Optimising Eye Care in Regulated Care Settings

Quick Reference Guide for Care Home Staff

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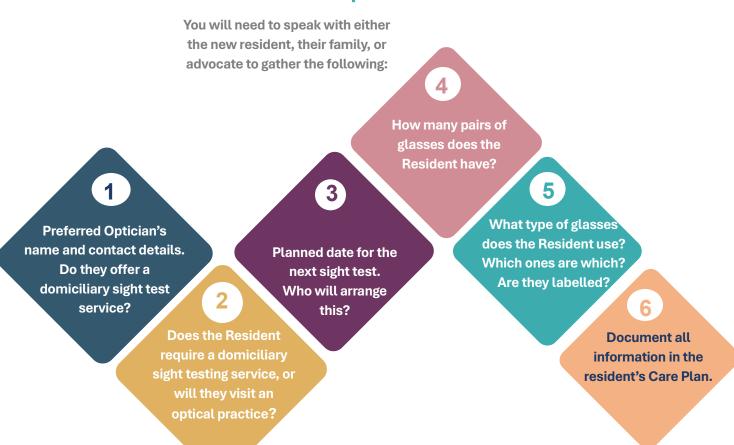
Sight Testing Arrangements for Care Homes

Follow the steps below to support a successful visit from a domiciliary optical service (optician) to your care home.

STEF	P ONE	STEP	TWO	STEP THREE		STEP FOUR	
<u>Optician</u>	<u>Care Home</u>	<u>Optician</u>	<u>Care Home</u>	<u>Optician</u>	Care Home	<u>Optician</u>	Care Home
Opticians planning to visit a Care Home are asked to compile a list of residents due for sight testing and to send this to the Care Home at least two weeks in advance. • re ha th	When a patient list is received from an Optician, check the names of residents against the following: Do they still reside at the care home? Ask the resident, their family, or advocate if they wish to have a sight test. Record the response in the resident's record. Do any new residents wish to have a sight test with this Optician? Once the list has been checked and amended, it must be sent back to the Optician via secure mail.	Once the patient list has been returned, send a poster to the Care Home to share details of the planned visit. Other Residents may respond to the poster and request a sight test. Requests for a sight test can also be made by the resident's family or advocate, where appropriate.	One day before the sight testing visit, check the list for any changes. Changes should be sent to the Optician, including additional requests. On the day of the visit, only residents who are named on the list should be seen by the Optician.	The Optician must provide a written copy of the spectacle prescription for each resident who has a sight test. For residents with reduced capacity, it is good practice to leave written information summarising the outcome of the sight test with the care home.	The spectacle prescription must either be given to the resident or filed within their care plan. Request a written outcome summary for residents with reduced capacity and share this with the family or advocate. New spectacles may be ordered at the request of the resident, their family or advocate, as appropriate.	When new spectacles are delivered the Optician must ensure they fit properly, and that vision is satisfactory.	Request notice of the planned date for delivery and fitting of spectacles. If any resident has difficulty with their new glasses, contact the relevant Optician to request assistance. Inform the resident's family or advocate, if appropriate.

A domiciliary optical provider should contact the Care Home to make arrangements for sight testing of residents. It is against the Code of Conduct for Domiciliary Providers to offer care home staff free eye tests or discounts on glasses. For support or to raise concerns contact the optical team at Lancashire & South Cumbria NHS Integrated Care Board by email: england.lancsat-optometry@nhs.net

Path One - Has an Optician



If the resident needs a domiciliary service but the current optician does not offer this option, move to Path Two

Concerns about Residents eyesight?

If you notice a sudden changes in a resident's eyesight, they may need medical assistance. Check their care plan for their eye health history and current optician details. Once you have this information, arrange a sight test or medical assessment.

Path Two - No preferred Optician

You will need to speak with either the new resident, their family, or advocate to gather the following:

4

How many pairs of glasses does the Resident have?

5

Will the Resident, their family, or advocate select an Optician, or is support required? Record details of the chosen Optician and the planned date for the next sight test.

Who will arrange this?

What type of glasses does the Resident use? Which ones are which? Are they labelled?

Does the Resident require a domiciliary sight testing service, or will they visit an optical practice?

Document all information in the resident's Care Plan.

Concerns with a Residents Vision

If you notice any sudden changes in a resident's eyesight, they may need medical assistance. You must check their care plan for their eye health history and current optician details. Once you have this information, please arrange a sight test.

Resources and Useful Contacts

<u>Lancashire and South Cumbria Training Hub</u> – includes bitesize training

Sight Advice South Lakes

Royal College of Nursing – Eyes Right publication

Health Education England - Ophthalmic Common Clinical Competency Framework

RNIB free Learning Disability resources - these include factsheets and top tip cards

RNIB free <u>Dementia information</u>

RNIB Events and Courses

Accrington and District Blind Society

Galloways Sight Loss Charity, Preston

Macular Society

N-Vision – Blackpool, Fylde and Wyre Society for the Blind

Vision Support Barrow & District



<u>Provider Self-Assessment Tool</u>

	Eye Health in Care Homes					
Provider Self-Assessment						
	Standard	RAG Rating				
1.0 A	dmission					
1.1	On admission, is the resident's usual optometrist recorded and contacted for routine appointments, where appropriate?					
1.2	On admission, is the resident's eye health history recorded (including current sight aids, medication etc.?					
1.3	Are residents offered at least an annual eye check-up, either in the home or at a local optometrist?					
1.4	Does the resident have the correct spectacles?					
1.5	Are the resident's eye care needs documented in their care plan?					
1.6	Is the Mental Capacity Act and Best Interest's decision-making principles adhered to and clearly					
	documented in relation the resident's eye health?					
	orkforce					
2.1	Are staff trained and deemed competent to administer eye drops / ointment?					
2.2	Are staff trained and deemed competent to provide basic cleaning to the eye?					
2.3	Are staff made aware of common eye conditions, signs and symptoms requiring urgent attention and sources of support (i.e. optometrist, NHS 111, 2hr UCR, A&E)?					
3.0 Er	vironment					
3.1	Has suitable lighting been fitted to reduce the risk of slips, trips and falls?					
3.2	Please provide details:					
3.3	Has a risk assessment been undertaken to identify environmental safety hazards and risks reduced?					
3.3.1	Please provide details:					
3.4	Is flooring specifically suited to residents who may have Dementia +/or visual impairment?					
3.4.1	Please provide details:					
3.5	Are low vision aids available (i.e. mobile phone / tablets / magnifiers / audio books and music personalised to individual taste)?					
3.5.1	Please provide details:					
4.0 Ad	4.0 Additional Support					
4.1	Do staff know how to access emotional / psychological support for residents experiencing sight loss?					
4.2	Is support sourced from wider healthcare partners as required (i.e. Occupational Therapist)					
4.3	Is support sourced from the voluntary sector to support residents with reduced vision (i.e. RNIB / Age UK)?					
4.4	Do staff know how to escalate unmet resident needs (i.e. Care Sector Lead's / Safeguarding)					
4.5	Are up to date resources shared with staff in relation to optimising eye health (i.e. Eyes Right)					

Acknowledgements

We are grateful to all services, organisations and individuals who supported the development of this good practice guide.

The Expert Reference Group we consulted with included the following people:

- Tom Mackley, Local Eye Healtth Network
- Sara Cook, Sight Advice South Lakes Sight Loss Charity in South Lakeland
- Angie Ashworth, Lancashire and South Cumbria Integrated Care Board
- Emma O'Kane, Lancashire and South Cumbria Integrated Care Board

The following services and organisations were consulted:

- Accrington Blind Society
- Galloways
- Lancashire County Council Sensory Team
- Macular Society
- N-Vision
- Royal National Institute for the Blind
- Vision Support Barrow & District

