**Functional Vision
Assessment Tool**

**A resource to help understand vision for people with learning disabilities**

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**Functional Vision Assessment Tool**

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**Introduction**

Good eyesight enables people to learn, communicate and feel more conﬁdent.

Shockingly, our research suggests that people with learning disabilities in the UK are far more likely to have serious sight problems and less likely to have had a sight test.

A Functional Vision Assessment (FVA) can be a very useful tool to find out more information on how someone uses their vision. SeeAbility’s FVA tool is intended to be used by supporters of people with learning disabilities who know that person well, such as family carers and support staff. This FVA is an observational tool that can be used to recognise how a person with learning disabilities might be using their sight. It can give an indication of what a person might not see, or have difficulty seeing. An FVA can be very useful before someone attends an eye test or eye clinic appointment to identify problems that may or may not be treatable.

This may help inform the clinician as to whether a condition should be treated (for example prescription glasses or operate on a cataract). If a problem cannot be treated then the FVA can be used to develop strategies to support someone in adapting to their visual limitations. The FVA will also help carers and supporters to monitor a person’s vision between eye tests.

**How to use the FVA Tool**

The FVA tool is made up of 5 sections, these are:

* About the person you support
* How do the person’s eyes look?
* Signs and Symptoms
* Assessment
* Taking Action

Complete each section with as much detail as possible, and don’t forget to share the FVA with eye care professionals.

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 **About the person you support**

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| **Person’s Name:** |  |
| **Date of last sight test:** |  |
| **Has the person been prescribed glasses?** |  |
| **Is the person wearing their glasses?** |  |
| **How does the person communicate?** |  |
| **Does the person have any thoughts on their own eye health? For example, “My eyes are sore” or “I can’t see”.** |  |
| **If the person has visited the hospital eye clinic or had eye surgery, please write the approximate dates and the name of the eye condition:** |  |
| **Your name and role:** |  |

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 **How do the person’s eyes look?**

* Sometimes, the appearance of a person’s eyes can tell us something about their eye health and vision.
* Look at the person’s eyes and go through the checklist below.

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| --- | --- | --- |
| **Observation** | **Yes/No**  | **Notes** |
| No eyes at all – If Yes, there is no need to continue with the FVA |  |  |
| Very small eyes |  |
| Closed, partially closed or droopy eyes or eyelids |  |
| Eyelids rolling in or out |  |
| In-growing eyelashes |  |
| The white of the eye looks red, bloodshot, swollen or sore |  |
| The white of the eyes looks yellow |  |
| Sticky eyes, possibly with discharge |  |
| The “pupil” appears mis-shapen or incomplete |  |
| One or both eyes turned in or out (squint) |  |
| The eyes look “milky” or “cloudy” |  |
| Eyes that move constantly |  |
| Eyes that bulge, seem “pointed” at the front or have an unusual shape |  |
| Eyes appear scarred or “damaged” |  |
| Cysts, lumps or styes on the eyelids |  |
| Watery, weeping or dry eyes |  |
| Anything else that appears “unusual” |  |

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**Signs and Symptoms**

* Sometimes, people’s behaviours are related to poor vision.
* Take time to observe the person’s everyday behaviours.
* Use this checklist to record your observations and describe them as much as you can.

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| **Signs and Symptoms** | **Notes** |
| Frequent touching of eyes - such as poking, rubbing | **Y:\Images, Logos & Videos\LOGOS\SeeAbility brand logos\SeeAbility Logos (2017 Post Brand Refresh)\Png\Logo_BLO_Med-BlackStrap.png** |
| “Unusual” head positions |
| Moves head to look at things - but eyes do not move much |
| Turns head frequently when looking for something |
| Unusual head movements - for example, frequent head shaking |
| 'Head rolling' - circular movement of head |
| Constant/frequent frowning |
| Constant/frequent blinking or screwing up eyes |
| Blinks/shields eyes at bright lights |
| Avoids bright lights and sunlightDoesn’t like going out when it is sunny |
| Turns off lights or draws curtains when indoors? Always or when it is sunny? |

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| Signs and Symptoms | Notes |
| Puts hands in front of eyes as if “shielding” them from the light |  |
| Struggles when going from dark areas to bright areas and bright areas to dark areas |
| Often has head “bowed” as if looking away from sources of light |
| Hesitates or is reluctant to leave the house when it is dark |
| Is tentative or hesitant when moving into shadows from daylight, or into daylight from shadows |
| Short attention span or seems uninterested in other people or surroundings |
| Poor self-care skills |
| Poor communication skills - difficulty learning sign language |
| Dramatic changes in behaviour - may become upset or anxious for no apparent reason |
| Not appearing to recognise people |
| Not making eye contact with people |
| Startled by noises |

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| **Signs and Symptoms** | **Notes** |
| Anxious or unwilling to walk alone |  |
| Constantly looks down when walking |
| Using hands to trail walls when walking |
| Withdrawn from groups or favourite activities |
| Choosing to sit very close to the TV |
| Does not like to sit close to the TV and choosing to sit further back |
| Holds objects to the side to see them |
| Jumps or is surprised when approached from one side |
| Brings objects closer to observe them |
| Appears to ‘lose sight’ of object when trying to pick it up |
| Unable to find object directly in front of them |
| Limited/no eye contact |
| Difficulty recognising faces |
| Problems with small print or small objects |
| Avoiding close up work and activities |

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| **Signs and Symptoms** | **Notes** |
| Takes a long time to find objects |  |
| Appears to have some problems seeing, but close or detailed vision seems to be good |
| Does the person have problems walking down the stairs? |
| Does the person have problems seeing fast moving objects? |
| Has difficulty judging steps and kerbs; often trips up or appears unconfident |
| Does the person have problems seeing something that is pointed out in the distance? |
| Does the person have problems finding an item of clothing in a pile of clothes? |
| Does the person find copying words or pictures time consuming and difficult? |
| Does the person leave food on the right or left side of their plate?Appears to have difficulty finding all food on a plate |
| Does the person have problems finding an item in a supermarket (for example, finding the breakfast cereal they want) |

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| **Signs and Symptoms** | **Notes** |
| Often knocks things over such as cups and bottles |  |
| Bumps into doorways or furniture |
| Often doesn’t appear to see people approaching |
| Appears to see some objects and colours better than others |
| Does not always see objects passed to them |
| Does not appear to see all objects on a table, including meals |
| Vision appears to vary in different situations |
| Exaggerated head movements |
| Does the person blink when an object appears suddenly near to their eye?  |

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**Assessment**

* Take some time to try out these simple tasks with the person you support.
* These tasks may give more information about how the person sees.

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| **Task** | **Notes** |
| Give the person an object. Where do they hold it to look at it? | **Y:\Images, Logos & Videos\LOGOS\SeeAbility brand logos\SeeAbility Logos (2017 Post Brand Refresh)\Png\Logo_BLO_Med-BlackStrap.png** |
| Ask the person or observe how the person picks up an item from a table |
| Walk up to the person, without using your voice, observe if they recognise you |
| Ask the person to look at a picture, observe where they hold it |
| Observe the person at meal times, can they identify or locate what is on their plate? |
| When watching television, does the person sit very close or watch it using the “corner of their eye”? |
| Does the person turn their head to look at you with their side vision or appear to be “looking away” during conversation? |
| Observe if the person bumps into doorways |
| Observe if the person bumps into people in busy crowded areas |
| Observe if the person has difficulty on steps or stairs |

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| **Task** | **Notes** |
| Observe the person negotiating steps with painted edges- does it improve their confidence? |  |
| Put an object on the side of a table and observe how the person looks for it |
| Observe whether the person appears aware of objects and people outside of their central vision |
| Observe the person’s head position when watching television |
| Observe whether the person turns their head a lot to see other people in group situations |
| Bring an object of interest (quietly) from behind the person and observe when they first notice it. Repeat this for both sides |
| Does the person seem to struggle with glare from the computer screen? |
| Observe the person when they wear sunglasses, peaked cap or visor- does it help or hinder how they move around? |
| If the person is thought to be sensitive to light, reduce the lighting in brightly-lit areas by using less powerful bulbs, ensuring the bulb is covered by a shade or turning down the dimmer switch. (Make sure that this does not adversely affect other people!) |

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| **Task** | **Notes** |
| Is the person happier to go out when it is sunny/not sunny? | **Y:\Images, Logos & Videos\LOGOS\SeeAbility brand logos\SeeAbility Logos (2017 Post Brand Refresh)\Png\Logo_BLO_Med-BlackStrap.png** |
| Observe the person when sun light and glare are reduced by partially drawing the curtains or adjusting window blinds |
| Observe whether the person bows their head in darker areas as well as bright areas |
| Is the person happy to go out when it is light but not when it is dark? |
| Does the person hesitate when stepping into or out of shadows? |
| Experiment with good and poor levels of colour contrast between the person’s cup and the table |
| Experiment with coloured cups instead of clear glass |
| Observe the person going through doorways where the colour contrast is good/bad |
| Does the person see you better when you wear brightly-coloured clothes? |
| Does the person enjoy using different colours in painting and craft work? |
| Does the person enjoy choosing and wearing different coloured clothing? |

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| **Task** | **Notes** |
| Can the person name colours of objects or select an object of a specified colour? |  |
| Try passing objects to the person from both sides |
| Is the person consistently missing things on one side? (Left or Right?) |
| Can the person locate objects scattered on the table in front of them? |
| Does the person tend to see you better when you approach from one particular side? |
| Cover each eye in turn with a hand or cloth and note the person’s reaction. If this unsettles the person, you may be covering their “good eye” and they may be unable to see well with their other eye. This is especially true if the person does not object when the other eye is covered |

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**Taking Action**

Now that you have completed the FVA, you will need to decide what action to take.

People with learning disabilities are more likely to have serious sight problems than other people. A sight test is the only way of keeping track of someone’s eye health and vision. Everyone with a learning disability should have an eye test every 2 years, or more often if advised. Use the options below to find out what you should do next.

**I have completed all checklists and have no concerns about the person’s vision or eye health.**

In this instance, continue to support the person to have regular eye tests to monitor their ongoing eye health. Sharing the findings of your functional visual assessment will be very useful to the eye care practitioner so please make sure you show them the completed FVA.

**I have completed all checklists and I have some concerns which are described in the notes.**

You should now support the person to seek advice from an appropriate eye care professional. Remember to take this completed FVA with you to help them.

You can find our easy read factsheets on eye health, eye tests and much more on our website.

Here are the links to our resources that may be helpful following this Functional Vision Assessment:

**Telling the Optometrist about me**

[www.seeability.org/optom](http://www.seeability.org/optom)

**Feedback about my Eye Test**

[www.seeability.org/feedback-optom](http://www.seeability.org/feedback-optom)

**Having an Eye Test**

[www.seeability.org/having-an-eye-test](http://www.seeability.org/having-an-eye-test)

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**Testimonials**

**“I have used this twice and found it to be very helpful and comprehensive.” – Clare, Community Learning Disability Nurse**

**"It’s a really comprehensive, user friendly tool to assess a person's functional vision" – Karen, Clinical Nurse, Sensory Impairment Service**

**“Simple, Straightforward and Clear” – Carol, Support Worker**

SeeAbility provides extraordinary support and champions better eye care for people with learning disabilities and autism, many of whom have sight loss.

If you require any guidance or support in completing this Functional Vision Assessment please contact us.

Additional copies can be downloaded from [www.seeability.org/fva](http://www.seeability.org/fva). The SeeAbility website which provides information and advice to:

* Eye care and vision professionals on the needs of people who have a learning disability.
* Those who support people who have a learning disability on the importance of eye care and vision.

[**www.seeability.org**](http://www.seeability.org)

Facebook: Facebook.com/RSB.seeability

Twitter: @seeability

Youtube: [www.youtube.com/SeeAbilityFilms](http://www.youtube.com/SeeAbilityFilms)

enquiries@seeability.org

01372 755000















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