

Domiciliary Eyecare Update

Dear Manager

Since 2012 the Health and Social Care Board have provided you with an annual update on domiciliary eyecare service provision which I hope you have found useful, both as a source of information for staff, carers and clients and as a reference tool for best practice.

The Health and Social Care Board review all eyecare service provision in an effort to ensure that NHS Sight Tests are delivered in a safe and effective manner encouraging best practice from all ophthalmic professionals and domiciliary eyecare is included in this process. It is vital that you are knowledgeable of the process whereby ophthalmic contractors (mainly opticians or optometrists) provide sight tests and spectacles (also known as General Ophthalmic Services, GOS) to your clients and residents. I ask you to please ensure that you bring this update to the attention of all your staff.

With thanks



Mr Raymond Curran, Head of Optometry HSCB



Eyecare Checklist

- ◆ Client has been given choice of optometrist
- ◆ Client is 'due' for an eye examination—bear in mind intervals for Sight Tests (October 2012 Newsletter)
- ◆ Optometrist provides clear information on outcomes of the examination
- ◆ If any vision problems are noted, are specific needs identified?
- ◆ Is referral to an eye clinic indicated and is it the *best* option for the client?
- ◆ Are new spectacles required? If so are they engraved with name and purpose?
- ◆ Have client's family been advised of outcomes?
- ◆ Has a review date been given?
- ◆ Do you know who to contact if there is an unexpected eye problem?

GAIN - Best Practice Guidance for the Provision of Domiciliary Eyecare in Nursing/ Residential Care Homes and Day Care Facilities



Audit of the GAIN Best Practice Guidance for the Provision of Domiciliary Eyecare in Nursing/ Residential Care Homes and Day Care Facilities

The GAIN Domiciliary Eyecare Best Practice Guidance was launched in October 2010 with copies issued to all nursing and residential care homes in Northern Ireland. In early 2014 the Health and Social Care Board began the process of audit of the Guidance. In total 174 care homes, 264 clients and 20 domiciliary eyecare professionals/providers participated in the audit. If you were one of those participating care homes, thank you for your engagement and feedback.



The audit was necessary to obtain information in relation to:

- * awareness of the GAIN guidance
- * the degree of uptake of the GAIN guidance within care homes
- * views on how the guidance could be improved

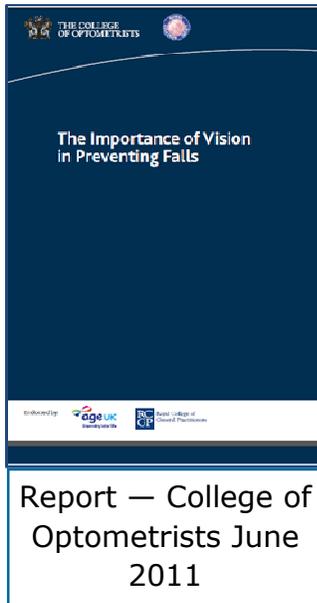
The feedback from care homes and clients who have accessed domiciliary eyecare and those professionals delivering the care was evaluated and the Report on the audit is currently being reviewed by GAIN. Any recommendations from the audit will be carefully considered and the Health and Social Care Board will undertake further engagement as part of this process.

Do you have any comments you wish to make?

If you have any comments on the GAIN Domiciliary Eyecare Guidance which you wish the Health and Social Care Board to consider please contact: Mrs Margaret McMullan — clinical adviser (domiciliary eyecare) tel: 028 95363239 or, email: margaret.mcmullan@hscni.net

View the Guidance at : http://www.gain-ni.org/images/Uploads/Guidelines/Eyecare_Audit2010.pdf. All comments will be appreciated and considered . If you have a specific eyecare issue which you wish to have considered please let us know.

Did you know?there is an evidenced link between Vision and Falls



The link between Vision and Falls is increasingly recognised by those in Health and Social Care, particularly those concerned and involved with care of the elderly. There are several initiatives currently seeking to address the issue of falls — both in the acute setting and in care homes.

A deterioration in one or more aspects of 'functional vision' will impact on how well a person can perform activities of daily living and leads to increased risk of FALLS. Visual function is not only to how well a person can read letters on a sight test chart but also includes the field of vision (what you can see 'around you') and the ability to detect contrast and changes in the judgment of distance and position (depth perception).

There are many general health and eye problems which may contribute to a higher risk of falls for your clients. For example, visual field loss



caused by glaucoma or stroke can increase the risk of falls and central vision loss caused by age related macular degeneration (AMD) may cause your clients to mis-judge distances and in turn increase the risk of falling. The picture

shows central vision loss caused by AMD.

It is important that you and your staff are aware of any difficulties a client may have with their vision and visual function as this may increase their risk of falls. The optometrist who examines your client's eyes will be able to advise you on the important aspects of visual function and if there are any vision problems which may increase the risk of falls. Please ask the optometrist if you have concerns about your clients vision.





SOME USEFUL RESOURCES

- ◆ RNIB
- ◆ SeeAbility
- ◆ Thomas Pocklington Trust
- ◆ College of Optometrists
- ◆ Macular Society
- ◆ Share the Vision (Libraries) Ltd
- ◆ Sense
- ◆ The Partially Sighted Society
- ◆ Action for Blind People

Please Note!!
There are many more organisations who can help support people with sight loss

Supporting your clients who have sight loss

There are many excellent resources and organisations who help people with sight loss. Some of these are listed opposite, please note that these are only a small selection of the organisations available.

However you and your staff can individually assist your clients on a practical day to day basis utilising some of the following advice points:

- ◆ Ensure that you have received feedback on the outcome of the eye examination from the optometrist — this will assist you in determining needs and will inform your clients care plan. Find out about the eye condition your client has and the impact on their vision.
- ◆ Consider other conditions such as: hearing loss, depression, dementia. The combined effect of these along with sight loss may have significant impact on a client's ability to engage and become involved.
- ◆ Ensure the physical surroundings are safe — remove unnecessary objects and furniture, optimal lighting is used, good colour contrast is employed in the décor.
- ◆ Be mindful of the signs of impaired sight — these are many and varied e.g. social withdrawal, cessation of favourite hobby, lack of 'eye contact', change in physical appearance.
- ◆ Communicate with your clients — listen to their worries, reflect on their feedback to you. Try to understand how their sight loss impacts on them as a person.
- ◆ Make text **BIGGER/BOLDER/BRIGHTER!**

Other important tips on eye health and eyecare to help your clients



OTHER HELPFUL THINGS YOU CAN DO



- ◆ Ensure that clients are provided with a diet rich in fruit and leafy green vegetables. The pigment important for central vision (in the macular area at the back of the eye) is made up of antioxidants called carotenoids which are found in dark leafy green vegetables such as kale and spinach. A diet low in saturated fats and rich in Omega 3 fatty acids (e.g. oily fish, walnuts) is also recommended.
 - ◆ If your clients use eye drops for an eye condition please be sure to give the treatment when it is due. This is essential for conditions such as GLAUCOMA where the eye drops are used to control eye pressure in order to preserve sight.
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- ◆ Promote good spectacle care.
 - ◆ Ensure that your clients are wearing the correct spectacles for the correct purpose — a client wearing their reading spectacles whilst walking about will have blurred vision and is at increased risk of falling.
 - ◆ If your client has impaired vision and is keen to try low vision aids and other tools to help improve their quality of life ask the optometrist for advice on how they can access such services.
 - ◆ If you have any concerns about your clients vision please ask the optometrist



CODE OF
PRACTICE
FOR
DOMICILIARY
EYECARE

Update on Domiciliary Eyecare Code of Practice—July 2014

Please note that the Optical Confederation Domiciliary Eyecare Committee have updated the Code of Practice for Domiciliary Eyecare. The Code exists for the benefit of all those providing and accessing domiciliary eyecare and provides brief advice points on entitlement to NHS eye examinations, standards of service and complaints.

The Code of Practice contains many of the aspects of best practice referred to in the GAIN Domiciliary Eyecare Guidance. The Code of Practice can be accessed at:
<http://www.opticalconfederation.org.uk/activities/domiciliary-eye-care>

Health and Social
Care Board

12-22 Linenhall
Street
Belfast
BT2 8BS

Tel: 0300 555 115

www.hscboard.hscni.net

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You will find a list of optometric practices which provide domiciliary eye services on the Business Services Organisation website at:

<http://www.hscbusiness.hscni.net/services/1780.htm>

If you require further information in relation to any aspect of NHS domiciliary eyecare services please contact one of the ophthalmic clinical staff at the HSCB.

E-mail: Margaret.McMullan@hscni.net
Janice.McCruden@hscni.net
Fiona.North@hscni.net