

## Low Vision Pathway: FAQs

### Who can access the low vision service?

The [LOCSU low vision pathway](#) is a locally commissioned service, to meet the needs of the local population. The pathway is open to all people who experience difficulties with the visual aspects of everyday life, regardless of certification and registration status. The pathway is designed to be as accessible as possible, receiving self-referrals, alongside referrals from primary, secondary and social care sectors.

Note: we recommend that the patient should have had an eye test within the last 12 months for optimum outcomes following the low vision assessment.

### How long should a low vision assessment take?

There is no recommended fixed length of a low vision assessment, however, most sources suggest around 45 minutes to one hour is optimum. This is to ensure comprehensive history taking can be undertaken, alongside allowing enough time for the additional tests required and trialling of different aids. Ideally, a further low vision assessment (follow-up) is recommended at an interval of 12 months, so that patients are continuously supported as their low vision needs evolve.

### How do I best send written communication to patients with with low vision?

Blind and partially sighted people have a legal right to receive accessible health and care information, in a format they can read and understand, this is an important part of the service for your patients. [NHS England » Accessible Information Standard](#)

When sending written communication, large print is recommended (font size 16-18), although this should be adjusted depending on patient preferences. Avoid stylised typefaces and capital letters and use bold fonts where possible. Alignment is best placed on the left side and with 1.5 line spacing. For some low vision patients, text arranged in columns can be easier to navigate due to restrictions in visual field/scotomas. Alternatively, standard print size (font size 12-14) may still be used as with the rise of electronic forms of communication, patients are able to magnify and change contrast as needed. Always note your patient's preference of communication at the earliest opportunity and ensure that this is kept up to date.

*Did you know? The Royal National Institute of Blind People (RNIB) currently offer a free transcription service for those who require it. More information can be found by clicking [here](#).*

## **What aids do you recommend to keep in a low vision kit?**

You can find a recommended list of aids [here](#).

## **How many aids is an acceptable amount to prescribe to patients following their low vision assessment?**

Different aids will be needed for specific tasks to suit individual needs. Typically, no more than two optical aids are to be prescribed at the same time in order to avoid confusion and encourage quick familiarisation and adaptation. Typically, you might prescribe one aid for distance and one aid for near. Aids are loaned to the patient, so should your patient not be able to use the magnifier as instructed, please ask them to return it so that you may prescribe an alternative, more suitable aid.

## **I am currently providing an NHS-funded low vision service but I only have access to simple magnifiers. I believe some of my patients would benefit from more complex magnifiers such as electronic aids. Am I allowed to recommend them or do I limit my advice to the devices that I have access to in practice?**

It is best practice to always inform patients of all their options regardless of funding source. However, it is imperative to advise the patient that whilst it is a recommendation, you would encourage trialling the appliance first or testing it out before purchasing. Typically, electronic aids can be demonstrated at local Resource Centres led by third-sector charity organisations. Alternatively, leading optical aid suppliers typically have a return window, whereby optical aids can be trialled and returned if not successful. It is important to provide patients with all the relevant information if making a recommendation outside of your usual scope of practice. *Did you know that patients registered as Sight-Impaired/Severely Sight Impaired are entitled to VAT exempt purchases of low vision aids. More information can be found [here](#).*

## **Who do I send a letter to following a low vision assessment, to inform them of the outcome?**

We recommend sending a letter to the GP that the patient is registered with, providing a summary of the low vision assessment, including recommendations. A copy of this letter should also be provided to the patient and, with the patient's permission, to the practice providing their sight-test. Onward referrals may also be made, and if so, the referral letter may need to be written out to a range of stakeholders such as the Sensory Support team, secondary care, third sector organisations, or even perhaps an optical practice for a sight test if needed.

**I am keen to undertake more low vision training. Where can I access learning resources for Low Vision?**

LOCSU have commissioned WOPEC to develop a low vision module, which has been recently updated in line with the LOCSU Low Vision Pathway refresh. Access to this module can be granted by first registering on the [WOPEC website](#) and then contacting your Local Optical Committee (LOC) for an access code.