



**Wrightington,  
Wigan and Leigh**  
NHS Foundation Trust

**Information Governance**

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Ref: FOI2019/5818

Date Received: 13<sup>th</sup> December 2019

Response Due: 15<sup>th</sup> January 2020

20<sup>th</sup> December 2019

Dear

**INFORMATION REQUEST UNDER THE FREEDOM OF INFORMATION ACT 2000**

**You asked:**

**I am pleased to hear that the Trust have developed a support service for patients at the point of diagnosis. However, I would be grateful if you could provide me with some further information about the Sight Loss Support Officer, so that I can better understand its impact and effectiveness.**

**Please could you provide me with answers to the following:**

- 1. What is the depth of coverage of the service is it a full-time or part-time and how many clinics are covered?**

Part time, 8 hrs per week, 2 clinics (Retina/AMD) The Sight Loss Support Advisors (SLSA) are in the department at other times of the week undertaking their other roles but will always try to help outside of the timetabled session if it is required.

- 2. How is the effectiveness and impact of the services measured?**

A patient satisfaction survey is about to be undertaken on the next cohort of new patients (approx. 3months). Data is kept on all contacts so we can see what involvement and help is given.

- 3. The RNIB standard employs a Patient Experience Questionnaire (PEQ) that allows an independent “before and after “assessment of the patients’ experience of using the ECLO Service. Are such tools used in the Trust?**

Not used for patients in SLSA but is used in other areas. We are keen to develop this in Sight Loss Support.

**4. How do you ensure that referrals in the service are consistent across clinics?**

Referrals are not consistent and this has been addressed in our audit meetings, Clinical Cabinet Meetings and Multi-Disciplinary Team meetings. Most come from Low Vision referral triage and not referrals to the service. This is an area that we are working on as we would like to ensure all patients have access to this service.

**5. How does a patient find their way into the service?**

All clinicians have the opportunity to refer or the patient can make a self-referral. We have posters in the department and leaflets available for the patients. They can speak to any member of staff in the department and they will contact the SLSA.

**6. How many people have been provided with a service in the last year or so?**

There have been over 240 new contacts with the service in last 12 months in addition to helping the existing patients.

**7. And how have they been helped?**

At a recent MDT meeting the Low Vision Lead and SLSA gave a presentation on their work and an example of a patient contact. They have regular contact with the patient. The SLSA made referrals to Citizens Advice, Low Vision, Sensory Support, and Counselling for his wife, Henshaw's technology training and RNIB. Following these referrals and ongoing contact with the SLSA the patient now has the following: Symbol cane, Mobility Training, Temporary CVI (Vision loss due to diabetes and undergoing laser treatment so some vision may resolve) Talking blood sugar monitor, Access to work, Blue Badge, Employment and Support Advice (ESA), Guiding training, Living with sight loss course, Council tax advice, Alexa, Cinema Pass. Unfortunately Low Vision Aids haven't been helpful but the patient has all the support above which wouldn't have happened without our Sight Loss Support Advisors.

We are aware that although we have the service of a SLSA which has helped numerous patients this is not complying with the recommended standards. We have been able to arrange a meeting with the RNIB on 4<sup>th</sup> December with our Performance Manager, Clinical Lead and Ophthalmology Clinical Manager to enable us to develop our service and subsequently have an ECLO in Wigan.

I trust that this information is helpful to you, however if you are not entirely satisfied with this response please do not hesitate to contact the Information Governance Department on 01257 488271. If we do not hear from you within 28 days we will assume that we have been able to accommodate your request under the Freedom of Information Act 2000.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'M. Fleming', with a long horizontal flourish extending to the right.

Mary Fleming  
Chief Operating Officer

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If you are not content with the outcome of your complaint, you may apply directly to the Information Commissioner for a decision. Generally the ICO cannot make a decision unless you have exhausted the complaints procedure at: The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF