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improving rehabilitation for people with impaired sight

**Improving Rehabilitation for people with Impaired Sight**

**(The IRIS project)**

Preventive and rehabilitation services are seen as a way of reducing demands on health and social care services. A recent Act of Parliament (the Care Act 2014) has made it a requirement for local authorities to take steps to help all people to live independently before people reach a crisis point. The Act specifies the importance of vision rehabilitation. While research over the last 15 years shows that community-based vision rehabilitation (VR) services have the potential to have a positive impact on people’s daily life and emotional well-being, there is little research that is able to tell us how much such services are able to improve outcomes for people with sight loss and at what cost.

The IRIS project will use a mixed methods design to provide robust evidence regarding the effectiveness and cost-effectiveness of VR services funded by LAs in England. It will also provide evidence on whether the type of service model (LA in-house and contracted-out) affects outcomes for service users, taking into account the variation between and within the two models. Evidence generated by this project will support commissioners and service providers in making decisions about how to organise, deliver and develop VR services.

We will do this by selecting 20 VR services (10 in-house and 10 contracted-out). We will collect data from service users about their health-related quality of life, well-being and independence when they first use the service, four weeks and eight weeks after they start using the service, and six months later. We will also collect information about other services they have used. We will then interview a sample of service users, frontline staff and people who run VR services to understand how and why services influence outcomes for people. We will use all this information to explore which model is working best for which groups of users and why and to compare the costs of the different models. We will use what we find out to produce reports that are accessible to a number of people including service users, practitioners and the people who plan and pay for services.

The research is funded by the National Institute of Health Research School for Social Care Research and is being carried out in the Social Policy Research Unit (SPRU) at the University of York. It involves researchers from the SPRU, Centre for Health Economics (CHE) and Department of Health Sciences. We have ethical approval from the Social Care Research Ethics Committee. You can see our webpage at [bit.ly/virehab2](http://bit.ly/virehab2)

If you would like more information about this project and what taking part involves, please contact Dr Parvaneh Rabiee (01904 321950; parvaneh.rabiee@york.ac.uk) or Ann Hopton (01904 32 1970; ann.hopton @york.ac.uk)