



Optimeyes project: Final Evaluation report

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RNIB

Supporting people
with sight loss

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1. Introduction

The Optimeyes project was funded for two years from April 2015 by the Big Lottery Fund's (BLF) Reaching Communities programme. It was a partnership between RNIB and six societies for blind and partially sighted people in York, Selby, Ryedale, Lincolnshire, Sheffield and Hull and East Riding. This final evaluation report outlines the core components of the project, assesses its achievements against its intended outcomes and provides an overview of learning to inform future developments.

1.1. Project aims and outcomes

The overall aims of Optimeyes were: to help identify older people with or at risk of sight loss; to address its practical and emotional impact for people across both urban and rural areas; to help older people to better understand their eye condition, learn how to deal with sight deterioration and take control of their lives.

These aims were informed by consultation with older people with sight loss, which highlighted a number of common issues, including: the challenges they face with day to day tasks, such as using transport; the importance of learning new skills, such as making use of IT; the need for access to early support when sight loss is diagnosed; the value of peer support to reduce isolation and depression, including joining with others to campaign for better services.

Consultations and practice experience also identified some common gaps in provision: information for visually impaired people can be patchy and agencies are not always aware of the social and emotional impact of sight loss or what support is available. As well as providing direct support, therefore, Optimeyes also aimed to forge new links and greater collaborative working between project partners and other agencies in their area. Optimeyes drew on the learning from a previous BLF funded project, OPTiC (Older People Taking Control), which developed a partnership model to help reach older people with sight loss via recognised and trusted services, such as fire safety checks.

Optimeyes aimed to achieve the following four outcomes:

- Older people with sight loss better understand how to manage their eye health, seek support to prevent dependency, and report reduced isolation.
- Older people with sight loss demonstrate improved confidence and skills for independent living after accessing relevant information, advice and training.
- Older people with sight loss are able to actively influence local policies and practice via local campaigning groups.
- Local partners have increased capacity to identify and support older people with sight loss to take more control of their lives.

1.2. The evaluation of Optimeyes

Evaluation was built into the project at the start in order to assess its achievement of the above outcomes and capture the learning (e.g. what has worked well, what have been the challenges) to inform the progress of the project and potential future development.

The methodology consisted of three types of data collection:

- **Project monitoring** to record project activities, referral and take up information, and profile information about those who take up a service.
- **Baseline and follow up questionnaires for beneficiaries** (aiming for a sample of 50) to track any changes for individuals relating to project outcomes.
- **Interviews/focus groups** with beneficiaries, volunteers, staff and external agencies from the participating organisations.

An external evaluation consultant, Di McNeish, provided oversight of the evaluation design, data collection, analysis and reporting and conducted some of the interviews and focus groups. Other data were collected by staff from RNIB's evaluation team with monitoring and case study information collected by the project partners and the Optimeyes project manager.

An interim report was produced in May 2016, informed by two focus group discussions with beneficiaries and volunteers, individual interviews with staff from each of the six Optimeyes partners and a selection of external partner agencies and individual beneficiaries. In addition, this final report draws on:

- six focus groups involving over 50 beneficiaries
- one focus group with South Yorkshire Fire and Rescue Service
- one focus group with 10 managers and staff from the project partners
- four individual interviews with project partners
- six individual interviews with external agency informants
- feedback collected by the project from over 400 people attending training and other events
- analysis of 51 baseline and follow up questionnaires.



2. What Optimeyes did

Optimeyes provision was tailored to the needs of each of the six areas so there was some variation in activities. However, across the project there were several common elements:

- The creation of the partnership between the six societies and RNIB, providing a regional network of sight loss organisations.
- The development of stronger partnerships with other agencies in each area, including training and awareness raising for professionals.
- The use of the Eyes Right Toolkit.
- Development of new activities and support for visually impaired people.
- Training and confidence building courses for visually impaired people.
- Development of volunteering, peer support and campaigning activities.

2.1. A partnership of sight loss organisations

The challenge of creating a partnership of six organisations should not be underestimated. Most of the organisations involved had not worked in such a partnership before, they had their own histories and ways of operating and they varied in size and scope. Some were quite large, well established societies with a substantial pre-existing service base. Others were much smaller, to the extent that Optimeyes was their primary source of funding.

Despite these differences, the partnership became well established and by the end of the first year was viewed as an early success story by staff in the six societies:

“I really like the links with partner societies. Done some joint work with York. We can share ideas and tips. It reduces my isolation too. Good if people move between places – we know who to refer people on to.”
(project worker)

They also valued the role played by RNIB:

“I personally feel that the way the project has been shaped by RNIB in partnership with societies has been great. Making new connections and doing new things, getting together to share ideas – really helpful.”
(project worker)

This success was sustained throughout the second year with the Optimeyes partnership becoming a valued regional network of sight loss organisations, providing a space to share experiences and different ways of working. Project workers expressed their appreciation of the support they had received through the network:

“Some of the high points for me have been the buzz I have felt when I have left our quarterly meeting... hearing about other people’s successes and failures has been really good... helps build confidence when you hear that sometimes things haven’t gone to plan for others... you feel like you are not on your own.” (project worker)

Several talked about the relationships they had built with colleagues in their neighbouring society and how useful they found talking through similar issues and concerns:

“We have definitely built a relationship going forward. We aim to continue the network that has been established through Optimeyes so that we can continue to meet, share learning and support one another where we can.”
(project worker)

For some, this helped build confidence to try new things, as well as making workers feel less isolated:

“It’s been really great working together with local societies; sharing ideas about what we could try and what has worked. I think we have gained confidence together as a result. Having that group of people for support has helped us all try something new.” (project worker)

2.2. Stronger local partnerships

A second key element of Optimeyes was the extension of partners’ connections locally. All have developed new partnerships with local organisations, businesses, services, groups or networks, enabled by the increased capacity of Optimeyes. Examples include training to occupational therapists (OTs), local housing providers, library staff, carers organisations, homeless charities, arts organisations and private companies as well as health and social care. As these developed, they often led to further connections:

“I’m pleased with the progress on staff training e.g. with the NHS – we’ve done training with OTs which went really well. They now all want the eyes right tool and we’ve been asked to go out to the physios too and the Age UK falls team. We’re even doing eye health training for staff in Hull prison.”
(project worker)

Stronger local partnerships helped societies develop and deliver new activities, raise their profile and increase their reach to new beneficiaries. It also benefitted other agencies by increasing their awareness of sight loss and eye health, helping them offer people a better service:

“It’s been a win-win situation. They [external partners] have gained from our time and undertaking the eyes right toolkit with their customers or employees and we can ask for their help... with things like venues and volunteers.” (project worker)

Benefits of stronger local partnerships included:

Joint development of new services and activities

For example, York Blind and Partially Sighted Society (YBPSS) collaborated with York City Council Sports and Active Leisure Team to establish boccia sessions. A local authority worker helped the society understand the game, deliver a taster day for people to try it out, referee training, provide access to tournaments and external funding for equipment. YBPSS provided a venue, volunteers and staff to run regular sessions. As a result, York City Council accessed a group they often find hard to reach and helped engage people in physical activity, both were priorities for the local authority. YBPSS have gained a regular, well attended boccia session:

“For us, blind and partially sighted people are a hard to reach group at times, especially in regards to their confidence to participate in sports opportunities... so we have made some really good links here... I think it has gone really well...didn’t realise it would have achieved what we have, they [local society] now have an in house boccia team which they didn’t have before... people really enjoy it and it is a great opportunity to socialise.” (external partner)

South Lincolnshire Blind Society (LSBS) worked with Q Hotels to make use of their swimming pool to help establish a swimming session for people with sight loss. Q Hotels gained new members to their sports and leisure facilities and SLBS gained a regular swimming session.

Raised profile and increased reach for local societies

Optimeyes provided the staff time to enable societies to do the networking necessary for increasing referrals and growing membership:

“The project has provided the resources to go out and network with a whole range of new partners, agencies, services and networks... for example we have delivered visual awareness training with local housing associations who have really appreciated the insight into the impact of sight loss on people, the importance of eye health and where they can refer people for support.” (project worker)

This was particularly important for reaching those who do not easily access services. Local societies worked with organisations linked to traditionally hard-to-reach communities, such as roma and traveller groups, drug and alcohol services, homeless charities and organisations working with asylum seekers and refugees, in order to raise their awareness of sight loss and develop new referral pathways:

“We found out that travellers were a group that are at a greater risk of sight loss compared to other groups. Working with the Traveller Trust we incorporated eye health messages in to literacy classes. We also used the Eyes Right (Screening) Toolkit as part of training with their staff. Another group at high risk of sight loss are homeless people. We have been able to engage with agencies and delivered [Eyes Right] Toolkit training to do as part of drop in sessions.” (project worker)

Societies also worked with local services to reach isolated rural communities. Examples are Selby District Vision's work with the Social Prescribing Service, Hull and East Riding Institute for the Blind's work with East Riding of Yorkshire Council's Occupational Therapy and Physio Services and Sheffield Royal Society for the Blind's work with South Yorkshire Fire and Rescue Service:

"One of the things we have done that has worked really well is work together with the carer support services across our region. They have started to disseminate our information along with their own... this has extended our reach dramatically and brought new people in."
(project worker)

In some cases, the extension of local partnership working highlighted how unknown the society had been previously:

"From the feedback we have had with external partners we now know that we have been an unknown organisation in our district... time and again agencies and services have said to us... we didn't know you existed." (project worker)

Better joined up support for people with sight loss

Interviewees felt that better joined up working led to clients with sight loss receiving a better service, including more appropriate assessment, provision or signposting to tailored interventions:

"We have joined forces with external agencies to reach more people – who we may not usually be in contact with. A good example is the sheltered housing providers we have worked with... these are supporting people with additional needs (so other impairments). We have joined in with them when they engage with their clients during coffee sessions."
(project worker)

Interviewees from external agencies thought that the exchange of referrals was working well, commenting on the value of being able to refer people to local societies for specialist support:

"I feel very comfortable with referring... [the project worker] personality and approach is perfect for my clients... especially in regards to making people feel safe and at ease. She gives me regular up-dates on what has happened to clients after I have referred, which is great to keep track. I know many people have bought equipment or have joined a social group and are linked in with wider services." (external partner)

Raising awareness and changing practice

Optimeyes has helped create opportunities for other agencies to connect with blind and partially sighted people themselves. Several external partners described this contact as enabling them to think about how to adjust the way they worked to be more accessible. Sheffield Theatres, for example, met with people with sight loss as part of visual awareness training. They heard from people who had stopped attending the theatre due to their access needs not being met. As a result, the theatre has made changes in how they approach people with sight loss and have looked at how things like contrast and lighting can improve people's theatre experience.

2.3. Training for other agencies

Training has been an important way to raise awareness and change the practice of other agencies. Feedback from external interviewees on this was very positive, with people particularly valuing the input from people with sight loss themselves. This was also reflected in feedback forms which were completed by 301 people from other agencies. Of these:

- 99 per cent of people thought that the course they attended met its aims
- 99 per cent rated their course as either “excellent” (67 per cent) or “good” (32 per cent)
- 92 per cent said they would either be “very likely” (64 per cent) or “likely” (28 per cent) to use the new skills they had learned
- 100 per cent of participants agreed that “the course has given me a better understanding of the experiences of people with sight loss”
- 99 per cent agreed that “the course has given me a better understanding of the risk factors associated with sight loss”

2.4. Use of the Eyes Right Toolkit

As part of the Optimeyes project, partners were trained to use the Eyes Right Toolkit developed by Thomas Pocklington Trust. The Toolkit offers a simple vision screening check and has provided local societies with a new way to identify and help people who may have sight loss, but are unaware of the support services available. The Eyes Right Toolkit has been used to engage members of the public as part of local events or through engaging external partner staff and their clientele in eye screening. It has revealed some lack of public awareness about the importance of regular sight checks and in some cases picked up indications of sight difficulties resulting in advice to visit an optician:



“We have... accessed people through the major employers and businesses locally as part of their health days... using the eyes right tool kit... has helped them to gain an insight into who we are and the importance of eye health and regular checks with the optician.” (project worker)

“Eyes Right Toolkit... gets the eye health message out there... we have raised the awareness of agencies and organisations outside of the sight loss sector about the different eye conditions and the importance of eye health.” (project worker)

Some societies have trained external partners to use the Toolkit as part of their community outreach work with clients, such as Selby District Social Prescribing Service:

“Our Social Prescribing Service started 18 months ago and has now reached over 300 clients in the district’s most rural and isolated communities. Social prescribing starts with a home visit and I use the principles from the Eyes Right Toolkit to assess people’s eye health as part of my visit. Our biggest referral has been to Selby District Vision and the toolkit has helped us to identify people who haven’t in the past been on the radar in terms of sight loss. This could be someone who has just started to find reading difficult or may not be able to see the clock to tell the time.”
(external partner)

Several project staff felt that the Eyes Right Toolkit and its eye health messages had helped to change the profile of their organisation from solely sight loss to sight loss and eye health, widening their customer base:

“We have seen our clientele change as a consequence of Optimeyes and are supporting a broader range of people (those at risk of sight loss and those who have mild sight loss). Furthermore, through Optimeyes we have become a service for everyone through its messages around retaining good eye health.”
(project worker)

Case Study: Partnership with South Yorkshire Fire and Rescue Service

Optimeyes built on the learning from the OptiC project to extend the partnership with the Fire and Rescue Service in order to integrate awareness of sight loss into fire safety checks. As part of a focus group, seven officers from South Yorkshire Fire and Rescue Service discussed their experience.

Most had participated in Eyes Right Toolkit training as part of their continual professional development. Participants valued the training, which helped raise their awareness of sight loss generally, especially the different eye conditions. Several participants felt more able to support someone with sight loss and identify possible risks during a fire safety check, for example, having a safe and clear escape route. They also felt better equipped to identify someone who may be struggling with sight loss:

“If you go in and visit someone who has sight loss it’s helped us to think of it in a wider spectrum. So if someone hasn’t got peripheral vision we have to consider that when talking about fire safety checks.”

Participants in the focus group had not used the Eyes Right Toolkit as part of a fire safety check. They commented that there tended not to be enough room to undertake the test in peoples’ homes and they had limited time to carry it out. Despite the training, some did not feel confident enough within their role to screen someone’s sight.

“To be honest, I have never used the pack [toolkit] in someone’s home... there often isn’t enough room to find the right distance to undertake the test... and we have time constraints... it isn’t something we can quickly rush through.”

Recognising these challenges, the South Yorkshire Fire and Rescue Service have built in eye health questions into their safety checklist undertaken with clients. Having a prompt on the checklist is a good reminder to ask about sight problems.

“We do have a questionnaire that we fill in when we go out to fire safety check and there was a prompt on there about having an undiagnosed eye problem. So you get that prompt to ask the question [about eye health].”

Fire safety officers seem happier asking about eye health or sight loss than using the Eyes Right Toolkit – all members of our focus group agreed that asking questions about sight problems was appropriate during home fire safety checks. Participants felt their clients have little awareness of the services available locally, so asking about eye problems opens up a conversation about local services. For those clients who feel they would benefit, participants were happy to refer them onto the appropriate service.

“It is good for us to ask the question about eyesight because a lot of the people we go in and see are vulnerable, elderly and in a lot of cases they don’t get out or see anybody... It is good for us to ask that question...”

As part of the Optimeyes project, South Yorkshire FRS regularly refer to the Sheffield Royal Society for the Blind. Members of the focus group felt they had a good relationship with them:

“A lot of vulnerable people are not aware of what is out there... that’s why this partnership approach is so important... we can give information about what services are available and have clear referral pathways we can use to support people. If we can’t help someone ourselves we always have people who can help... be that lifeline.”

One fire officer gave an example:

“We went out to a lady who was in a right state... housebound, never went out, suffering from depression and as it turned out it was all linked to her eyesight... she couldn’t see enough to go out. She was also being abused by neighbours (financially). So we put a referral through via Optimeyes and it turned out that she had cataracts in both eyes. She has had the operation and she can see fine... it’s turned her life around. She’s going out, she has people coming in and helping her, completely different woman.”

2.5. Developing new activities and support for people with sight loss

Optimeyes enabled project partners to enhance their range of services and trial new activities. Having a dedicated worker enabled societies to provide more tailored one-to-one support, undertake more outreach work and involve more customers in shaping new activities.

Opportunities for people with sight loss to get involved in sports or physical activity has been a key theme. For example, South Lincolnshire Blind Society has developed a programme of acoustic shooting and swimming sessions. Pilates and boccia are being delivered by York Blind and Partially Sighted Society, and Selby District Vision has created Boccia and Curling sessions. Keep-fit and aerobics classes are now regularly provided by Sight Support Ryedale and Hull and East Riding have an active walking group. Other activities include crafts and gardening. These are all described by project partners as successful and well attended.

All of these activities provide a means for peer support and alongside the social opportunities they offer, the groups enable people to share information and tips for daily living:

“The coffee mornings are really enjoyable and also helpful for exchanging information. For example, I’ve had a problem for 15 years and didn’t realise I might be eligible for benefits until I got talking to other people in the group.” (beneficiary, focus group)

The capacity created by Optimeyes also enabled societies to provide more intensive support to individuals. For example, Selby District Vision’s collaboration with external partners such as the Social Prescribing Service has

revealed new people with often complex needs who require more individualised support. Building on their existing outreach and home visiting model they have been able to visit more people in their homes. Having one-to-one time with clients enabled the society to build up a better understanding of the person’s needs and tailor the support accordingly.

“Optimeyes has allowed us to get to the heart of people’s problems...we now have the capacity and time to go out to people... listen to their needs and tailor the support accordingly.” (project worker)

Optimeyes enabled the Hull and East Riding society to reach out from their well-established Hull base into more rural parts of the East Riding. The project worker gave an example of a woman in a rural area for whom she provided one to one support on the use of IT. As a result the beneficiary bought herself an iPad and can now keep in touch with her friends and family. The worker commented that “we couldn’t have done this without Optimeyes”.

Similarly, in Ryedale and South Lincolnshire, outreach has been made possible in the more rural areas, whilst in York the society has extended its reach into communities identified as having higher levels of disadvantage and is offering a more personalised approach:

“We used to send out an information pack to all new registrations. We have developed a much more personalised approach now... we contact people and invite them to visit the society and attend an information session. This tailored individual approach has been really successful in bringing people into the society and developing a new member base.” (project worker)



2.6. Training/confidence building courses

Partners have offered a range of additional information and training for people with sight loss. Confidence building courses include the Finding Your Feet and the Living with Sight Loss courses, providing comprehensive information covering benefits, resources, social and emotional support. Other courses included IT and assistive technology, healthy eating and personal interest topics such as family history and creative writing.

Beneficiary feedback was received from 164 people who completed post course feedback forms. Of these:

- 97 per cent rated their course either excellent (61 per cent) or good (36 per cent)
- 90 per cent agreed or agreed strongly that the course had given them a better understanding of the support available to them
- 80 per cent agreed or agreed strongly that they had made new social contacts through the course
- 86 per cent agreed or agreed strongly that they felt more confident about managing their sight condition after the course.

Respondent feedback in focus groups highlighted the value of these courses:

“Doing that course was the most useful thing. I learned so much from other people. The course made you realise what would be helpful to you. For example, I’ve always resisted using a white stick but we talked about the use of the short white stick which makes other people aware and gives you more confidence when you’re out and about.” (beneficiary, focus group)

“When they asked me to come on the course I thought that’s not for me but I’m eternally grateful I did. I’d put myself into a box and got myself very isolated. I now have friends – we meet for coffee and talk on the phone every week. I’m learning to use a computer again and come here twice a week (beneficiary, focus group)

Training and support to help people make more use of IT was also provided by all the project partners. This was generally a combination of small group training and one to one support, and was highly valued by beneficiaries:

“I wanted to use a computer but my son said ‘Mother, you haven’t a clue’ and he was right! Without the support of [Optimeyes worker] I couldn’t have done it. You can’t do it on your own. I’ve got an iPad and I’ve a tendency to enlarge so much you can’t recognise what’s on the screen! I’m now feeling more comfortable and confident. I have a really good friend in Australia and I gave her quite a shock when I contacted her using my iPad. .. And now my husband has Alzheimer’s so I think I’ll start to use it for shopping.” (beneficiary, focus group)

“The members of the group all helped me set up my tablet. I went on a course in York and got lost because I couldn’t see the street names. I now have an app with maps on it and it’s brilliant. It’s made such a difference to my confidence.” (beneficiary, focus group)

“I’m quite good with technology but have still been surprised what apps you can get including things for free – like a magnifier. It can make a huge difference to people. But you don’t find out about these things unless you come here. It can open up a whole world to people.” (beneficiary, focus group)

2.7. Volunteering and peer-led activities

New Optimeyes activities had their origins in what beneficiaries wanted. The project encouraged partner organisations to maintain their focus on engagement:

**“We’re offering people new projects that people want, not forcing people into the shape of things we offer.”
(project partner)**

The involvement of blind and partially sighted people in the design of new services was seen by partners as crucial to their success in ensuring that services were what people wanted and broadening the range of activities available. Whilst societies have involved people in the past, for many, Optimeyes has moved this engagement onto a new level and project workers have been delighted at its success:

**“The Optimeyes project has changed the ethos around how we design activities and services for people with sight loss. We have set up a steering group which provides us with the views of blind and partially sighted people – they bring fresh ideas about the types of activities/services we should be providing and help us to sense check our own thinking.”
(project worker)**

Central to this ethos is the active involvement of people with sight loss in organising and running groups. The gardening group in Selby benefits from a beneficiary who was a professional horticulturist in his career; in Hull and the East Riding the walking group is led by someone who has been a walker all her life.

“I’m a keen walker and I want to keep going so the walking group is great. We’ve been out all over Hull and into the Wolds. We have a walk, the guide dogs have a run and we go for a meal. It’s lovely to be out and peoples’ reactions have been great when they’ve seen us out and about.”(beneficiary, focus group)

The Optimeyes project helped grow local societies’ volunteer bases and strengthen their culture of volunteer engagement. Optimeyes opened up new opportunities for volunteers and created new volunteer roles. It provided the societies with the extra capacity to make more of the potential of volunteers. For example, York Blind and Partially Sighted Society undertook a volunteer skills audit to match skills with volunteer opportunities. Selby District Vision worked with their local volunteer service to enhance their recruitment and training of new volunteers:

“Volunteers have been engaged in all parts of the project... we have recruited 10 new volunteers... We have trained volunteers to help with the Eyes Right Toolkit... this has been really successful.” (project worker)

“Volunteers are underpinning lots of what we do... the sessions wouldn’t be as successful, fun and well attended if it wasn’t for people giving us their time.” (project worker)

Volunteers with sight loss have been involved in almost all the activities initiated by Optimeyes, with some taking on substantial tasks. There are numerous examples such as overhauling the resource centre for the Selby society, leading or supporting the York boccia group, helping Hull and the East Riding to start a new IT group in Goole, blind and partially sighted people providing telephone befriending to other people

with sight loss. Some volunteers undertake administration tasks, and others give talks to raise awareness of the public and professionals.

Peer Facilitation training has built confidence and skills of visually impaired volunteers enabling many to increase the level of their involvement:

“Some volunteers have gone on to run their own activities...One person after the peer facilitation course... is exploring setting up her own meditation group.” (project worker)

Following a peer facilitation course, two beneficiaries started peer learning digital technology sessions. This was supported initially by RNIB's Online Today project, which provided a digital skills officer to deliver some of the sessions. However, this support has reduced over time as the group's confidence has grown:

“One of the digital skills officers visits the group several times a year, to keep them updated and is on hand to answer any complex issues. But between these ...the group is peer led...the sessions are well attended and are being asked for more and more.” (project worker)

The Peer Facilitation course has also enabled beneficiaries to provide peer support in other ways, such as undertaking telephone buddy roles and providing outreach, visiting people in their homes or supporting the delivery of activities:

“Several of our members have attended the Peer Facilitation courses and moved on to deliver peer support activities... telephone buddies, home visiting to prevent isolation, IT group...several groups are moving towards the peer support model.” (project worker)

2.8. Campaigning activities

Some visually impaired volunteers have been involved in awareness raising sessions and providing information to a range of other agencies and, as noted in 2.2, it was often hearing the experiences of people with sight loss that had the greatest impact in making organisations think about and improve their practice:

“We have worked with Leisure centres and theatres helping them to understand the needs of blind and partially sighted people and bend their offer to meet the needs of people with sight loss. Linking groups with the theatre means better access to leisure activities in the future.” (project worker)

Campaigning in York and across Ryedale focused on accessible health information and involved local societies helping people to engage with their local GP practices, raising their awareness of sight loss and the need for accessible information. Members of the Ryedale focus group described writing to their local GPs, and were pleased to receive some positive responses. Campaigning in South Lincolnshire worked with blind and partially sighted people to advance their built environment campaign, working with the local authority to understand the needs of people with sight loss and the importance of transport, provision of bus stops and safe crossings. The issue of advertising boards and other pavement obstacles was taken up by groups across the project.



3. Outcomes for visually impaired people

Optimeyes aimed to support older people with sight loss to achieve the following outcomes:

- better understanding to manage eye health and sight loss
- more confidence and skills for independent living
- reduced social isolation.

Three sources of data have been drawn on to provide an assessment of these:

Baseline and follow up questionnaires completed by 51 beneficiaries:

Respondents were drawn from five of the six partner societies. All completed both a baseline and a follow-up form enabling us to match the data for analysis in order to accurately assess change in people's responses between their early and later involvement with Optimeyes. Sixty-three per cent (32) of respondents were women and 37 per cent (19) men. They had a range of eye conditions and types of sight loss. Around half had been diagnosed with sight loss for more than two years with the other half more recently diagnosed. Twenty-two per cent had been diagnosed in the previous six months.

Interviews and focus groups: focus groups were held between November 2016 and March 2017 and covered all six areas. Varying numbers attended sessions but in total over 50 beneficiaries participated.

Case studies provided by project partners.

3.1. Better understanding to manage eye health and sight loss

The baseline and follow up survey asked people to respond to a series of statements. Table 1 shows the numbers and percentages of those agreeing/strongly agreeing with each statement and the change between baseline and follow up responses.

Table 1 suggests improvements for beneficiaries between baseline and follow up surveys in all domains but one. There are particularly marked improvements in people feeling well informed about their sight loss, having enough people to talk to about their sight loss and confidence in managing sight loss. This suggests that Optimeyes has been most successful in the area in which they can be expected to have the most impact – managing sight loss.

This conclusion is supported by responses to questions on the follow-up questionnaire which asked people to rate how helpful Optimeyes had been in the core individual outcome areas.

Table 1: Responses to baseline and follow up survey (n=51)

Statement	Number and % agreeing at baseline	Number and % agreeing at follow up	Change between baseline and follow up
I feel well informed about my eye condition	37 (74%)	43 (84%)	+ 6 (10%)
I have the information I need to keep my eyes as healthy as possible	36 (72%)	44 (88%)	+ 8 (16%)
I feel well informed about the services available to help me manage my sight loss	31 (62%)	45 (90%)	+ 14 (28%)
I am confident about managing my sight loss	27 (53%)	37 (73%)	+ 10 (20%)
I am confident about dealing with my daily life	36 (71%)	39 (77%)	+ 3 (6%)
I feel confident about going out on my own	11 (24%)	22 (44%)	+ 11 (20%)
I worry about going to new places	31 (63%)	(57%)	- 3 (6%)
I am anxious about meeting new people	12 (24%)	13 (26%)	+ 1 (2%)
I have plenty of support from family and/or friends	37 (72%)	40 (78%)	+ 3 (6%)
I often feel isolated	21 (41%)	14 (28%)	- 7 (13%)
I have enough people to talk to about my sight loss	25 (46%)	40 (80%)	+ 15 (34%)

As table 2 shows, 82 per cent of respondents rated Optimeyes as being very or quite helpful in increasing their understanding of their eye condition and 96 per cent in improving their knowledge of what support services exist to help manage sight loss.

**Table 2: Responses to follow up survey (n=51):
How helpful has your involvement in Optimeyes been in**

Increasing your understanding of your eye condition and eye health		
Very helpful	20	39%
Quite helpful	22	43%
Neither helpful nor unhelpful	6	12%
Not very helpful	2	4%
Not at all helpful	1	
Improving your knowledge of what support services exist to help you manage sight loss		
Very helpful	29	57%
Quite helpful	20	39%
Neither helpful nor unhelpful	0	
Not very helpful	2	4%
Not at all helpful	0	
Increasing your confidence to cope with sight loss		
Very helpful	19	37%
Quite helpful	20	39%
Neither helpful nor unhelpful	10	20%
Not very helpful	2	4%
Not at all helpful	0	
Increasing your social contacts and support		
Very helpful	23	45%
Quite helpful	19	37%
Neither helpful nor unhelpful	6	12%
Not very helpful	3	6%
Not at all helpful	0	

During focus group discussions people gave lots of examples of Optimeyes helping them manage their sight loss. They frequently described the difficulties they had experienced in coming to terms with a visual impairment and a lack of support after diagnosis. For example, one participant explained that it took her several months after losing her sight to accept her situation. Attending a Finding Your Feet course made a big difference:

“The thing is you don’t want to accept it at first. At first you’re in denial – you think you’re going to go to hospital, get your injection and you’ll be OK. Gradually you realise that’s not the case – and that’s when a course like this is so marvellous. You don’t want to go to somewhere that’s for blind people. It took me about six months to accept that it would be a good idea. Once I did come here it was so useful – they told me about all sorts of things to help. And the main thing is that when you walk in here you don’t feel odd. When you come in everyone knows your name and it’s lovely – it’s a lovely atmosphere.” (beneficiary, focus group)

The same participant’s husband also came to the course and she described how valuable it was for him to gain a better understanding of her sight loss:

“They got him to wear those glasses which make you see what it’s like to have different eye conditions. Afterwards he said to me I understand now what it’s like for you. Ten minutes of wearing those specs is worth three days of talking.” (beneficiary, focus group)

Giving people time – an example from Sight Support Ryedale

When Sight Support Ryedale (SSR) first contacted Sylvia, she was feeling very low as she had been struggling to cope with sight loss and other health problems at work and had given up a job she loved. When SSR visited her Sylvia says “I think I’d been in denial about my sight. I’d started to feel empty. Nobody from work had been in touch and I was feeling lost.” SSR encouraged Sylvia to start coming to some groups and supported her to attend by taking the time to build a relationship with her and providing her with a lift. Gradually Sylvia has built up her activities so that she got involved in aerobics and the technology group. She also attended a Living with Sight Loss course. All in all, Sylvia now says that her life has changed to the extent that she’s now out more than when she was working. “As well as all the practical things I’m learning, there’s lots of laughing and I’ve made new friends. I had lost a lot of confidence and it’s starting to come back.”

3.2. More confidence and skills for independent living

Seventy-six per cent of respondents in the follow up survey agreed that Optimeyes had helped increase their confidence to cope with sight loss. Compared to baseline, the follow up surveys suggest slight increases in confidence about dealing with daily life and a substantial increase in confidence about going out alone. Around a quarter of respondents said they felt anxious about meeting new people and this didn't change at follow up, perhaps suggesting that if people have social anxiety it is not something that is easily changed.

The focus groups provided numerous examples of people learning practical ways to maintain their independence, from developing their IT skills to finding out about useful aids and tips for daily life:

“Knowing I can get in touch easily makes me feel more secure and I will be able to find a gadget for any problem.” (beneficiary, focus group)

Whilst some of this information came from formal courses and workers, an equally important source of support came from other people:

“I found out lots from other people round the table – e.g. the talking newspaper. At first I didn't think I needed it – I used to be a big reader but now can't so it's been a lifesaver.” (beneficiary, focus group)

“I did use a computer a bit before but coming to the group meant I learned a lot more about how it can be used. Got chatting and picked up things from each other. Not just a classroom situation, it's social as well – that's what's so nice about it.” (beneficiary, focus group)

For several people being involved with Optimeyes encouraged them to be more open about their sight loss:

“I started using my symbol cane because of the Living with Sight Loss course. I used to keep it in my handbag but never got it out. I didn't want to use it because of vanity and embarrassment – I didn't want people to know I had sight loss. Someone on the course pointed out that people won't know you've got sight loss – they can see you so they think you can see them. So now I use it and it really makes a difference. When I carry the stick people do take notice and mostly they're really helpful.” (beneficiary, focus group)



Case study: “I only came in for some sunglasses”

Eighteen months ago Brian went into Selby District Vision (SDV) with his wife to pick up some sunshields for his glasses. He'd been losing his sight for some time and had also lost his confidence. He was a professional horticulturist and remained a keen gardener but was struggling to keep up his allotment due to his sight loss. SDV's first idea was to start a group to help him to run his allotment, but it soon became clear that this wouldn't work because of safety concerns. So, instead, they approached the local authority who owns the land next to SDV to ask them if they could create a garden. A gardening group was formed with Brian as a lead member. Members negotiated the use of the land, raised funds and donations for

equipment and worked with a local contractor to do the hard labour to get the garden established.

Today the SDV garden is a huge success and has won a Community Pride award. Brian had no hesitation in attending the event and giving the acceptance speech – something he wouldn't have dreamed of doing a year ago. Brian describes his involvement with the SDV garden as the best thing he's ever done.

“I have such a laugh with other people. My confidence is definitely improving. I've never had other people to talk to about dealing with sight loss... Optimeyes has made me so much less isolated.”

3.3. Reduced social isolation

Eighty-two per cent of respondents to the follow up survey agreed that Optimeyes had increased their social contacts and support. Compared to baseline, fewer respondents in the follow up survey said they felt isolated and there was a substantial increase in the number of people who felt they had enough people to talk to about their sight loss.

Focus group participants also gave many examples of how getting involved in Optimeyes had reduced their isolation. Many participants had given up work because of their sight loss and had lost social contacts as a result. Others had given up lifelong hobbies and interests. As one person explained:

“Sight loss does affect your social life. Sometimes you have to force yourself to do things or you could become really isolated. I find it hard to see at night and what people think

of as mood lighting in restaurants and places is pitch black to me and I struggle to use steps. I used to go to social events with people I worked with but I've stopped because it's too hard work.” (beneficiary, focus group)

Optimeyes provided a lifeline for many people by enabling them to reclaim their interests and skills and develop new ones through participating in activities and undertaking volunteering roles. Several people commented on how isolated they would be without the groups and other activities:

“I was stuck in the house. I had never met anybody like myself before... Can be daunting to come to begin with but you go home feeling loads better.

I have a phone befriender and it's really great – I look forward to the phone call. Feel I've known them all my life. I'm very isolated in my village.”

Case study: I'm a better darts player now than when I could see!

When Peter first got involved with Sheffield Society for Blind and Partially Sighted he'd suffered a lot of loss – not only had his sight deteriorated quite rapidly, but he'd also lost his wife. His main lifeline was socialising in the pub where he played darts – but his sight loss meant he could no longer play. Describing himself as a self-sufficient man, Peter did not want people to know or to ask for help, so he stopped going out. He found out about the Living with Sight Loss course via Sheffield's newsletter. He told us:

“When I was first diagnosed I thought well that's it. But I got registered and received a magazine about the course and thought I might as well give it a try. It covered pretty much everything. It enabled me to compile a list of useful contacts and turned out to be really good for meeting people. On the last day, they brought these glasses round that are meant to help you watch TV. I put them on and thought, wow, I reckon I could see a dart board with this. I got myself a pair the next day and now I can play darts again. In fact, I reckon I'm better than I was before!”



4. Lessons for the future

The experience of developing and delivering Optimeyes has generated some useful learning for projects in the future, both from the things that have worked well and from the things that proved to be more challenging. In this section we summarise some of these lessons.

Peer-led and peer-developed initiatives really work

The biggest message from the Optimeyes experience is that visually impaired people want to be involved in developing and leading social and campaigning activities – and their involvement makes them more effective. A recurring theme in this evaluation is that participation makes projects more relevant and accessible and that people benefit from the opportunity to develop things for themselves.

“It has been really fantastic... we know we are delivering what people want to attend... what they need, because they have asked us for it, helped us plan it... it’s why all of the sessions are full.”
(project worker)

The need for development time at the start

Setting up any new project takes time and the partners were at different starting places when the funding was awarded. On reflection, some staff felt that the project would have benefitted from an initial set-up stage for establishing the project and allow for the time it takes to build the profile and networks required for a project to take off:

“[key learning] I think for us it’s been the time it has taken to develop our external partnerships. At times the project worker has felt really despondent... feeling that nothing is changing... no new beneficiaries coming in as a result of all of her hard work... now we are starting to see referrals coming in... I think it just takes time for [external] partners to understand the relevance of what we do, where we are, and what we can offer to enhance their offer... I think those messages are now getting through and we see many more partners coming to us for support.”
(project worker)

“The first year was very slow... I remember saying to the project worker this project is going to be a bit of a slow burner... it’s really taken off in year two – it’s a shame it’s coming to the end.” (project worker)

The need to keep challenging assumptions

One of the reasons the project felt slow to start in some areas was due to a lack of understanding of the needs of people with sight loss. Some workers encountered a reluctance to acknowledge that people's needs were not being met or assumptions about the support they needed.

“We were very aware of the issues people with sight loss were facing. We were struggling with isolation and engaging people living in rural areas. It was really frustrating that people (other professionals we worked with) did not recognise the needs of people living in rural areas and believed they had it covered. Even people within our local society were saying we have reached or contacted everyone with sight loss living in our area. Through the project we have shown that there are people who have sight loss that are not engaged, who are not aware of how to care for their eye health or understand what services are available.” (project worker)

Overcoming practical barriers to access

However good the support provided by a project, its impact will be limited if people cannot access it. People with sight loss still face major barriers due to a lack of accessible transport and safe walking environments. This is particularly the case for people living in rural areas. Optimeyes has enabled societies to reduce this barrier by providing taxis and paying for volunteer drivers and community transport. However, it is a significant expense which may be difficult to sustain without ongoing funding.

“Lots of clients want to come to our activities and being able to provide transport has been great... we can pay for taxis, community transport and expenses for volunteer drivers. Selby is a huge area district and not having that transport budget is going to be a bit of a challenge, because local public transport isn't enough to be able to bring our clients to us. We have had a big push for volunteer drivers, and doubled the number of these. We are still concerned though about what we will do about this.” (project worker).

The value of trialling and testing new activities

One lesson from Optimeyes has been the importance of trialling and testing new activities before committing to a full programme of sessions. Testing delivery helped partners judge the likely take-up of the activity before they spent time and money developing the provision further:

“[key learning] has been not to rush into delivering services straight away... provide taster/launch activities so that people can try a session... test whether people like it or not (have an interest in participating regularly)... then we can commit to delivery of the session.” (project worker)

In York, the practice of offering 'taster sessions' is being built in to the development of their activities programmes so that participants can build the confidence to move into mainstream activities:

"The Optimeyes project has allowed us to experiment more with different ways of delivering activities. We have successfully moved to a model of shorter term/self-sustaining activities. We set up the taster session (maybe six sessions) and then once beneficiaries have participated in these they can be supported to move into mainstream provision. Pilates in York is a really good example of this."
(project worker')

The need for dedicated staff time and resources

Possibly the greatest benefit of Optimeyes funding was enabling local societies to employ a dedicated worker to focus on developing new activities. The work involved is significant, including making contacts with external partners, producing promotional materials, engaging with beneficiaries, establishing the relevant processes and procedures and, when necessary, facilitating and delivering the activity. Alongside the staffing, it is important for there to be some additional resources to fund new activities. This was felt to be a bit of a shortfall in the Optimeyes project:

"I feel we have done what we could in the time and within the financial constraints. We didn't get any extra funding for activities, we have had to develop the activities with in-kind contributions and external funding... especially for the set-up of activities, materials and equipment."
(project worker)

The value and challenges of external partnerships

One way in which partners overcame the funding shortfall was to work closely with external partners to deliver activities. For example engaging with Pilates and Fitness instructors or the local authority and leisure facilities to help set up boccia and swimming sessions. Partners also received sponsorship or received external grants for equipment in some cases. Some activities would have been extremely difficult to establish without this support:

"Target shooting club – has now achieved disability hub status and now have our own adapted equipment and sponsorship – this is also going to continue and form part of the legacy of Optimeyes." (project worker)

Not all partnerships got established as was hoped and one lesson from Optimeyes is that what works well in one area does not necessarily work in another. Sheffield's partnership with South Yorkshire Fire and Rescue developed well, while in North Yorkshire there was a frustrating lack of referrals, due in part to restructuring and staff changes:

"We were really disappointed with the outcomes of our engagement with North Yorkshire Fire service... we really thought that would be a great way to reach and support people... it's proven to work in other areas and... just really disappointing that nothing came of it... we have tried repeatedly."
(project partner)

Time taken to establish monitoring and data collection systems

Collecting the data for this evaluation and for management information generally has not been straightforward and has at times been difficult and time-consuming. A longer lead-in time would have helped to develop some more streamlined systems and allow for some training and support to reduce duplication. On the other hand, project partners have been able to use the data collected to demonstrate their work to other agencies and support funding bids.

“We see the benefit of monitoring and evidencing what we do, especially how we can use the data to attract external funding. In York we are going to expand the framework to cover the whole organisation. It won’t stay in its current form but we are looking how to develop our own.” (project worker)

“We are keeping all of the monitoring processes we have established... we have decided that we need to move premises and we want to use these systems as a way of monitoring our reach pre and post move.” (project partner)

5. The Optimeyes legacy

As noted at the start of this report, the six partner organisations involved in Optimeyes were different in their location, scope and size. The smaller organisations have been radically affected by their involvement in Optimeyes. For them, the Optimeyes funding has been transformational, enabling them to start new things and think about how to attract other funding to be sustainable in the future. But even for the larger organisations the project enabled them to develop new services and reach out into areas and populations they would not have done before.

“We have achieved far more than we ever expected to... we have increased our reach, expanded our range of services and activities, we have increased the number of volunteers and collaborate more with local partners. The project has been a spring board for us and almost all of this is sustainable so will continue beyond Optimeyes.” (project worker)

“Optimeyes has been phenomenal – allowed us to do new things. Made us look at who is using our services and how we can get others in. Made us engage with new people. Shown us what we’re capable of and put ourselves on the local map. People would now notice if we weren’t here.” (project worker)

Each of the partners is committed to sustaining as much of the work as possible and have a range of plans for the future. For example: Selby District Vision has obtained funding to take the eye health message into 10 local schools and to pilot a wellbeing and life-coaching course; Sight Support Ryedale is re-locating into the community library where they will be much better placed to be accessible to people with sight loss; York are continuing to develop their volunteers to sustain their activities; Hull and East Riding intend to maintain the work they’ve developed in East Yorkshire and plan to reach more black and minority ethnic groups in their area; Sheffield have been approached to replicate their service in Rotherham.

Some things will be difficult to sustain without the dedicated staff time and the loss of Optimeyes funding is already being felt in some areas, for example the loss of a transport budget. However, there is little doubt that the Optimeyes legacy will live on, particularly in the changes it has made to partners’ approaches to peer engagement. The involvement of people with sight loss at the heart of new developments has become more embedded and is now seen as the way forward. Optimeyes acted as a catalyst for new ways of working. As one project worker put it:

“Optimeyes gave us permission to dream and to make those dreams a reality.”



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