

The bulletin for care home staff

# My home life

Issue 12

Quality of life for residents with sight loss

FOR THE  
STAFF  
ROOM



Quality of life for  
residents with sight loss

Supporting residents with sight loss

In partnership with  
Thomas Pocklington Trust

Thomas Pocklington Trust  
 Housing and support for  
people with sight loss



## This is *My home life*

**My Home Life** is a UK-wide initiative aimed at promoting quality of life for those living, dying, visiting and working in care homes for older people, through relationship-centred care and evidence-based practice.

There are eight evidence-based themes **for My Home Life**

1. Maintaining identity
2. Sharing decision-making
3. Creating community
4. Managing transitions
5. Improving health and healthcare
6. Supporting good end-of-life
7. Promoting a positive culture
8. Keeping workforce fit for purpose

The first three themes are focused on how you approach and **personalise** care. The next three themes are concerned with how you help **navigate** residents and relatives through the journey of care. The last two themes are aimed at managers to help them support their staff, put the other six themes into practice and thus **transform** care.

This guide is being distributed to 18,000 care homes on behalf of My Home Life through Care Management Matters.

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### Working together

For this bulletin, we have teamed up with Thomas Pocklington Trust, a charity that runs a research and development programme identifying practical ways to improve quality of life, social inclusion and independence for people with sight loss.

Pocklington provides independent and supported housing, care services, communal activities and home support services.

**You will find other useful resources about sight loss on their website:**  
<http://www.pocklington-trust.org.uk/research>



# Recognise the signs of sight loss



**Sight loss is more common amongst people living in care homes than older people in the community. Yet, eye health care is often overlooked. Many of your residents will have some sight and it is important to make the most of that.**

The nature of sight loss is related to the condition of the eye, and people can have more than one eye condition at the same time:

**Refractive error** – problems like short or long sightedness affect most older people and can be corrected with spectacles, but often go unnoticed.

**Age related macular degeneration** – where the central sight goes, but people can still see at the sides. This is the most common type of sight loss in the UK and sometimes may be treated if detected early enough.

**Cataracts** – are also common. They cause blurry vision, and colours appear faded. Bright light may be dazzling. Cataracts can be removed by a simple operation.

**Glaucoma** – often associated with ‘tunnel vision’ will progress to complete blindness if untreated.

**Diabetic retinopathy** – eye disease associated with diabetes.

**Regular eye tests are important so conditions can be treated promptly and support can be provided.**

Some people’s sight is affected by other conditions

- **Stroke** can cause visual problems which are a result of brain damage and not direct damage to the eye. It can mean that a person is only able to see the right half or the left half of the world out of each eye. More information can be found at [www.stroke.org.uk](http://www.stroke.org.uk)

- Dementia can affect the way the brain interprets what you see and can result in a variety of ‘visual mistakes’ including hallucinations. More information can be found at [www.alzheimers.org.uk](http://www.alzheimers.org.uk)

- **As well as eye tests it is important to ensure that residents general health is assessed.**

- In this bulletin, we look at some ideas for improving the quality of life of residents with sight loss. It’s important to remember we’re all individuals, so find out what works best for each resident.

**Do you know how many of your residents are affected by sight loss? Look out for signs of vision loss. Do any of your residents have difficulty with activities such as eating and reading? Do they tilt their head in order to see better, do they find light too bright?**

# See it through my eyes...



**It's the little things that make a difference, says Bertha (92) who has sight loss. Bertha was a teacher for 23 years and enjoys going to the opera, reading, history and social affairs. Here she offers her advice to care staff...**

I have had progressive problems with my sight for the past 10 years due to age-related macular degeneration. This eye condition means that I can't distinguish colours well although I can make out something of the contrast between light and dark shades.

- I use magnifiers, which staff are able to help me adjust, and I'm able to move around the home and garden using a handrail and a stick.
- My sight problems impact on many aspects of my life, particularly on the quality of relationships I am able to have with other residents and staff in the care home. Losing your sight can make you feel isolated even from those you live alongside. At meal times, for example, I can't see when someone at my table has had their hair done.

Whilst staff are very aware of my sight problems, it is important for them to remember to introduce themselves every time they come into my room. This is particularly important for a new member of staff or agency worker because I won't be able to recognise their voices.

Often it's the little things that make a difference. Staff are so busy, but it's important they understand that it takes me longer to do things because of my sight loss. I rely on remembering where things are positioned in my bedroom, so staff and visitors are careful not to move things around without asking. I also have a bedside light on, which I call my harbour light, and this helps me get a sense of where I am in the room.

One thing that really helps is having my wardrobe arranged – reds on the right, and blues on the left, plus all my pullovers, cardigans and skirts all carefully organised. This means I can pick my outfits more easily and independently.

I would suggest that, when someone with sight problems moves into a care home, it would be very helpful if staff could spend some time with them walking around the building so they become familiar with the layout.

Even those residents who may still need guiding could be encouraged to make use of a rail. Moving into a care home can be a worrying time, it is not the home you are used to, so being able to retain this independence will mean a lot to people.

Opportunities to talk to staff and other residents are really important. Sight loss can really isolate you, so activities such as music and reading groups, quizzes or having someone like a volunteer to read and write letters to family and friends can be really valuable...after all, if you can mix with others you'll get more laughs out of life.

## Emotional support

### **The risk of depression is greater in older people with sight loss.**

Adjusting to sight loss can be challenging emotionally as well as physically. Think what you'd miss if you lost your sight ... if you had to give up driving, for example, or couldn't see yourself in the mirror. You would probably feel a huge loss of independence.

Losing sight can feel like bereavement. Residents may find it harder to engage in social activities and may need extra reassurance and support.

## Things you can do:

- Make time to talk to people about the practical difficulties they're experiencing and how it makes them feel.
- Involve residents in thinking of ways they can be independent. Learn about their eye condition and the low-vision aids available. Help them find practical solutions.
- Encourage residents to get involved in activities and socialise with others in the care home.
- Be careful how you communicate. Sight loss can make it difficult for people to recognise others, so use the resident's name to get their attention. Let the person know who you are and what you're planning to do. Also tell them when you are moving close, when you are going to touch them, and when you are leaving the room.
- Ensure residents are not missing out on information they're unable to read by providing information verbally – reading aloud menus, activity timetables, or general notices.

# Moving about the home



## Creating the right environment can improve residents' independence and safety, says care home manager Trish.

Better lighting can make a dramatic difference, yet in the day-to-day running of a care home, people don't always pay attention to this.

It's important to recognise the different types of lighting – lighting for comfort, for example, or lighting for activities. Offering residents a reading lamp or a space by the window for natural light can be helpful. Try and avoid glare, by using lampshades and blinds. Always remember, too, that low light levels create a greater risk of falls.

### **Can residents reach to put on the light when they go to the toilet at night?**

### **Can residents see to eat and dress?**

In our home, we have made real efforts to help residents navigate their way around. We use contrasting paint on the edge of doors, handrails and light switches to make them easier to see. We use placemats that contrast, both with the tablecloth and the cups and plates. We have provided tactile signs on doors, and use audio noticeboards.

Clutter can be a real menace for residents with sight impairment. A side table can either be useful – or something to fall over. Find out from residents how they would like their furniture and belongings to be arranged, and help them create a 'mental map' of their rooms to find things more easily.

## Providing good eye-care

It is easy to lose glasses, but so important that your residents are wearing them at the right times (and not someone else's!). Try labelling people's glasses with their name and purpose – e.g. 'watching TV'. Keep them clean and have a spare pair available. Also,



keep a record of all residents' prescriptions in their care plans.

Yearly eye tests can help identify eye conditions, many of which can be treated if detected early enough. At present eye tests are free to people over 60 and for those who cannot get to high street opticians, mobile or domiciliary eye tests are available.

## What now?

- Find out more about visual awareness training in your care home.
- Visit Pocklington's website for more tips and practical ideas for supporting your residents with sight loss.

Thomas Pocklington Trust  
Housing and support for  
people with sight loss

[www.pocklington-trust.org.uk/research](http://www.pocklington-trust.org.uk/research)

## TOP TEN TIPS!

# For supporting residents with sight loss

- 1. Learn to recognise sight loss:** Sight impairment in older people is very common, but can be easily missed. Look out for signs, such as a change in personal appearance. Does a person have difficulty reading or recognising people? Have they stopped a hobby?
- 2. Find time to chat with residents:** To understand how they're living with sight loss and how to help them make best use of the sight they still have.
- 3. Find out about the eye condition:** Sight loss varies and affects people in different ways. Become familiar with the type of conditions affecting your residents and how they might be affected.
- 4. Promote good eye and spectacle care:** Ensure glasses are clean, labelled with the purpose (e.g. reading) and the person's name. Make sure there is a spare pair available. Ensure residents have eye tests when they need them and at least once a year.
- 5. Ensure staff are communicating effectively with residents:** Do residents always know that you have come into the room or left? Can they always read what has been written?
- 6. Maximise lighting:** Recognise the importance of having good lighting, whether this is natural light, or a reading lamp. Make sure the lighting fits the purpose of the activity and is comfortable to use.
- 7. Consider the physical environment:** Help familiarise residents with the layout of their bedroom and the home in general. Consider how your home might be improved with tactile and audio signage and colour contrasts to distinguish features of the environment.
- 8. Be alert to other conditions such as hearing loss or dementia:** Sight loss can be compounded by other conditions such as hearing loss or dementia. Ensure you identify the appropriate health support to minimise the impact of these.
- 9. Involve the resident:** Residents need to be supported to develop their own strategies for coping with sight loss. Ask residents what they would like to do and work with them to find practical solutions.
- 10. Keep reflecting on your practice!** Make time to reflect upon your care practice and ask your residents for feedback on what works well and what could be improved.



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