A Guide to working with People with a Visual Impairment
Best Practice Guide
About BID Services

This best practice guide has been developed by the charity, BID Services. We work in partnership with children, young people and adults and their families and carers. We support people who are deaf, hard of hearing, visually impaired or have a dual sensory loss.

Our Mission

“We’re here to make a positive difference to the people we support by offering a range of innovative services that empower people to control their own lives.”

For more information about BID Services, please visit our website at www.bid.org.uk
Introduction

This guide seeks to provide practical information and advice to professionals, volunteers, family members, carers and any other persons who may be involved with providing services or support to a person with a visual impairment.

The guide has been prepared in consultation with people with visual impairments and seeks to raise awareness of the issues they face on a daily basis.

For the purpose of this guide and ease of reading, the term ‘Visual Impairment’ describes any degree of vision loss, where a person’s eyesight cannot be corrected to a ‘normal level’ including total loss of vision that affects an individual’s ability to perform the tasks of daily life.
What is Visual Impairment?

Visual impairment is any degree of vision loss, where a person’s eyesight cannot be corrected to a ‘normal level’, including total loss of vision that affects an individual’s ability to perform the tasks of daily life. Some of the causes of visual impairment (although the following list only covers some of the most common eye conditions and is not exhaustive) are:

- **Age related macular degeneration** - deterioration of the central part of the retina
- **Glaucoma** - damage to the nerve connecting the eye to the brain caused by increased pressure inside the eye
- **Eye injuries**
- **Diabetes** - has similar effects to macular degeneration i.e. loss of central vision
- **Cataracts** - a clouding of the lens of the eye
- **Strokes** - can cause loss of lower or upper field of vision or loss of vision in the half of both eyes or half of one eye. A stroke can also cause total loss of vision in both eyes.
What is Deafblindness?

A person is regarded as deafblind if their combined sight and hearing loss causes a significant impact on one or more of the following:

- Communication
- Access to information
- Mobility

What are the causes of Deafblindness?

Usher Syndrome

**Type 1:** A person is usually born severely to profoundly deaf with severe balance problems. They develop Retinitis Pigmentosa (RP) at an early age. Night blindness can be a significant orientation/mobility factor.

**Type 2:** A person is born with moderate to severe hearing loss, but has normal balance.
Sight loss in type 2 Usher syndrome tends to progress more slowly than those in type 1, with the onset of Retinitis Pigmentosa often not apparent until the teens.

**Type 3:** A person is born with normal hearing. Although most children with the disorder have normal to near-normal balance, some may develop balance problems later on. Hearing and sight worsen over time, but the rate at which they decline can vary from person to person, even within the same family. A person with type 3 Usher syndrome may develop hearing loss by the teens, and he or she will usually require hearing aids by mid to late adulthood. Night blindness usually begins sometime during puberty. Blind spots appear by late teens to early adulthood and, by mid-adulthood, the individual is legally blind.

**Rubella Syndrome**

This is more commonly known as German Measles. Effects include:
Hearing loss in one or both ears and cataracts in one or both eyes. Sight may also deteriorate with age.

**Neurofibromatosis NF2**

This condition can cause tumours to grow on nerve endings to the ear causing deafness and on the optic nerve causing blindness.

**Meningitis**

Hearing loss is the most common complication of meningitis although it is not always total or permanent. The hearing loss can be caused by the meningitis itself or the powerful drugs used to treat the bacterial infection. Damage to the optic nerve may result in partial loss of vision or blindness in one or both eyes. The damage occurs when the nerve swells, but symptoms can improve over time. Sight loss can also be an after effect of septicaemia.
Approximately 1,564,340 people in the UK are living with sight loss (RNIB 2014).

Approximately 4% of UK registered people who are severely sight impaired can see nothing at all.

Around 2.5% (5,000) of people who are sight impaired or severely sight impaired have a guide dog.

One in every nine people aged over 60 are currently living with sight loss.

77% of people with a visual impairment who are of working age are unemployed.

In England, there are 143,385 people who are registered as severely sight impaired and 147,715 people are registered as sight impaired (RNIB 2014).
How Sight Loss is Registered

A series of tests are carried out by the ophthalmologist at the eye hospital and if the ophthalmologist feels that the person is now at a level where they have significant sight loss, then the ophthalmologist will sign a Certificate of Visual Impairment (CVI) to certify that the person is sight impaired (partially sighted) or severely sight impaired (blind).

A copy of the certificate is then sent to the person’s GP, Social Services and to the person themselves. The person is then asked if they would like to be registered or not. If the person has agreed to be registered, they will then receive a registration card and be offered an assessment (this should be done within two weeks of receipt of the CVI) by a professionally trained person who deals with visual impairment.
Registration is important for a number of reasons:

Firstly, it is a way in which the Local Authority keeps records, collates and monitors the number of people who are visually impaired or have a dual sensory loss in order to plan services and secure funding.

Secondly, it provides evidence when a person is accessing Social Services.

A registration card which is the size of a credit card provides the person with proof of their disability that can be shown in a library to get free talking books or at the bank for instance.
The needs and impacts may be practical, physical, emotional and social and may be different for people who have congenital sight loss compared to someone with acquired sight loss.

**Practical**
One of the impacts a visual impairment may have on a person is their ability to carry out daily living tasks. For instance, cleaning, cooking, washing up, dressing or choosing clothes may become more difficult.

**Physical**
The physical impact of a visual impairment will depend on the eye condition and the effects this has on the person’s vision. For instance, a person with Retinitis Pigmentosa may have extensive loss of their peripheral field of vision, light sensitivity and night
blindness. This means that the person will not be able to see kerbs easily and night blindness affects the person’s ability to travel independently in the evening or at night time.

Financial
A person with a visual impairment might be the bread winner in the family and having to stop work or the inability to continue work will have a major financial impact on the person and their family.

Emotional
Another possible impact on a person who has a visual impairment is the effect it can have on them emotionally. Loss of vision has been likened to the grieving process and as such, the person may experience a range of similar emotions such as anger, denial, hopelessness, fear, depression and guilt. The way sight loss impacts an individual will of course vary and some people will remain positive and still thrive.
A person may feel vulnerable and an example of this is illustrated in the following case study:

Dennis is a new guide dog user and since owning his guide dog has encountered additional challenges.

On one occasion, a taxi company tried to charge an additional fare for the guide dog which is double the normal fare.

Another incident occurred when a taxi driver refused to take the guide dog in their taxi.

The above real life experience, although not an everyday occurrence, left Dennis feeling excluded and isolated.
Social
A person who experiences visual impairment may find that their social activities are affected. For example, a person who used to enjoy swimming or going to the gym may find it more difficult to continue such activities, or they may find that friends no longer stay in touch, as they do not know how to act or what to say.

The impact of losing your sight can be devastating, but regaining independence and improving wellbeing is possible, with the right support, as illustrated in the following case study.

I lost most of my sight 12 months ago at the same time as being diagnosed with multiple sclerosis. My world changed overnight, I could not go to work, my driving licence was revoked and I felt very lonely as I was always dashing around doing all the things I loved and this had been taken away.
I decided to ring around different organisations that perhaps could assist me. I managed to get into touch with the local Milton Keynes sensory service and was visited by a Rehabilitation Officer who carried out a full assessment of my needs.

I was given invaluable information on getting around, how to use a white cane, safety in the kitchen. On her next visit, we talked about how I could meet other people and she told me she was hoping to set up a support group for people with a visual impairment where we discuss various topics, such as how people manage at home or work, what gadgets etc are useful. We also had speakers who talked about employment rights and the type of support that is available.

I found all of this very useful and it really helped me to come to terms with my condition.
Modes of Communication

The most important rule is to ask a person who is visually impaired what their preferred mode of communication is and let them know what format you can provide information in. Some people may prefer email communication as the person may use text to speech software or the person may use magnification.

A font size of 14 is the minimum recommended size and a type such as Arial is recommended because the letter shape is clearer and easier to read for a person who is visually impaired. The colour of print should preferably be in black and white matt finish paper (yellow paper also gives a good contrast).

When communicating by telephone, voices are sometimes distorted, so it is important to use clear steady speech and if you are giving the person who is visually impaired information that they need to write down,
allow them extra time to do this.

By July 2016, the NHS Accessible Information Standard (1605) comes into force. The standard means that everyone should receive information in a format that they can read.
Tips for working with someone who has a visual impairment

Always introduce yourself by telling the person with a visual impairment your name (don’t assume that the person will recognise your voice if the person has no sight or difficulty recognising faces).

If a person with a visual impairment is accompanied by a carer or family member and you need to speak to that person, remember to speak directly to the person and NOT to their carer or family member unless there is some kind of communication barrier such as a language barrier or the person does not have mental capacity (this needs to be confirmed and not assumed).

Don’t speak too loudly or slowly to a person who has a visual impairment.

Don’t make assumptions about what a
person can or can’t see - just ask the person who has the visual impairment - this may also make the person feel that you are trying to have an understanding of their situation.

Always tell a person with a visual impairment when you are leaving a room (even if it’s just to go to the toilet) because the person may not realise that you have left the room and may end up chatting to themselves.

In meetings, always ask everyone in the room to introduce themselves because someone with a visual impairment may not be able to see everyone in the room.

It is good practice during meetings to say your name if you are speaking (as courtesy to someone who has a visual impairment) i.e “Fred speaking. I have to say that I agree with what Wilma said....”, for example.

Never touch (and NEVER push or pull under any circumstances) a person who has a visual impairment without asking them first if it
is okay. The only exception to this rule is if the person does not realise that you are speaking to them and, in this case only, it is advisable to touch the person gently on the back of their hand in order to gain the person’s attention.

Be mindful of the language you use - find out how the person who is visually impaired describes their disability i.e. the person may prefer to be described as ‘blind’ rather than ‘severely sight impaired’. The new terminology is ‘sight impaired’ or ‘severely sight impaired’ as opposed to partially sighted or blind.

Be careful not to move items in the home or work environment without informing the person who is visually impaired first.

Use a calm tone of voice and speak clearly.
Sighted Guide

There may be occasions when a person who is visually impaired may need someone to act as a ‘sighted guide’. Here are some sighted guiding tips:

The person being guided holds your arm lightly just above the elbow with their index finger and thumb - as if ‘cupping a glass’.

If there is space when travelling outdoors or indoors you should walk side by side.

Give instructions where necessary, but don’t overdo it and be careful not to push or pull the person you are guiding.

Match your pace to the person you are guiding.

Remember to give adequate room around obstacles.

Watch out for hazards at head height,
especially if the person you are guiding is taller than you. Remember to let the person know when there are overhanging branches or other head height obstacles. Watch out for lamp posts and bollards too.

Explain loud noises that may startle a person, such as building works or alarms.

Explain changes in ground surface, for example if you are walking from a pavement onto grass or gravel, or if paving slabs and road surfaces are particularly uneven.

Keep your guiding arm still and relaxed.

Remember that older people may need a little extra support and may prefer to link arms.

Give audio feedback while guiding the person i.e ‘We are just approaching the entrance to the house’ but do not give too much information - just a general description of the area will be fine.
When guiding a person outdoors, you will need to inform them when there is a kerb or a step up or down - this will need to be done before the person has stepped down and you should pause at the kerb - ‘we are about to approach a kerb’. If a kerb is rounded, you should approach head on and not at an angle.

When guiding a person on stairs, inform the person that you are approaching them and their direction i.e. up or down. Use your guiding arm to help the person locate the handrail (if there is one). You may need to change sides to do this. You should take the first step and then the person will feel your arm movement prompting them to follow behind. As you reach the last step, you could say ‘this is my last step’.

Where there are escalators, check first with the person whether they feel comfortable to travel on them. Check for alternatives if this is the case as there may be stairs or a lift. If there is no other alternative, you can request that the escalator is switched off.
You will probably not be able to stand side by side on an escalator therefore you should guide the person to the handrail and make sure the person feels comfortable before stepping onto the escalator and you should be ahead so that you are ready to assist them when getting off the escalator.

Getting through a doorway can be a little complicated. It’s important to tell the person you are guiding whether a door is opening towards or away from them.

Always try to go through a doorway with the person you are guiding on the hinge side - changing sides if necessary. Open the door with your guiding arm - this way they can easily tell whether the door is moving inwards or outwards. The person you are guiding will locate the handle if there is one and close the door behind them.

If you are going through a swing door, warn the person you are guiding so that they do not try to close it.
Revolving doors are best avoided, especially if the person you are guiding has a dog; there is nearly always an alternative. If you have to use one, position yourself so that the other person you are guiding is in the widest part and guide them in or out carefully.

Automatic doors should not pose problems, but tell the person you are guiding that you are approaching them. It may also be helpful if you advise the person what type of automatic doors they are and whether a push button is required to activate them.
Legislation

With the introduction of the Care Act 2014, which came into force in April 2015, there are legal requirements which must be adhered to by all local authorities in the United Kingdom.

Contact with a visually impaired person should be made within two weeks of a CVI (Certificate of Visual Impairment) being issued and assessments must be carried out by a person with the “necessary skill, knowledge and competency.”

Rehabilitation must be provided based on people’s needs and shouldn’t be limited to six weeks.

Minor aids and adaptations up to the value of £1000 must be provided by the Local Authority free of charge following an assessment, if two or more of the Care Act eligibility criteria are met.
The wellbeing of people with a visual impairment and their carers must be promoted - wellbeing is defined as... personal dignity and control over daily life, physical/mental health, social/emotional wellbeing, protection from abuse/neglect, participation in work/education/training/recreation, economic wellbeing, and suitable living accommodation.

“Preventative” services should be prioritised to prevent, delay or reduce the care needs of both adults and their carers.
The Care Act now replaces the following Acts:

Chronically Sick and Disabled Persons (CSDP) Act 1970 Section 2

National Assistance Act 1948 Section 29 (1)

Health Services and Public Health Act 1968

Health and Social Services and Social Security Adjudications Act 1983

Disabled Persons (Services, Consultation and Representation) Act 1986

Part of NHS and Community Care Act 1990

Part of Health and Social Care Act 2001
Other statutes that relate to the needs of people who are visually impaired or Deafblind include:

**The Human Rights Act 1988**
This Act is underpinned by value based services - Freedom, Rights, Equality, Dignity and Autonomy. It has brought about changes regarding accessibility and disability.

**Mental Capacity Act 2005**

**The Equality Act 2010**
This Act brings together most existing equality legislation and replaces The Disability Discrimination Act 1995. One of the purposes of this Act is to ensure that people with disabilities and people who rely on assistance dogs can access education, employment, housing, public transport and services.

**Health and Social Care Act 2014**

**Social Care for Deafblind Adults and Children Act 2009, Section 7 Guidance**
Signposting to Other Resources

It may be appropriate to signpost the person you are working with or supporting to an organisation that specialises in giving advice and support to people with a visual impairment. Key organisations include:

Royal National Institute for the Blind
105 Judd Street, London WC1H 9NE
Tel: 0303 1239999

Action for Blind People Employment Line
(working with the RNIB)
Tel: 0800 4402255

Deafblind UK
National Centre for Deafblindness,
John and Lucille van Geest Place,
Cygnet Road, Hampton, Peterborough,
PE7 8FD
Telephone/textphone: 01733 358 100,
fax: 01733 358 356
email: info@deafblind.org.uk
website: www.deafblind.org.uk
**Sense**  
101 Pentonville Road, London, N1 9LG.  
Telephone: 0300 330 9250 / 020 7520 0999, fax: 0300 320 9251 / 020 7520 0958, email: facilities@sense.org.uk, website: www.sense.org.uk

**British Wireless for the Blind**  
Free on loan radios, CD players and USB players for people in receipt of a means tested benefit.  
Tel: 01622 754757

**Victa** (Victa supports children and young people who are blind or partially sighted and their families across the UK)  
Tel: 01908 240831

**Guide Dogs for the Blind Association**  
Tel: 0118 983 5555

**Royal London Society for the Blind**  
Tel: 0208 808 6170

**Access to Work**  
Tel: 03452 688489