



The image shows a woman with short brown hair and glasses, wearing a mustard-colored sweater, holding two leaflets. The leaflets are for 'Easy Eye Care' services. The top leaflet is from South East London Integrated Care System and features the SEE ABILITY logo. It includes a yellow box with the text: 'Every year, you should have an Annual Health Check with your GP (14 plus) and an eye test with your optician.' Below this, there are bullet points: 'You don't have to be able to read or speak to have an eye test.', 'Adults with a learning disability are 10x more likely to have a problem with their eyes.', and 'The eye test is not just about glasses - it detects eye conditions and general health conditions as well.' It also states: 'This is a specialist eye care service for people with learning disabilities and autistic people of all ages, who are registered with a South East London GP. The service provides:' followed by a list: 'Longer eye tests or multiple appointments, where needed.', 'An easy to understand report about your eyes.', and 'Local optometrists and dispensing opticians who have had extra training.' A yellow box at the bottom says: 'Please tell the optician's practice that you want to book an Easy Eye Care appointment.' The date 'July 2023' is printed at the bottom left of the leaflet. The bottom leaflet is partially visible and shows the SEE ABILITY logo, the title 'Easy Eye Care', and the subtitle 'A service for people with learning disabilities and autism'. It includes an illustration of a GP surgery, a close-up of an eye, and a calendar showing the years 2020, 2021, 2022, 2023, and 2024.

2024-27 Eye Care and Vision Strategy

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Introduction and Context

SeeAbility's 2022-27 organisational strategy (1) was co-produced over eight months with people we support and their families, as well as colleagues from across the charity. This Eye Care and Vision strategy is designed to meet the following key objectives set out in that strategy and in our Theory of Change:

- As leaders in eye care for people with a learning disability globally, we will use our credibility to drive system change
- We will be at the forefront of research, education, and models of delivery of eye care for people with learning disabilities
- The difference we want to make (from SeeAbility Theory of Change) is "More people getting the eye care they need, wherever they live"

Background

People with a learning disability have on average over 11 co-existing health conditions with the most common of these being visual impairment (2) There is a ten times higher prevalence of eye disorders (3) and pathology than in the general population and often age-related changes happen at a younger age.

Yet despite this, our own work in special schools has provided the evidence that people are missing out on eye care, with 43% of children having no eye care history, yet half having a significant problem with their eyes (4). Adults are even less likely to access care. People with a learning disability may be unable to communicate visual difficulties and diagnostic overshadowing is common, where behaviours due to poor vision are assigned to a person's learning disability.

When SeeAbility began our eye care programme in 2005, we knew people we were supporting had experienced avoidable sight loss and some had never received eye care. Our goal was, and remains now, to prevent avoidable sight loss for people with learning disabilities and autism and ensure that the appropriate support is accessed in the case of unavoidable sight loss. We have evolved the way we do this, as a team we are proud of the fact that our four lived experience eye care champions are at the centre of everything we do. We aim to provide and promote a clear public health and inequalities message whilst working to influence policy change by leading on cross-sector and organisation collaboration and producing an evidence base.

The Eye Care Journey

Everyone with a learning disability or autism is on an eye care journey and our strategic ambition is for everyone to

- Access a successful and truly reasonably adjusted sight test -no one is too disabled
- Access and use the right glasses at the right time, if needed
- Have their visual abilities and needs understood by themselves and/or everyone who supports them
- Ensure hospital eye care is accessed at the right time so that eye conditions are diagnosed and treated optimally
- Where there is unavoidable sight loss (around 10% of people with a learning disability or autism (3)) we will ensure timely access to specialist visual habilitation or rehabilitation services and sight loss certification

Our commitment begins in our own homes, where we have a team of in-house vision rehabilitation specialists who work with everyone with sight loss at SeeAbility to allow them to use their vision optimally and put in place strategies to minimise the impact of their visual limitations. SeeAbility have an annual 'Eye Care and Vision Charter' which ensures everyone SeeAbility supports is optimally supported on their own eye care journey.

Our eye care information and advice service, including our online suite of Easy Read resources, is now the go-to resource for the eye care and learning disability sectors. SeeAbility remains the only organisation globally specialising in improving eye care for people with learning disabilities and autism. Our messages of 10x and 28x more likely are now embedded in government policy documents and NHS initiatives - from Public Health England (5-7) to the new Office for Health Improvement and Disparities (8), on the importance of addressing sight issues in this patient population.

Our Children in Focus project, begun in 2013, used research in practice and cross-sector professional collaboration to achieve a change in national policy to ensure the 160 000 children attending special schools in England will receive equitable eye care and glasses in their familiar school environment. SeeAbility's fundraised campaign was awarded a Department of Health Innovation Grant and went on to become the largest global study of this cohort of children. The work led to SeeAbility being awarded the Civil Society Healthcare and Charity of the Year awards (9) and the National Association of Special Schools (NASEN) Provision of the year award in 2019 (10). The peer reviewed published research won the 2019 College of Optometrists Giles van Colle memorial award (11) for paediatric research excellence.

Since 2021, a team of specialist clinicians have been providing an eye care and glasses service in 31 London school sites, with around 16 clinics a week in term time providing for a population of over 3000 children. Our own parent satisfaction survey (19% of 2183 parents responded) was overwhelmingly positive, with 96% of parents happy with the service and 92% reporting a better understanding of their child's vision because of the service. SeeAbility's service is fully sustainable with the current NHS contract. The clinicians training we were commissioned by NHS England to provide during the Proof-of-Concept period from 2021-2023 was shown by an independent evaluation (12) to be both necessary and appropriate and it is our ambition to continue to lead on education and training for the national service.

Our four Eye Care Champions, based in the Northwest of England and London, have become lived experience experts and now seize opportunities at a national level across health, social care and the eye care sectors, as well as working for system change at a local level, to develop and promote more equitable community Easy Eye Care pathways. In the past 3 years, a specialist pathway has been re-commissioned in the Greater Manchester and Cheshire & Merseyside ICS (Integrated Care System) regions and newly commissioned in Lancashire and South Cumbria, giving full coverage in the Northwest NHS region (13). Our eye care champions based in the Northwest have been promoting its uptake with peer support groups and health and social care providers in Southeast London, our work funded by the Vision Foundation was successful in the establishment of an Easy Eye Care pathway for the 9k people with learning disabilities and autism in Southeast London and the ICS there now funds an eye care champion to promote the pathway one day a week. We have also begun to focus, in London and the Northwest, on better integration of the pathway into existing care pathways- especially the Learning Disability GP Annual Health Check.



Scope

Our work concentrates on England although we take opportunities where we can to influence on a UK wide basis and to add to the global debate on avoidable sight loss and endemic health inequalities for people with learning disabilities. To illustrate the scale of who we are trying to reach:

There are approximately

- **956,000 adults** with learning disabilities in England (1.1 million in the UK)
- **301,000 children** (0-17) with learning disabilities in England (356 000 in the UK) (14)

Of this population:

- **100%** need access to a sight test at least once a year
- **>60%** need access to well fitting glasses (often to stronger and higher prescriptions) and support to wear them
- **About 10%** will have unavoidable sight impairment and need support from a vision rehabilitation or habilitation specialist and access to sight loss certification.

Eye Care Strategic Objectives 2024-27



Excellence



Community



Transformation



Voice

1. Ensuring everyone we support at SeeAbility accesses the right eye care at the right time
2. Influencing policy for a more equal right to sight
3. Making the special schools programme a success
4. Providing unique specialist learning disability and autism eye care information and advice service
5. Providing a lived experience and eye care professional delivered education and training programme



1. Ensuring everyone we support at SeeAbility accesses the right eye care at the right time

- Timely specialist in-house vision rehabilitation / habilitation support will be accessible for everyone at SeeAbility. A vital step in optimising Quality of Life for everyone is enabling best use of their vision and ensuring that everyone involved in an individual's support understands their visual abilities, needs and limitations. For everyone, including individuals with no useful vision, Quality of Life will be positively impacted by facilitating environmental adaptations, orientation and mobility support and visual (where appropriate) and non-visual strategies to facilitate independence. These must be tailored to each individual holistically, considering their ambitions and other disabilities
- We will develop a SeeAbility Specialist Learning Disability and Autism Vision Rehabilitation Service policy to clearly set out our teams service for both internal and external audiences
- Everyone new to SeeAbility support will receive an initial assessment from our vision rehabilitation specialists before transitioning into their new home. We will create a robust system to enable our team to work collaboratively with our new business, people development, and property teams to ensure everyone's eye health and visual needs are assessed and identified. This will ensure environmental adaptations, staff training needs and rehabilitative interventions/ programmes are in place as soon as we commence support
- We will develop a robust working commitment with the behaviour consultants to ensuring annual eye health appointments are supported and visual needs are referred for vision rehabilitation specialist's input. Optimally meeting a person's visual needs will improve quality of life and minimise risk which may in turn reduce behaviours of concern
- We will work across departments to raise awareness and share specialist knowledge in the field of assistive technology
- We will lead on an annual internal 'eye test week' to align with National Eye Health Week and will support all our homes to complete the annual Eye Care and Vision Charter
- Everyone supported by SeeAbility will have the results of their annual eye care and any vision rehabilitation needs (including environmental needs) embedded into their support plan
- Eye care and vision training will continue to be a mandatory element of SeeAbility's induction for all new staff and the team will ensure it continues to be up to date and relevant

- We will expand the Vision Rehabilitation Specialists Team to include assistants. This will ensure that as we expand as an organisation we can continue to meet all visual needs, increasing quality of life opportunities, for everyone we support
- We will develop a new staff visual impairment training programme that is future proof for organisational growth
- We will capture our expertise in vision rehabilitation practice for people with learning disabilities and autism through a new audit system, this will enable us to review and evidence the impact of all interventions on each individual's quality of life



2. Influencing for a more equal right to sight (policy change)

- Work towards equality of access to the entire eye care pathway: primary, secondary eye care and sight loss support (RNIB sight loss support pathway)
- Campaign for learning disability to become an eligibility criteria for an annual NHS sight test
- Campaign for automatic referral for a sight test as part of the Learning Disability Annual Health Check
- Raise awareness of the need for routine primary eye care at least annually
- Continue to campaign for specialist primary eye care commissioning models that support those with more severe learning disabilities- the special schools service and an optometry first Easy Eye Care pathway in each Integrated Care Board (ICB)
- Seek more national opportunities for our expert lived experience Eye Care Champions and working with the engagement team around policy change
- Convene and chair a learning disability and autism Special Interest Group with representation from the optical, learning disability and sight loss sectors
- Promote and support commissioning of new Easy Eye Care services in London and, funding dependent, more widely
- Promote development of pathology specific eye care pathways to improve hospital eye care for people with learning disabilities, with an initial focus on keratoconus and cataract
- Use our expertise in vision rehabilitation to highlight statutory requirements to meet the needs of people with learning disability and/or autism and sight loss
- Publish 4 papers in the peer reviewed literature to include:
 - a scoping review of the evidence of a need for policy change for eye care for people with learning disabilities
 - an evaluation of an existing specialist community Easy Eye Care pathway to support the business case for future services
 - an evaluation of SeeAbility's lived experience eye care advocacy model



3. Making the special schools programme a success

- Continue as a gold standard service model provider in our existing schools
- Continual to lobby for a national commissioning framework and fee for the service and for ICBs to be mandated to commission
- If contractual arrangements make it sustainable to do so, expand our service across the London ICS footprint (population c22k) using a full cost recovery model (see Appendix 3 for more detail). Once commissioning arrangements known, set OKR for number of eye tests provided (minimum 2000)
- Consider opportunities for further contracts in the Southeast NHS region
- Continue to offer special schools clinician training in collaboration with City, University of London. (Our 15 point academic module is fully established, accredited and positively evaluated)
- Continue to offer staff training in all our contracted special schools at least annually, as well as offering in potential new schools to encourage service uptake. Train at least 500 school staff per year
- Ensure all special schools in England aware of SeeAbility & the national programme to ensure good uptake
- Continue to lobby for national data collection and opportunities for use in research



4. Providing a unique specialist learning disability and autism eye care information and advice service

- Review and update (to be fully accessibility) our suite of unique easy read eye care resources- ensure all of our resources are fully accessible, clinically up to date and the need for new resources is scoped.
- Develop, with input from Eye Care Champions
 - a new public health film with all of our key messages
 - a suite of accessible information films on eye care and eye conditions for our website
- Continue to provide learning disability and autism eye care email /telephone enquiry service
- Speak at 5 national eye care/ learning disability/health and social care events a year
- Publish 5 learning disability eye care articles a year in the optical, education, learning disability, health and social care press

- Produce 2 eye care blogs and 2 eye care stories for our website annually
- Continue to have at least 350 visits to the eye care pages of our website monthly
- Continue to produce and market/supply the Bradford Visual Function Box; sell at least 30 per year
- One day a week of Eye Care Communication and Marketing support



5. Providing a lived experience and eye care professional delivered education and training programme

- Continue to raise awareness and promote the commissioning and uptake of specialist eye care pathways for people with learning disabilities and autism with national stakeholder organisations in the health, social care, primary care, eye care and learning disability sectors.
- Promote the existing commissioned Easy Eye Care pathways in NW England & SE London and seek ICB funding for this work. Ensure more eye care and social care providers are aware.
- Annually attend and/or exhibit at at least 5 local events in the North West and 5 in London with a focus on peer to peer eye care awareness raising and promotion of the Easy Eye Care pathway.
- Deliver Tier 1 Oliver McGowan training to 400 optical sector providers- publish findings of this work and use it to influence the General Optical Council to mandate the training as is the case for all CQC regulated providers. This is especially critical for non- regulated staff.
- Develop our offer and promote commissioned CPD for optical sector/ social care/ hospital eye care.
- If it is mandated by the General Optical Council, consider sustainable provision and expansion of tailored Oliver McGowan Tier 1 & 2 training for the optical sector. The same offer could also be extended to secondary eye care providers
- Develop our offer of commissioned training on the importance of eye care and specialist rehab training for health and social care professionals and promote on our website.
- Promote our specialist offer of external assessments and training.
- Promote and provide eye care training & advice internally at SeeAbility.

Conclusion

This 3 year strategy aligns with SeeAbility's organisational strategic objectives. It has been developed based upon our learnings from the 2021-2023 Eye Care and Vision Strategy period, with a goal of ensuring a smaller non- operational team has maximal impact on national policy, whilst acknowledging the challenging financial landscape and so reducing the fundraised community eye care programme budget by 40% year on year (see Appendix 1). An ultimate goal for the team would be the expansion of the special schools' provision with economies of scale enabling our operational schools service to sustain our community eye care team. Critical to this period is ensuring that the national rollout of eye care in all English Special schools from April 2024 is successful and supported and that SeeAbility maximises opportunity to both provide the service to it gold standard not-for-profit model and train other providers using our successfully evaluated model.



Appendix 1. Team Staffing and budgets

Special Schools (67DP)

(delivery dependent on fees set by NHS England at or above current level to allow full cost recovery)

Head of eye care and vision 16.5hrs
Senior optometrist 19hrs
Clinical lead optometrist 15hr
9 bank optometrists
2 bank orthoptists
Special schools service manager (FT)
Special schools administrators (20hrs + 18.5hrs + 18.5hrs)
Senior dispensing optician (20hrs)
Clinical lead dispensing optician (FT)
6 bank dispensing opticians

Community eye care (65DP)

Head of eye care and vision 16.5hrs
National information and advice officer 7.5hrs
National eye care service development manager FT
Lived experience eye care champions 4 PT (2 FTE)

Vision Rehabilitation Specialists (66DP)

Lead Vision Rehabilitation Specialist FT
Vision Rehabilitation assistant (apprentice) (15hrs +7.5hrs study, apprenticeship)
Vision Rehabilitation Specialist SE x 2 FT
Vision Rehabilitation assistant SE FT vacant

Appendix 2. Team OKRs

OKR	Period	Target
Convene and chair a learning disability and autism Special Interest Group	ongoing	-
Papers accepted for publication in the peer reviewed literature	3 yrs	4
Homes successfully completing Eye Care Charter	Annually	>90%
Completed sight tests	Annually	TBC based on model commissioned
Speaking opportunities at national eye care/ learning disability/ health and social care events	Annually	5+
Articles published in optical/education learning disability or health and social care press	Annually	5+
Website blogs stories produced annually	Annually	2+ blogs, 2+ stories
Website eye care pages visits	Annually	>350
Bradford Visual function box sales	Annually	>30
Number of eye care online resources reviewed (total 41)		14
Attend and/or exhibit at local events in the North West	Annually	>5
Attend and/or exhibit at local events in London	Annually	>5
Deliver Tier 1 Oliver McGowan training to optical sector providers	Year 1	>400 trained

Appendix 3. London Special school population and % with SeeAbility service at 04/2024

ICS (Integrated Care System)	Total special school population	Current SeeAbility Service provision
South East London (SEL)	5250	1020 (19% of ICS)
South West London (SWL)	4338	822 (19% of ICS)
North East London (NEL)	4141	0
North Central London (NCL)	2161	0
North West London (NWL)	6048	1498 (25% of ICS)
TOTAL	21938 (c15% of England total)	3341 (15% of London)

Appendix 4. SWOT Analysis

STRENGTHS	WEAKNESSES
<ul style="list-style-type: none"> • SeeAbility only organisation globally focussed on learning disability eye care • Co-production at heart of team • Published peer reviewed evidence base for much of our work (special schools/policy) • Highly specialised and experienced team- all senior team and eye care champions have >5years experience with SeeAbility • Very low turnover in 'bank' clinical team • Building a body of peer reviewed published research • Lived experience eye care champions all now have over 5 years experience • Excellent working relationships with all eye care and learning disability sector bodies 	<ul style="list-style-type: none"> • Commissioning model and fee structure for Special schools eye care from April 2023 not yet known so sustainability of special schools service not certain • Have not increased bank rates of pay for optometrists since 2013 • Small team to influence 42 ICBS to commission Easy Eye Care pathway • Easy Eye Care community LOCSU pathway still needs evidence base • Wanting to reach 1.2 million people with eye care messages with a 0.2FTE equivalent post
OPPORTUNITIES	THREATS
<ul style="list-style-type: none"> • Government commitment to national special schools eye care rollout from April 2024 • Health Inequalities is a priority strategically for both NHS England and Integrated Care Systems, as is Eye Care Transformation given eye clinic waiting lists. SEND reform also a government agenda. • Support rollout of Welsh special schools eye care service national rollout from April 2024 • Create career progression opportunities by offering internal vision rehabilitation trainee role • Access to work funding for our champions to allow more strategic activity from rest of community team 	<ul style="list-style-type: none"> • Large sector providers (SpecSavers, Boots) compete for schools contracts/undercut if bid-based commissioning • Our school eye care model not sustainable with new commissioning framework/funding • Fundraising climate challenging for community team budget • NHS restructures and ICB commissioning of primary eye care making national public health messaging more challenging • Difficulty in recruiting vision rehabilitation professionals • Huge challenges to social care sector funding and pay make eye care low priority • New government and changing priorities

Appendix 5. References

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