





# Servicing Aged Care and Retirement Villages

For Eye Health, Opti-Call Aged Care Services offer a complete optical service across SA. This includes a thorough annual bulk billed eye test, using the latest portable equipment. Additionally, Opti-Call offers a spectacle dispensing service for residents, and in-facility dispensing for staff members and family members.

**Note:** For staff and family members, we cannot undertake retinal imaging.

We conduct comprehensive <u>eye health</u> <u>testing</u> for residents at Facility Eye Clinics, including:

- Spectacle refraction and visual acuity measurement
- Glaucoma testing ,eye pressure checks
- Checks on cataracts / implants
- Diabetic retinopathy and macular degeneration
- General eye health and comfort
- Spectacle supply and service



## **Complete Service**

Opti-Call offer a unique full service tailored to the needs of residents in the comfort of the aged care facility – no need to take the resident out of the facility for an eye test, fitting and adjustment of new glasses or attend to lost or broken glasses.

There is a three month guarantee on new glasses to ensure a resident is happy with their new glasses.

After the three months guarantee the facility based repairs and adjustments are available with a call out fee of \$60 (to cover labour and petrol costs.)

Our glasses are reasonably priced for the very labour intensive service we offer, and can be claimed through all participating Health Funds with optical cover.

## **Facility Documentation**

We supply pre and post eye clinic documentation – preparation form, poster, consent form, clinic handover summary report and individual eye tests.

### **Police Clearance**

All Opti-Call staff that work at an Eye Test Clinic in Aged Care Facilities has a current police clearance, and have professional documentation to comply with government requirements to work at Aged Care Facilities.

### **Annual Eye Test Entitlement**

New Medicare entitlements encourage, and pays for everyone over 65 to have an **eye health check** every 12 months.

### Who Needs Eye Health Checks?

Any one over the aged of 65, plus residents with eye health issues, glaucoma, diabetes or maculae degeneration, should be checked at least every 12 months.

A resident with Dementia / Alzheimer's needs to have their eye sight checked regularly, as poor eye sight makes for more confusion.

#### **DVA**

DVA residents are eligible for a new pair of glasses every two years, but if their glasses are broken, lost or there is a prescription change, they are eligible for a new pair of glasses instantly.

## **Optical Equipment Used**

The following are examples of the types of mobile equipment we use in the Eye test Clinics.

Opti-Call make it as easy as possible for residents to attend an eye clinic, and have their eye health checked whatever their mobility – walking, wheel chair or bed-ridden.



Opti-Call are being more pro-active and booking Eye Clinics at least six months in advance. This is to assist aged care facilities to better demonstrate they are complying with the Australian Aged Care Quality Agency Guidelines – 2.16 Sensory Loss

#### **New Facilities**

If a member of your family is in a facility, where Opti-Call currently do not service, give us a call and we will talk with that facility about our service.

#### **Contact Details**

Opti-Call Aged Care Services Pty Ltd PO Box 32 Morphett Vale, SA 5162 Email: info@opticall.com.au

Website: www.opticall.com.au

(08) 8387 1708 or 0419 807 851

## Sensory Compliance – Australian Aged Care Quality Agency Guidelines

Outcome - "Care recipients' sensory losses are identified and managed effectively."

**Processes to consider** – "How does the home ensure regular assessments of care recipients' sensory losses are conducted and communicated as per the general care process?"

- consideration of the care <u>recipient's vision</u>, hearing smell, taste and touch.
- consultation with relevant health professional (such as optometrists, audiologists and skin care specialists) about the effective management of sensory loss and needs?

#### Links to related expected outcomes

#### • Expected of Standard Three

- Poor and inappropriate management of sensory losses may affect the provision of other care recipients' rights such as independence, ability to participate in activities of interest to them, and ability to make informed choices and make complaints (for instance, due to vision impairment, the care recipient may not be able to review written information).
- Expected outcome 4.4 Living environment
   The home should be able to demonstrate
   the living environment is safe for care
   recipients with sensory losses, for instance,
   for visually and hearing impaired, or care
   recipients with tactile impairments.

## **Diabetes Australia - Preventing complications**

Diabetes is a complex condition in that it can affect many parts of your body as well as your mind. The potential complications of diabetes are the same for type1 and type2 diabetes.

- Heart attacks and strokes are up to four times more likely in people with diabetes
- Diabetic retinopathy and potential vision loss affects one in six people with diabetes
- Kidney damage is three times more common in people with diabetes
- Amputations are 15 times more common in people with diabetes
- Depression, anxiety and distress occur in more than 30% of all people with diabetes

 Early diagnosis, optimal treatment and effective ongoing support and management reduce the risk of diabetes-related complications

## How sight loss increases confusion and distress of dementia patients

The first study to explore the combined effect of vision loss and dementia identified **sight loss** increases confusion and distress of dementia patients – December 2nd, 2008

- Visual impairment can increase the levels of disorientation and distress that a person suffering from dementia experiences, according to a new study.
- Carried out by the Institute of Psychiatry at
   King's College London and published by the
   Thomas Pocklington Trust, the study
   explores the impact that sight loss and
   dementia has on the lives of older people
   and their carers. It is believed to be the first
   to investigate what affect the combination
   of both conditions can have on a person.

#### **Vision loss or blindness**

After the age of 40, the risk of eye diseases and vision problems increases threefold every 10 years. People with vision problems can get <u>depression</u> and have an increased <u>risk of falls</u>, and hip fractures. People at the highest risk of vision loss are older people, and those with diabetes and a family history of vision problems.