Prime Minister’s Commission on the Future of Nursing and Midwifery

Written submission from the Association of British Dispensing Opticians (ABDO), the Association of Optometrists (AOP), the College of Optometrists and the Federation of Ophthalmic & Dispensing Opticians (FODO)

Together ABDO, the AOP, the College and FODO represent over 12,000 optometrists, over 5,600 dispensing opticians and optical businesses in the UK who provide high quality and accessible eye care services to the whole population.

1. What are the knowledge, skills and attributes that nurses / midwives require to take a central role in the design and delivery of 21st century services?

Through the Eye Health Alliance\(^1\), the optical bodies have attended the Royal College of Nursing Annual Congress over the last three years and have found that awareness amongst nurses of the importance of eye health for all patients is very low. From speaking to nurses at this conference and other national conferences on falls, we have found that many are unaware of the availability and eligibility criteria to NHS eye care services. In particular, many nurses do not know that there is an NHS domiciliary eye care service which provides a valuable service to patients who are confined to their own home. Given the importance of good eye health for all patients, and that currently in the UK 50% of sight loss could have been prevented through early detection and treatment of eye conditions,\(^2\) we would like to work more closely with nurses to ensure they are aware of the benefits of regular sight tests.

Nurses are well placed to provide advice on the availability and benefits of eye care services to many patients who are currently not accessing these services and who are at risk of losing their sight unnecessarily. 4 million older people do not have regular sight tests in spite of the provision of free NHS sight tests for those aged 60 and over.\(^3\) There are 1.4 million over the age of 65 who are confined to their own home or residential home, yet only 349,172 people received an NHS sight test at home in the year to 31 March 2006.\(^4\)

2. What would you like to see nurses and midwives doing more of and/or doing differently in the future - whether in people’s own homes, in the community or in hospital?

\(^1\) The Eye Health Alliance is a coalition of professional bodies, charities and trade associations who work together to promote better eye health for all. [www.eyehealthalliance.co.uk](http://www.eyehealthalliance.co.uk)

\(^2\) Tate, R et al. *The prevalence of visual impairment in the UK*. RNIB/Vision 2005

\(^3\) Statistics – numbers of people with sight problems in the UK. RNIB website 23/01/2006 [www.rnib.org.uk](http://www.rnib.org.uk)

\(^4\) Pg. 5. *A fundamental Right to Sight*. Domiciliary Eye Care Committee, January 2007 [http://www.eyehealthalliance.co.uk/health/nhs/%20Fundamental%20Right%20to%20Sight.pdf](http://www.eyehealthalliance.co.uk/health/nhs/%20Fundamental%20Right%20to%20Sight.pdf)
We would like nurses to be given more training and advice about the benefits of NHS eye care services for the patients they treat, so they can ensure that patients are not missing out on the eye care they need. District nurses are at the forefront of primary care and are ideally placed to advise those who are confined to their own home - whether they live in a residential home or their own home - on the availability and benefits of the domiciliary eye care service. Patients can contact their local PALS for details of providers in their area. The domiciliary eye care service provides a valuable sight testing service for those who are unable to leave their home unaided. As well as testing the sight of the patient, the domiciliary optometrist is also able to advise on lighting and contrast and how to reduce the risk of falls in the home. A study carried out by York University found that over 189,000 falls occur in the UK as a result of poor vision, costing the NHS in excess of £269 million. Many of these patients return home from hospital without having had a sight test, to the same environment that caused the fall. Studies have shown that falls can be reduced by as much as 14% when visual impairment is considered as part of a fall reduction plan.

Hospital based nurses should also be aware of the benefits of ensuring patients have good eye health, and in particular should encourage patients who have fallen, had a stroke and or those who have diabetes, to have regular sight tests. Regular sight tests are important for all patients to ensure visual problems and eye disease are detected and treated early. Many eye conditions may not present any symptoms until the condition is quite advanced. It is therefore important for eye conditions, for example, glaucoma, to be treated early to prevent any sight loss. If the condition is detected in the later stages, sight loss that has occurred cannot be restored.

Hospital based nurses should also be aware of the emotional and detrimental impact poor vision can have on a patient, particularly for those with communication difficulties. If a patient is not eating it may simply because they can’t see. Checking that a patient has their glasses with them in hospital or if they have eye drops with them, checking that they are administered when required, can make a great contribution to aiding their recovery. It is extremely important that eye drops which are prescribed for glaucoma are administered as the treatment will prevent sight loss.

Case study – patient 1
A domiciliary optometrist was called to examine a lady in her eighties because the patient was diabetic and having visual problems. The district nurse who had seen the patient to dress her leg ulcers, had suggested that she should have her sight tested. After testing the sister, the optometrist noticed that her brother was wearing two very old pairs of glasses, one on top of the other to try to read the paper, (rather unsuccessfully). The optometrist asked him when he last had his eyes tested and was shocked to hear it was around twenty years ago. He agreed to have his eyes tested by the optometrist as he was also unable to leave his home to visit an optical practice. His distance vision was very poor in his distance glasses, and could only read the top letter on the eye chart. He wore these glasses along with his readers to try to read but could still only see the headlines. After testing his eyesight the optometrist found that he needed two significantly stronger pairs, and with these he could read the bottom line on the chart and the very smallest print. The man actually cried, because he had resigned himself to not watching much TV and hardly reading. He had altogether given up watching the racing on TV which he loved because he could not see the horses clearly and could not read the ‘form’ in the paper. With the new glasses he had a renewed interest and ability and he claimed it had changed his life!

This example of an older patient who had not had his sight tested for over twenty years and was almost resigned to the fact that poor eyesight was just part of getting old, is very typical of the patients

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5 For more information about eligibility criteria for NHS sight tests and the NHS domiciliary eye care service please go to [http://www.eyehealthalliance.co.uk/health/nhs/](http://www.eyehealthalliance.co.uk/health/nhs/)


that domiciliary optometrists see. Thanks to the advice of the district nurse, his life has been transformed.

Case study – patient 2
Another older patient living in her own home had to be persuaded by her daughter to have a sight test after she told her daughter she thought she was going blind. The lady was depressed and did nothing but sit in her home. When a domiciliary optometrist was called to test her eyesight, the optometrist discovered that the lady was wearing glasses that had been her mother’s, which were the wrong prescription for her and the patient could actually see better without them. The patient explained that she wore them anyway because she had always worn glasses. Following the provision of a correct pair of glasses the lady began to watch TV, knit and crochet – all things she had always loved doing but had been unable to see well enough to do. As a result her depression lifted and she began to enjoy her life again. The daughter wrote to the optometrist to thank her for helping her mother.

This is another example of how getting access to eye care service such as a sight test can improve the quality of life of patients, especially those who are unable to access a community optical practice.

3. What might be preventing nurses and midwives from doing this now?
4. How can these barriers be overcome?

We believe that nurses genuinely want to know more about how they can advise their patients to look after their eyesight and prevent avoidable sight loss. As well as raising awareness amongst patients of the availability of NHS eye care services and the health benefits of regular sight tests, we believe it also important for other healthcare professionals including nurses, to understand the importance of eye health for their patients.

Through our own raising awareness work through attending conferences such as the RCN Congress, and working directly with the RCN to discuss how training can be provided on eye care and eye health for nurses, we have found that nurses want to know more. However there is still more to be done to ensure nurses are able to refer patients to eye care services in their local area. We hope that the Commission can build on this work and ensure that nurses include the promotion of eye health as a key part of services designed to promote health and well-being. We are keen to work with the Commission to find ways of facilitating better working relationships between nurses working in the community and their local optometrists and dispensing opticians.