC, Valencia LG, et al. Social inequalities in blindness and visual impairment: a review of social determinants, Indian J Ophthalmol , 2012, vol. 60 5(pg. 368-75