

## **Vision JSNA briefing, November 2021**

Our sight is a most precious special sense which enables us to survive and interact with the outside world. Seeing allows us to appreciate the people around us and the beauty of the world we live in.

This JSNA briefing discusses the risks of losing our sight [also referred to in this document as visual impairment], the consequences of losing our sight, and gives an overview of how this is being managed in East Sussex.<sup>1</sup>

### **Definitions:**

Visual impairment, also known as vision loss, is defined as a decreased ability to see to such an extent that it causes problems which are not fixable by usual means, such as wearing glasses or contact lenses.

Refractive sight problems [refractive errors] are problems with vision which can be corrected by appropriate lenses [in other words by wearing glasses]. These include near-sightedness, far-sightedness, presbyopia, and astigmatism.

The most common causes of visual impairment worldwide are uncorrected refractive errors (43%), cataracts (33%), and glaucoma (2%).

Cataracts [clouding of the lens] are the most common cause of blindness. Other disorders that may cause serious visual problems include: age-related macular degeneration [AMD]; diabetic retinopathy; corneal clouding; childhood blindness; and a number of infections.

Visual impairment can also be caused by problems in the visual pathways in the brain due to stroke, premature birth, or trauma. These cases are known as cortical visual impairment.

### **How is vision routinely assessed?**

An eye specialist [optician or ophthalmologist] assesses a person's vision by measuring:

- Visual acuity –central vision, the vision you use to see detail [read books, watch television].
- Visual fields – how much you can see around the edge of your vision, while looking straight ahead.

Visual acuity is measured by reading down an eye chart while wearing any glasses or contact lenses. The test for visual acuity is known as a Snellen test. The field of vision in each eye is measured by a “visual field test”.

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<sup>1</sup> This briefing is an abridged version of a more detailed report about eye health and sight loss in East Sussex from the RNIB in 2021 for which we are most grateful. This has been updated with additional local information.

## The Snellen test for visual acuity

Visual acuity is measured using the Snellen scale. A Snellen test usually consists of a number of rows of letters which get smaller as you read down the chart.

On the Snellen scale, normal visual acuity is called 6 / 6, which corresponds to the bottom or second bottom line of the chart. If you can only read the top line of the chart then this would be written as 6 / 60. This means you can see at 6 metres what someone with standard vision could see from 60 metres away.

The figures 6 / 60 or 3 / 60 are how the result of a Snellen test are written. The first number given is the distance in metres from the chart you sit when you read it. Usually this is a 6 (for 6 metres) but would be 3 if you were to sit closer to the chart (3 metres away).

The second number corresponds to the number of lines that you are able to read on the chart. The biggest letters, on the top line, correspond to 60. As you read down the chart, this number gets smaller as it corresponds to the lines with smaller letters. Someone with standard vision can read towards the bottom of the chart. Standard vision can be referred to as 6/6 vision.

To be certified as **severely sight impaired (blind)**, a person's sight has to fall into one of the following categories, while wearing any glasses or contact lenses they may need:

- Visual acuity of less than 3 / 60 with a full visual field
- Visual acuity between 3 / 60 and 6 / 60 with a severe reduction of field of vision, such as tunnel vision
- Visual acuity of 6 / 60 or above but with a very reduced field of vision, especially if a lot of sight is missing in the lower part of the field

To be certified as **sight impaired (partially sighted)** a person's sight has to fall into one of the following categories, while wearing any glasses or contact lenses that they may need:

- Visual acuity of 3 / 60 to 6 / 60 with a full field of vision
- Visual acuity of up to 6 / 24 with a moderate reduction of field of vision or with a central part of vision that is cloudy or blurry
- Visual acuity of 6 / 18 or even better if a large part of your field of vision, for example a whole half of your vision, is missing or a lot of your peripheral vision is missing

## Why is visual impairment important?

More than two million people are estimated to be living with sight loss in the UK today. This sight loss is severe enough to have a significant impact on their daily lives. This figure includes:

- people who are registered blind or partially sighted
- people whose vision is better than the levels that qualify for registration, but that still has a significant impact on their daily life (for example, not being able to drive)
- people who are awaiting or having treatment such as eye injections or surgery that may improve their sight
- people whose sight loss could be improved by wearing correctly prescribed glasses or contact lenses

Avoidable sight loss is recognised as a critical and modifiable public health issue which is recognised as a key priority by the WHO <sup>i</sup> and Vision UK.<sup>ii</sup>

### **Who is at most risk?**

Visual Impairment can include a range of difficulties from partial sight to blindness.<sup>iii</sup> As we get older we are increasingly likely to experience 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. Sight loss can lead to a loss of independence and increased risk of poverty. It can increase the risk of depression, falls and hip fractures,<sup>iv</sup> and loss of independence.<sup>v</sup>

Older people may be living with a number of different sight-related problems. Fourteen per cent of people aged 65+ have sight loss which affects their day to day living.<sup>vi</sup>

The main causes of sight loss are:

- uncorrected refractive error [39%]
- Age-related Macular Degeneration [AMD] [23%]
- cataract [19%]
- glaucoma [7%]
- diabetic eye disease [5%]<sup>vii</sup>

The need to wear corrective lenses [refractive error] is often undetected and can be a particular issue for those living in care homes or with complex multiple disabilities.

### **Sight loss in children**

There are many causes of sight loss in children. This may be due to genetic mutations, birth defects, premature birth, nutritional deficiencies, infections, injuries, and other causes. Severe retinopathy of prematurity (ROP), cataracts, Vitamin A deficiency and refractive error are also causes.

### **Eye health inequalities (national and local)**

As many as 50% of cases of blindness and serious sight loss could be prevented if detected and treated in time.<sup>viii</sup>

### **Unequal exposure to environmental toxins**

Smoking increases the risk of sight threatening eye conditions.<sup>ix</sup> Cigarette smoke contains toxic chemicals that can irritate and harm the eyes. Heavy metals, such as

lead and copper can collect in the lens [the transparent bit that sits behind the pupil and brings rays of light into focus at the back of the eye] and can lead to cataracts [where the lens becomes cloudy].

Smoking can make diabetes-related sight problems worse by damaging blood vessels at the back of the eye (the retina). Smokers are around three times more likely to get Age-related Macular Degeneration, a condition affecting a person's central vision. Loss of central vision means losing the ability to see fine details, affecting reading and watching TV. Smokers are 16 times more likely than non-smokers to develop sudden loss of vision caused by optic neuropathy, where the blood supply to the optic nerve at the back of the eye becomes blocked.

### **Later diagnosis of eye problems**

The take-up of sight tests is lower than would be expected in areas of social deprivation. This can be due to different perceptions of the benefits of eye tests and the availability of opticians [optometrists]. This can lead to later detection of preventable conditions and increased sight loss due to late treatment [for glaucoma and diabetic eye disease for example.] Please see the list of people eligible for free tests and subsidised lenses.<sup>x</sup>

Sight loss in older people is frequently caused by refractive error and cataract. Both conditions can be diagnosed by a simple eye test. In most cases the person's sight could be improved by prescribing the correct lenses [glasses] and cataract surgery [for an opaque lens] when needed.

### **Higher risk subgroups in the population**

Nearly two-thirds of people living with sight loss are women. People from black and minority ethnic communities are at greater risk of some of the leading causes of sight loss, notably diabetes. People living in more deprived areas are more likely to develop diabetes and diabetic retinopathy and are also less likely to attend retinal screening, all of which will increase risk of sight loss from diabetic retinopathy.

Adults with learning disabilities are 10 times more likely to be blind or partially sighted than the general population.

### **Sight loss is associated with poverty**

Socio-economic deprivation is both a contributing cause of and an outcome of sight loss, at both the individual and community level.

Older people in the poorest fifth of the population in England were at nearly 80% higher risk of developing a severe visual impairment than those in the wealthiest fifth.<sup>xi</sup> Nationally, three out of four blind or partially sighted older people live in poverty, or on its margins, compared with one in four older people overall.<sup>xii</sup>

## Estimates of the amount and types of sight loss in East Sussex

### Age

There are 557,229 people living in East Sussex.<sup>xiii</sup> The older you are, the greater your risk of sight loss, which is why the population aged 75 and older offers a good indication of the demand for sight loss services. One in five people aged 75 and over are living with sight loss.

East Sussex has a higher proportion of people aged 75 years and over compared to the average for England. Of the population:

- 19% are aged 17 or under
- 55% are aged 18-64
- 26% are aged over 65

### Ethnicity

East Sussex has a lower proportion of people from minority ethnic groups than the average for England. People from different ethnic communities are at greater risk of some of the leading causes of sight loss. Four percent of the East Sussex population are from minority ethnic groups, compared to 15% in England.

### Adults living with sight loss

There were an estimated 25,400 people living with sight loss in 2019/20. This includes around 21,890 people living with partial sight and 3,500 people living with blindness.<sup>xiv</sup> These figures include people whose vision is better than the levels that qualify for registration as visually impaired but that still has a significant impact on their daily life.

The estimated prevalence of sight loss is higher in East Sussex compared to the average for England, with **4.5%** of the population living with sight loss, compared to **3.2%** nationally. This estimate is based on age and gender.<sup>xv</sup>

Higher proportions of BAME communities, the number of people in low income households and access to healthcare services could all potentially impact on the prevalence of sight loss in some areas within local authorities in East Sussex.

### Age profile

In terms of the age profile of the people living with sight loss in East Sussex, there are an estimated:

- 3,590 aged 18 to 64 years
- 4,950 aged 65 to 74 years
- 7,200 aged 75 to 84 years
- 9,480 aged 85 years and over

## Future projections

By 2030 there are expected to be 32,100 people in East Sussex living with sight loss, an increase of 26% from 2021, Table 1.

**Table 1: Estimated numbers living with sight loss in East Sussex**

| Severity of sight loss | 2021   | 2025   | 2030   |
|------------------------|--------|--------|--------|
| Partial sight          | 21,890 | 24,250 | 27,570 |
| Blindness              | 3,500  | 3,930  | 4,520  |
| Total                  | 25,400 | 28,200 | 32,100 |

Source: [RNIB sight loss data tool](#)

## Children and young people

There are over 25,000 visually impaired children aged 0-16 in the UK, and around 15,000 aged 17 to 25.<sup>xvi</sup> Around half of these children will have additional disabilities and special educational needs.<sup>xvii</sup>

This figure includes:

- children who are registered blind or partially sighted
- children who are living with sight loss but who are not registered blind or partially sighted

In East Sussex, there are an estimated:

- 200 blind and partially sighted children aged 0-16
- 85 blind and partially sighted young people aged 17-25

## Certification and Registering as blind or severely sight impaired.

### Certificates of Visual Impairment.

A *Certificate of Vision Impairment (CVI)* certifies a person as either sight impaired (partially sighted) or severely sight impaired (blind). Each certificate is signed by a consultant ophthalmologist in an eye clinic and a copy is sent to the person's local social services department.

Upon receipt of the CVI form, social services department offers registration and signposting to other relevant advice and services.<sup>xviii</sup>

### New Certification of Visual Impairment [CVI]

In 2019/20, 324 Certificates of Vision Impairment were issued in East Sussex.<sup>xix</sup> In East Sussex, 58 CVIs were issued per 100,000 people, compared to 41 per 100,000 people in England.

## Public Health Outcomes Framework: local and national comparisons

The Public Health Outcomes Framework gathers information on the rate of CVIs per 100,000 for three of the main causes of preventable sight loss and rates of new certifications, Table 2.

**Table 2: Rates of certification per 100,000 of the preventable sight loss indicators in 2019/20**

| PHOF identifier | Description                    | East Sussex | England |
|-----------------|--------------------------------|-------------|---------|
| 4.12i           | AMD [over 65]                  | 122.4       | 105.4   |
| 4.12ii          | Glaucoma [over 40]             | 19.1        | 12.9    |
| 4.12iii         | Diabetic eye disease [over 12] | 2.7         | 2.9     |

Source: PHOF:<sup>xx</sup>

### Trends in certifying visual impairment

Since 2015/16, there is been an increase of 3% in the number of CVIs issued.

### Registration as blind or partially sighted

In East Sussex, there were 1,430 registered as blind or severely sight impaired and 1,505 registered as partially sighted or sight impaired persons in total. The increase with age is clearly shown, Table 3.

**Table 3: Registered blind or partially sighted by age band in East Sussex in 2020**

| Age band | Registered blind | Registered partially sighted | Total |
|----------|------------------|------------------------------|-------|
| 0-17     |                  |                              |       |
| 18-49    | 140              | 115                          | 255   |
| 50-64    | 185              | 135                          | 320   |
| 65-74    | 150              | 155                          | 305   |
| 75+      | 955              | 1,105                        | 2,060 |
| Total    | 1,430            | 1,505                        | 2,935 |

Source:<sup>xxi</sup>

### Additional disabilities

2,525 of the people registered as blind or partially sighted in East Sussex have also been recorded as having an additional disability by the local authority.<sup>xxii</sup>

## **New registrations**

In the year 2019/20, there were 255 new registrations of blind and partially sighted people in East Sussex.<sup>xxiii</sup> This compares to 324 new Certificates of Visual Impairment in the same year. Any difference in these numbers may be due to time taken from certification to registration, and these processes falling into different calendar years. In addition, not all people with a CVI certificate choose to join the register.

## **Rates of registration**

In East Sussex, there are 527 registered blind or partially sighted people per 100,000 population. This is higher than the overall rate for England.<sup>xxiv</sup>

## **Trends**

From 2017 to 2020, there has been a decrease of -2% in the overall number of people registered as blind or partially sighted. Over the same period, there has been an increase of 21% in the number of new registrations.<sup>xxv</sup>

## **Sight threatening eye conditions in East Sussex**

The figures presented in this section highlight estimates for all people living with certain eye conditions. This includes people who have already experienced sight loss as a result of these eye conditions, people who have been diagnosed but have not experienced any sight loss yet, and also people who are currently undiagnosed.

### **Age-related Macular Degeneration (AMD)**

This condition commonly affects people over the age of 50 and is the leading cause of blindness.

There are two main types of AMD:

**Wet AMD** can develop quickly affecting central vision in a short period of time. Early identification and treatment of wet AMD is vital. Treatment can halt the further development of scarring but lost sight cannot be restored.

**Dry AMD** can develop slowly and take a long time to progress. There is currently no treatment for dry AMD. People with early and moderate stages of dry AMD are not eligible for registration, but it does have an impact upon daily life, for example a person may have to stop driving.

### **Cataract**

Cataract is a common eye condition that is prevalent in older people. The lens becomes less transparent and turns misty or cloudy. Cataracts over time can get worse and impact upon vision. A straightforward operation replaces the lens with an artificial one. Numerous studies have demonstrated the benefits of cataract surgery in improving life quality and reducing the number of falls.

## Glaucoma

This is a group of eye conditions in which the optic nerve can be damaged due to changes in eye pressure. Damage to sight can usually be minimised by early diagnosis in conjunction with careful regular observation and treatment. Many glaucoma patients will attend regular appointments and take eye drops for the rest of their lives to prevent deterioration of vision. Some forms of glaucoma can be treated with laser surgery and surgery.

## Diabetic eye disease

People with diabetes are at risk of diabetic eye disease, which can affect the blood vessels in the eye. This can lead to permanent sight loss. Screening and early diagnosis with appropriate intervention is essential.

The following Table 4 summarises changes expected in the numbers of people with different types of sight threatening eye disease.<sup>xxvi</sup> These trends assume that the underlying prevalence of these eye conditions stays the same until 2030. The changes are due to changes in the populations: as the population ages, more people will be living with age-related eye conditions and sight loss.

**Table 4: Sight threatening eye conditions in East Sussex from 2021 to 2030**

|                      | 2021   | 2025   | 2030   |
|----------------------|--------|--------|--------|
| Early stage AMD      | 32,800 | 36,300 | 40,400 |
| Late stage dry AMD   | 2,670  | 3,020  | 3,510  |
| Late stage wet AMD   | 5,460  | 6,190  | 7,290  |
| Total late stage AMD | 7,710  | 8,730  | 10,200 |
| Cataract             | 8,550  | 9,600  | 11,200 |
| Ocular hypertension  | 12,700 | 13,400 | 14,100 |
| Glaucoma             | 7,850  | 8,640  | 9,740  |
| Diabetes             | 41,500 | 44,100 | 47,100 |
| Diabetic retinopathy | 11,400 | 11,900 | 12,400 |
| Severe retinopathy   | 1,050  | 1,090  | 1,140  |

Source: RNIB

## Additional health problems and disabilities

Many blind and partially sighted people are also living with other health problems or disabilities. As we get older we are more likely to be living with many health conditions at the same time.

## **Stroke**

Around **60%** of people who experience strokes will also experience some form of visual impairment immediately after their stroke. There are national guidelines recommending specialist vision assessment for stroke survivors.

In East Sussex, 3,870 people have a long-standing health condition after experiencing a stroke.<sup>xxvii</sup>

## **Dementia**

Up to 850,000 people in the UK have some form of dementia. Prevalence of sight loss is higher among people with dementia, especially those living in care homes.

In East Sussex, in 2021 we estimate that over 11,250 people are living with dementia.<sup>xxviii</sup> Within this group, a proportion of people with dementia have significant sight loss.<sup>xxix</sup>

## **Learning disabilities**

People with learning disabilities are 10 times more likely to experience sight loss than the general population.

In East Sussex, we estimate that 740 adults have a learning disability and partial sight. A further 210 adults have a learning disability and blindness.<sup>xxx</sup>

The 2019/20 register of blind and partially sighted people also records learning disability, though this isn't consistent across local authorities. In East Sussex:

90 are registered blind and partially sighted with a learning disability.<sup>xxxi</sup>

## **Hearing impairment**

In East Sussex, in 2021, we estimate that over 92,700 older people [aged 65 and over] have some hearing impairment, and about 12,300 people have severe hearing impairment.<sup>xxxii</sup>

## **Dual sensory loss**

An estimated 4,840 people are living with some degree of dual sensory loss in East Sussex.<sup>xxxiii</sup> Of these people, it is estimated that 1,970 are living with severe dual sensory loss.

The 2019/20 register of blind and partially sighted people also records hearing impairment, though this isn't consistent across local authorities. In East Sussex:

- None are registered with a vision impairment and deaf with or without speech
- 115 are registered with a vision impairment and deaf or hard of hearing

There were 21 social care clients receiving long term support for [dual] visual and hearing impairment in 2020/21.<sup>xxxiv</sup>

## Falls

Falls are more common, and are more likely to have serious outcomes, amongst older people. In some cases, falls can lead to serious medical problems and a range of adverse outcomes for health and wellbeing.

In East Sussex, it is estimated that:

- 3,120 people with sight loss aged over 65 experience a fall per year<sup>xxxv</sup>
- Of these falls, 1,530 are directly attributable to sight loss
- 260 people aged over 65 with sight loss experience a *severe* fall per year. (A severe fall is defined as a fall that results in hospital admission through A&E)
- Of these severe falls, 120 are directly attributable to sight loss

## Additional health problems

The 2019/20 register of blind and partially sighted people also records physical disabilities and mental health problems, though this isn't consistent across local authorities.<sup>xxxvi</sup>

In East Sussex:

- 2,105 are registered with a vision impairment and have physical disabilities
- 200 are registered with a vision impairment and have diagnosed mental health problems

## How is vision loss being managed in East Sussex?

### Community Optometrists

Optometrists are the specialists who carry out sight tests, also known as eye examinations. Most optometrists work in high street optical practices that are commonly known as opticians. Some work in hospitals, and others provide services in care homes and other settings.

Optometrists prescribe spectacles and contact lenses to the estimated three-quarters of the population who need vision correction. They are often the first people to identify common sight-threatening conditions like cataract, glaucoma and age-related macular degeneration. They can then refer patients to hospital eye services for diagnosis and treatment.

Optometrists can also identify other serious diseases, including diabetes and cancer.

Optometrists can:

- Provide treatment for patients with minor eye conditions who otherwise present at their GP or emergency departments
- Reduce the number of unnecessary referrals to ophthalmology outpatient departments

- Monitor and follow-up appropriate patients in the community after surgery, instead of in hospital, therefore freeing up hospital appointment slots for first-time attendees and those who need the care of an ophthalmologist

There is also a growing number of independent prescribing (IP) optometrists who are qualified to provide additional diagnosis and treatment.

### **Hospital Eye [Ophthalmology] services**

Ophthalmology (eye) services in East Sussex are provided at Bexhill Hospital, the Conquest Hospital in Hastings and Eastbourne Hospital. Ophthalmologists diagnose and treat a range of problems including red and painful eye, those related to a change in vision, double vision and squint, children's eye complaints, eyelid problems, neurological eye problems and trauma.

The ophthalmology team consists of ophthalmologists, nurses and health care professionals such as orthoptists, optometrists and ophthalmic technicians. The team work very closely with many other specialities including the emergency department, maxillofacial and ENT teams, neurologists, endocrinologists and paediatricians.

Eye Clinic Liaison Officers or ECLOs are based within eye clinics or hospitals. They play an important role in helping patients, recently diagnosed with an eye condition or who are experiencing changes in their eyesight, to understand the impact of their diagnosis. They also provide patients with emotional and practical support. These are available at Brighton and Sussex University Hospitals and at East Sussex Healthcare Trust.

Rehabilitation is the structured support put in place by a local authority to maximise independence and quality of life for people with sight loss. This is required by the Care Act 2014. The Act specifies that: assessments are carried out by competent, skilled people; rehabilitation is not limited to six weeks; that minor aids and adaptations must be free and information must be accessible.

A team of Rehabilitation Officers for the Visually Impaired (ROVI's) is in Brighton & Hove. At the Low Vision Clinic people receive advice, information, support and aids.

### **THE EAST SUSSEX SENSORY NEEDS SERVICE VISION IMPAIRMENT TEAM**

The Vision Impairment (VI) Team is part of the Inclusion, Special Educational Needs and Disability Services (ISEND). The team supports children and young people (CYP) with VI, their families, settings and schools from the time of diagnosis until the end of their education in East Sussex.

The VI Team is made up of: qualified teachers of VI; specialist teaching assistants; a technical resource officer; and a Habilitation and Mobility Officer.

**Referrals** If there are any concerns around the vision of a child or young person [CYP], people are advised to seek medical advice in the first instance. There is an open referral system, accepting referrals from hospitals, families, and other professionals. Contact details are provided below. Settings and Schools can refer through the front door pathway.

The team works in partnership with the CYP, their parents and carers, settings and schools. They also collaborate with a range of other professionals including the NHS, social-care services and voluntary organisations.

**For Pre-School Children** support can include:

- Advice for parents and carers
- Assessing the child's needs specific to their VI. This can include completing a functional vision assessment
- Advice, strategies and training for early-years and childcare settings (for example, nurseries)
- Direct teaching of specialist skills
- Advice, strategies and training for children transitioning into school
- Attending multi-agency meetings
- The Habilitation and Mobility Officer will support families and settings to introduce skills to help the child develop independence

**For School age children and young people** support can include:

- Assessing the child's needs specific to their visual impairment. This can include completing a functional vision assessment and technology assessment
- Direct teaching of the specialist curriculum including Braille, tactile skills, touch typing, use of specialist technology, mobility and habilitation
- Advice regarding the modification of work materials and access to exams
- Advice and strategies related to accessing the curriculum
- Delivering training for professionals
- Completing lesson observations
- Specialist technology support for the child and training for staff
- Contributing to statutory assessments and attending annual reviews and multi-agency meetings
- Advice for children transitioning to different settings (for example, from Primary to Secondary school)
- The Habilitation and Mobility Officer will assess the school environment to ensure that the child or young person can move around safely. Where necessary mobility routes will be taught as part of transition

ESCC supports employment of people with disabilities and sensory impairments to help them secure or maintain paid or voluntary work

## **Benefits**

Disability Living Allowance (DLA) and Personal Independence Payment (PIP) are benefits paid to help people with the extra costs incurred as a result of a disability. All working age DLA claimants are having their needs re-assessed and potentially moved onto PIP. People moving from DLA to PIP often need support with applications or appeals. The proportion of people still waiting to move to PIP indicates potential need for welfare rights support.

In East Sussex, there were 570 blind and partially sighted people claiming either Personal Independence Payment (PIP) or Disabled Living Allowance (DLA). In May 2020, there were still 17% of working age DLA claimants waiting to be moved on to PIP.<sup>xxxvii</sup>

## **Long term support from Adult Social Care**

There were 57 clients whose primary support need was visual impairment in 2019/20.<sup>xxxviii</sup>

## **Transport**

Blue badges are parking badges for disabled people. Local authorities issue them to individuals and organisations concerned with the care of disabled people. A Blue Badge is valid for a period of three years. People who are registered as blind are automatically entitled to a blue badge if they register for one (there is no further assessment of need).

In East Sussex, 190 blue badges were issued to people with sight loss in 2015/16. 601 blue badges were held by people registered blind in 2016, which represents 31% of people who are registered blind.<sup>xxxix</sup>

## **Education**

A statement of special educational needs (SEN) is issued to children to set out any additional help required in the education setting. In East Sussex, there are 91 pupils with a statement of special educational needs (SEN) or education, health and care (EHC) plans with vision impairment as their primary support need.<sup>xl</sup> Of these pupils: 49 are in primary school; 34 are in secondary school; 8 are in special schools.

## **National Quality improvements**

The NICE Quality standard will help contribute to improvements in: reducing avoidable sight loss in adults with serious eye disorders; improving health-related quality of life for adults with serious eye disorders; ensuring patient safety incidents are reported for adults with serious eye disorders; and addressing the social isolation of adults with serious eye disorders.<sup>xli</sup>

## **Vision Impairment in the Armed Forces Community and Emergency Services**

There are 50,000 blind veterans across the UK that need support. Healthcare professionals are encouraged to signpost blind and vision impaired ex-Service men

and women to vital sight loss services and support, regardless of how they lost their sight.

Blind Veterans UK are the leading organisation supporting vision impaired ex-Service men and women, regardless of when or for how long they served. (They also assist those who have been injured in the line of duty coming from the emergency services). Blind Veterans UK get blind veterans back on their feet, recovering their independence and discovering a life beyond sight loss. Referrals are made from the Sussex Eye Hospital to Blind Veterans UK, which has a centre just outside Brighton.

### **Key vision related public health outcomes**

The following data are routinely reported

#### **Social care-related quality of life (Adult Social Care Outcomes Framework)**

- Client satisfaction with care and support (Adult Social Care Outcomes Framework)
- Health-related quality of life for people with long-term conditions (NHS Outcomes Framework)
- Preventable sight loss (age related macular degeneration, glaucoma, diabetic eye disease, sight loss certifications) (Public Health Outcomes Framework)
- [Atlas of variation in risk factors and healthcare for vision](#)

#### **Links to main evidence sources and sources of information and help:**

[RNIB sight loss data tool](#)

[How often can I have a free NHS sight test?](#)

[Free NHS eye tests and optical vouchers](#)

[The Sightline Directory](#) provides more information on services aimed at helping blind and partially sighted in East Sussex. Visit [www.sightlinedirectory.org.uk](http://www.sightlinedirectory.org.uk) for more details.

#### **How to contact the ESCC Vision Impairment [VI] team?**

The team can receive referrals from parents, carers, settings or schools as well as the NHS.

#### **Vision Impairment team contact details are:**

Sensory Needs Service; East Sussex County Council

County Hall; St Anne's Crescent Lewes BN7 1SG

Phone: 01273 481154 Email: [scsn@eastsussex.gov.uk](mailto:scsn@eastsussex.gov.uk)

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- <sup>i</sup> <https://www.iapb.org/vision-2020/>
- <sup>ii</sup> <https://www.visionuk.org.uk/>
- <sup>iii</sup> Department for Education and Skills (2005) Data Collection by Type of Special Educational Need
- <sup>iv</sup> <https://www.visionuk.org.uk/college-of-optometrists-report-focus-on-falls/>
- <sup>v</sup> Sight loss: a public health priority (2014), RNIB <http://www.rnib.org.uk/services-we-offer-advice-professionals-health-professionals/public-health-professionals>
- <sup>vi</sup> Living with sight loss: Updating the national picture. RNIB and NatCen, 2015
- <sup>vii</sup> RNIB East Sussex report. Accessed 26/06/19
- <sup>viii</sup> Access Economics (2009), Future Sight Loss UK 1: Economic Impact of Partial Sight and Blindness in the UK adult population. RNIB
- <sup>ix</sup> <https://www.bbc.co.uk/news/health-48824720>
- <sup>x</sup> [Free NHS eye tests and optical vouchers - NHS \(www.nhs.uk\)](#); [How often can I have a free NHS sight test? - NHS \(www.nhs.uk\)](#)
- <sup>xi</sup> <https://www.rnib.org.uk/professionals/knowledge-and-research-hub/key-information-and-statistics/sight-loss-data-tool>
- <sup>xii</sup> Royal National Institute of Blind People (RNIB). Unseen: Neglect, isolation and household poverty among older people with sight loss. 2004.
- <sup>xiii</sup> ONS (2020) Population estimates for the UK, England and Wales, Scotland and Northern Ireland: mid-2020
- <sup>xiv</sup> Pezzullo et al (2017). The economic impact of sight loss and blindness in the UK adult population. RNIB and Deloitte Access Economics. Prevalences applied to subnational population projections.
- <sup>xv</sup> Higher proportions of BAME communities, the number of people in low income households and access to healthcare services could all potentially impact on the prevalence of sight loss in localities.
- <sup>xvi</sup> Keil (2013), Key statistics on number of blind and partially sighted children and young people in England. RNIB ; Morris and Smith (2008), Educational provision for blind and partially sighted children and young people in Britain: 2007. Prevalences applied to subnational population projections.
- <sup>xvii</sup> This figure includes: children who are registered blind or partially sighted; children who are living with sight loss but who are not registered blind or partially sighted
- <sup>xviii</sup> People that have a Certificate of Vision Impairment from an ophthalmologist choose whether or not to be included in their Local Authority's register of blind or partially sighted people; registration is not automatic. Those that register become eligible for certain concessions. This means that not everybody that has been certified as having a vision impairment is recorded on a Local Authority register.
- <sup>xix</sup> Public Health England (2021), Public Health Outcomes Framework Data Tool; indicators on avoidable sight loss.
- <sup>xx</sup> [Public Health Profiles - PHE](#)
- <sup>xxi</sup> NHS Digital (2021) Registered Blind and Partially Sighted People - England, Year ending 31 March 2020.
- <sup>xxii</sup> NHS Digital (2021) Registered Blind and Partially Sighted People - England, Year ending 31 March 2020.
- <sup>xxiii</sup> NHS Digital (2021) Registered Blind and Partially Sighted People - England, Year ending 31 March 2020.
- <sup>xxiv</sup> NHS Digital (2021) Registered Blind and Partially Sighted People - England, Year ending 31 March 2020 ; and benchmarking tool.
- <sup>xxv</sup> NHS Digital (2021) Registered Blind and Partially Sighted People - England, Year ending 31 March 2020; and NHS Digital (2017) Registered Blind and Partially Sighted People - England, Year ending 31 March 2017.
- <sup>xxvi</sup> NEHEM (2013) National Eye Health Epidemiological Model. Data and models by Public Health Action Support Team, published by Local Optical Committee Support Unit. Prevalences applied to subnational population projections.
- <sup>xxvii</sup> POPPI (2013), Projecting Older People Population Information System. Institute of Public Care for the Department of Health ; General Household Survey 2007, table 7.14 Chronic sickness: rate per 1000 reporting selected longstanding conditions, by sex and age, Office for National Statistics. Prevalences applied to subnational population projections.
- <sup>xxviii</sup> POPPI (2013), Projecting Older People Population Information System. Institute of Public Care for the Department of Health. Prevalences applied to subnational population projections.
- <sup>xxix</sup> Thomas Pocklington Trust (2007), Dementia and serious sight loss, Occasional paper February 2007, number 11. Prevalences applied to subnational population projections.
- <sup>xxx</sup> Emerson and Hatton (2004), Estimating the Current Need/Demand for Supports for People with Learning Disabilities in England. Lancaster: Institute for Health Research, Lancaster University, 2004 ; Emerson and

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Robertson (2011), The Estimated Prevalence of Visual Impairment among People with Learning Disabilities in the UK. RNIB. Prevalences applied to subnational population projections.

<sup>xxxvi</sup> NHS Digital (2021) Registered Blind and Partially Sighted People - England, additional disability, year ending 31 March 2020

<sup>xxxvii</sup> POPPI (2013), Projecting Older People Population Information System. Institute of Public Care for the Department of Health ; Davis A (Ed.), Hearing in Adults (1995), Whurr Publishers Limited ; Davis A et al, Health Technology Assessments 11(42):1-294 (October 2007). Health Technology Assessments. Prevalences applied to subnational population projections.

<sup>xxxviii</sup> Robertson J and Emerson E (2010), Estimating the Number of People with CoOccurring Vision and Hearing Impairments in the UK. Centre for Disability Research. Prevalences applied to subnational population projections.

<sup>xxxix</sup> Source: Dept Adult Social Care ESCC. Accessed 15/09/21.

<sup>xl</sup> Boyce T, Stone MK, Johnson S and Simkiss P (2013), Projecting numbers of falls related to visual impairment. British Journal of Healthcare Management Vol 19 No 6. ; Scuffham, P. et al, (2003), Incidence and costs of unintentional falls in older people in the United Kingdom, Journal of Epidemiology and Community Health, Vol. 57, No.9, Sept. 2003, pp.740-744. Prevalences applied to subnational population projections.

<sup>xli</sup> NHS Digital (2021) Registered Blind and Partially Sighted People - England, additional disability, year ending 31 March 2020.

<sup>xlii</sup> Department for Work and Pensions (2021) DLA cases in payment: local authorities by main disabling condition and PIP claims in payment: local authorities by disability (May 2020)

<sup>xliiii</sup> Source: Dept Adult Social Care ESCC. Accessed 15/09/21.

<sup>xliiii</sup> Department for Transport Statistics (2016), Blue badge scheme statistics: 2016.

<sup>xliiii</sup> Department for Education (2020) Special educational needs in England: January 2020.

<sup>xliiii</sup> <https://www.nice.org.uk/guidance/qs180/chapter/Quality-statement-6-Certificate-of-vision-impairment>