ICOPE

INTEGRATED CARE FOR OLDER PEOPLE

Vision

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Contents

Introduction to the Guide

This Facilitator Guide is part of the material developed to support training programmes on the WHO Integrated Care for Older People (ICOPE) approach. This guide serves as a roadmap for trainers and facilitators, helping them navigate through the session on the vision capacity, while ensuring that key topics are covered and participants are engaged. It includes tips, potential challenges and suggested ways to handle different situations that may arise during the session.

Session structure

This Facilitator Guide is organized around four core facilitation actions that you will use throughout the session. These actions are represented by icons and indicate how you should guide participants through the content.

You will see these actions repeated across all slides and modules, providing a consistent structure for facilitation.

Show: The slides

This indicates the slide you should present from the slide deck. When you see the Show, display the corresponding slide to participants.

Say: What you explain

This provides a suggested narrative outline for you to explain the slide content. The text is intended as guidance rather than a fixed script. You may adapt the wording to suit your facilitation style, experience and the needs of your participants, while keeping the key messages intact.

Ask: Questions to prompt dialogue

This prompts you to ask questions and encourage dialogue with and among participants.

The discussion associated with these questions should generally take 2 to 5 minutes. However, you should use your best judgment to decide how much time to dedicate to such interactions, considering factors such as participant engagement, availability of time, and/or relevance of the topic.

Do: Actions to facilitate learning

This prompts you to carry out an action, such as guiding an activity, managing group interaction or providing instructions to participants.

Keep in mind that this Facilitator Guide is only a roadmap. You are expected to apply your voice and experience to make this tool work for you. As explained, the ‘Say’ sections are simply indications; you can use them as a script when you feel the need to, but you can and

should adapt them to suit your natural training style. Add your personal touch and personality to every training, while being careful to stick to the session objectives.

A key component of successful face-to-face training is establishing trust and rapport with your learners. Use your good judgement to assess the attitude and cultural sensitivities of the people in your workshop. Adapt your training techniques and approach accordingly.

You are going to be great at conducting this training.

Vision

Do:

- *Formal welcome*
- *Introduction of the facilitator*

Show: Slide 1

Say:

Welcome to the module on Vision.

Today, we will focus on a vital aspect of intrinsic capacity: vision. In this module, we will discuss the importance of vision in maintaining mobility and safe interaction with others and the environment.

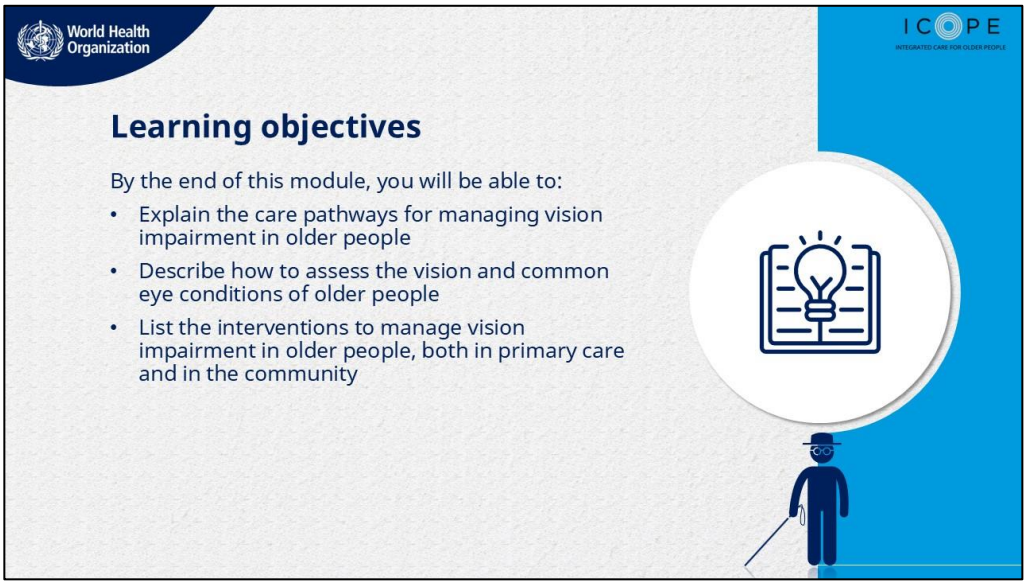
The session will take approximately 15 minutes.

You will find more details on this topic in Chapter 8 of the ICOPE handbook.

Let us get started!

Learning objectives

Show: Slide 2



Say:

Let us look at the learning objectives for this module. By the end of our session, you will be able to:

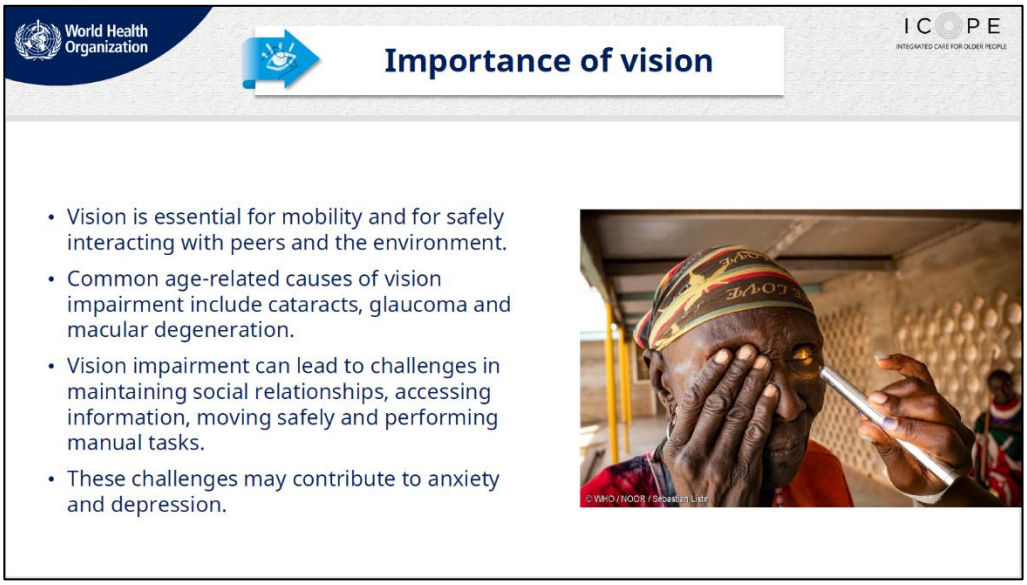
- Explain the care pathways for managing vision impairment in older people.
- Describe how to assess the vision and common eye conditions of older people.
- List the interventions to manage vision impairment in older people, both in primary care and in the community.

Ask:

Let us start with a question: How do you think vision impacts our daily lives as we age?

Importance of vision in ageing

Show: Slide 3



Say:

Vision is critical not just for mobility, but also for safe interactions with our peers and the environment.

As we grow older, conditions like cataracts, glaucoma and macular degeneration become more common and can lead to vision impairment. This impairment can cause significant difficulties in maintaining social relationships, accessing information, moving safely and performing manual tasks. These challenges often result in increased anxiety and depression and may lead to serious adverse events, such as falls.

Today, we will explore these issues and discuss how to manage and support vision health in older people effectively.

Care pathway to manage vision impairment

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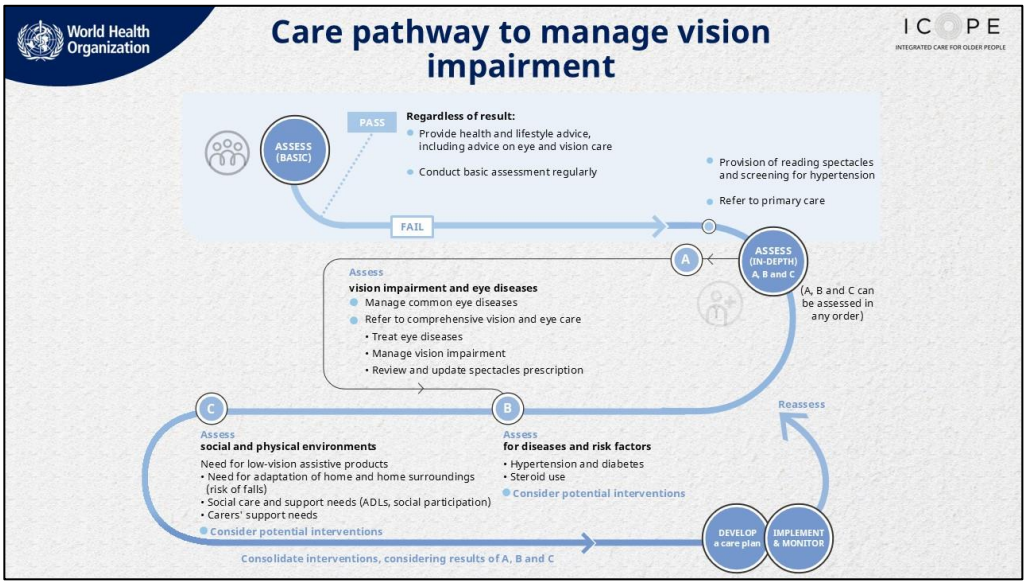


Say:

Let us walk through the care pathway to manage vision impairment.

The ICOPE basic assessment can lead to the identification of individuals experiencing vision difficulties.

If vision impairment is suspected, the next step is an in-depth assessment, involving a comprehensive evaluation of both visual function and any underlying eye diseases. It may require a referral to an eye care specialist for diagnostic testing and a clinical examination.

The ICOPE care pathway for vision impairment also addresses diseases and risk factors that may contribute to or complicate this condition. Chronic diseases, such as diabetes or hypertension, should be evaluated as they may need coordinated management to prevent further deterioration.

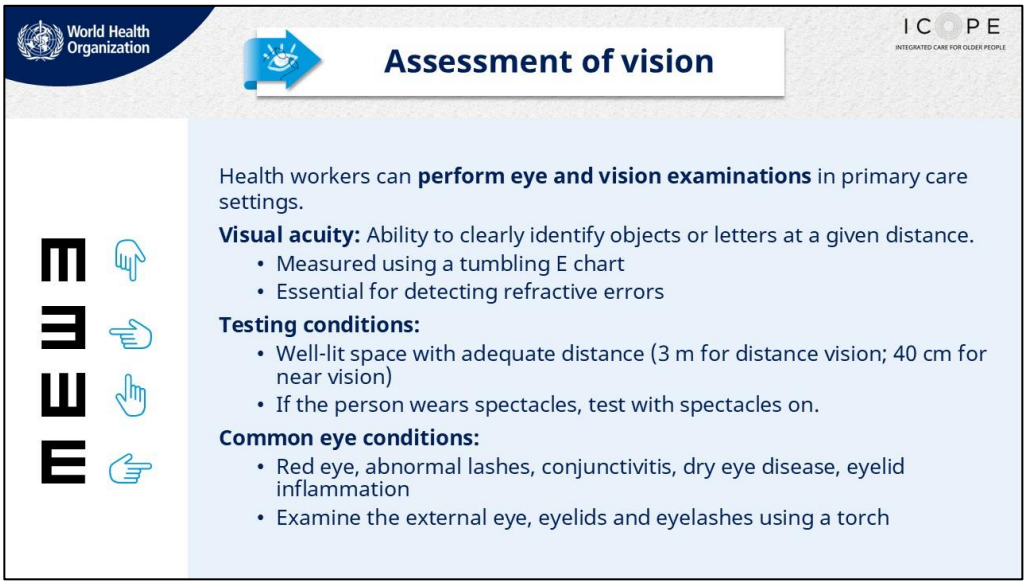
It is important to also consider the social and physical environment when addressing vision impairment. Assessing factors such as lighting, mobility aids and social support can help tailor interventions that improve safety and independence.

Once all these assessments -aligned with the ICOPE generic care pathway- are complete, the focus shifts to developing a personalized care plan.

After the care plan is agreed upon, we can proceed with implementing and monitoring the interventions. Ongoing follow-up ensures that the care plan remains effective and responsive to any changes in the individual's condition or circumstances.

Assessment of vision

Show: Slide 5



Say:

Health workers in primary care can conduct a simple but effective assessment of vision.

Visual acuity should be measured using a tumbling E chart to check how clearly a person can identify objects or letters at set distances. For this purpose, ensure the area is well-lit, maintain the correct testing distances (i.e., 3 metres for distance vision and 40 centimetres for near vision). If the person wears spectacles, test with them on, as we are not interested at the deficit per se but at the capacity of the individual after eventual correction. This may allow to eventually identify issues in the assistive products used for compensating the impairment.

Using a torch, health workers can also examine the external eye, eyelids and eyelashes for common conditions such as red eye, abnormal lashes, conjunctivitis, dry eye disease and eyelid inflammation. These basic examinations help detect refractive errors and identify eye problems early, whether services are provided in fixed facilities or mobile primary eye care units.

Advice and community-based care

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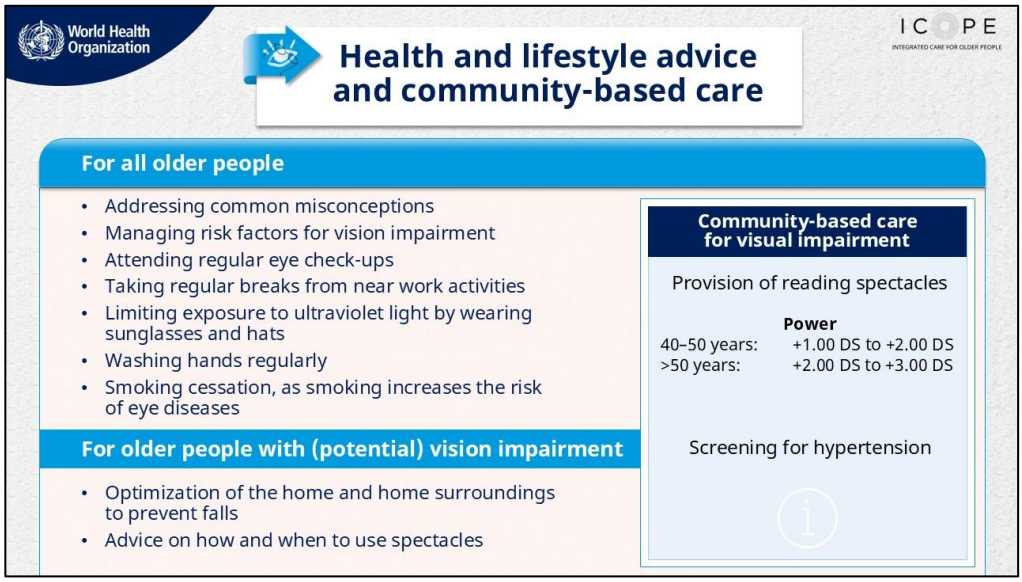

Say:

Older people need to receive general advice that emphasizes the importance of awareness and prevention.

We need to address common misconceptions regarding vision loss as an inevitable part of aging. It is important to reinforce that many causes of vision impairment are indeed preventable or treatable.

Key preventive measures include:

- Managing risk factors such as diabetes and hypertension, which can negatively affect eye health
- Attending regular eye check-ups, which are vital for the early detection of conditions like cataracts and glaucoma
- Taking breaks from near work, such as reading or using screens, to reduce eye strain
- Protecting the eyes from ultraviolet light exposure by wearing sunglasses and hats
- Maintaining hygiene, such as regular handwashing, to prevent infections
- Quitting smoking, as smoking is a known risk factor for several eye diseases

For those who are already experiencing or are at risk of vision impairment, it is crucial to optimize the home environment to reduce fall risks. This can include improving lighting, removing tripping hazards and using contrasting colours to enhance visibility. Guidance on the appropriate use of spectacles, which can significantly improve vision, should also be provided.

Community health workers can play an essential role. For example, they may help the person access appropriate reading spectacles. Generally, a person aged 40 to 50 may require lenses ranging from +1.00 to +2.00 dioptres, while those over 50 may need lenses

between +2.00 and +3.00 dioptres. Or, they may remind the importance of screening for hypertension, as this condition can silently damage vision over time if left unmanaged.

Management of vision impairment

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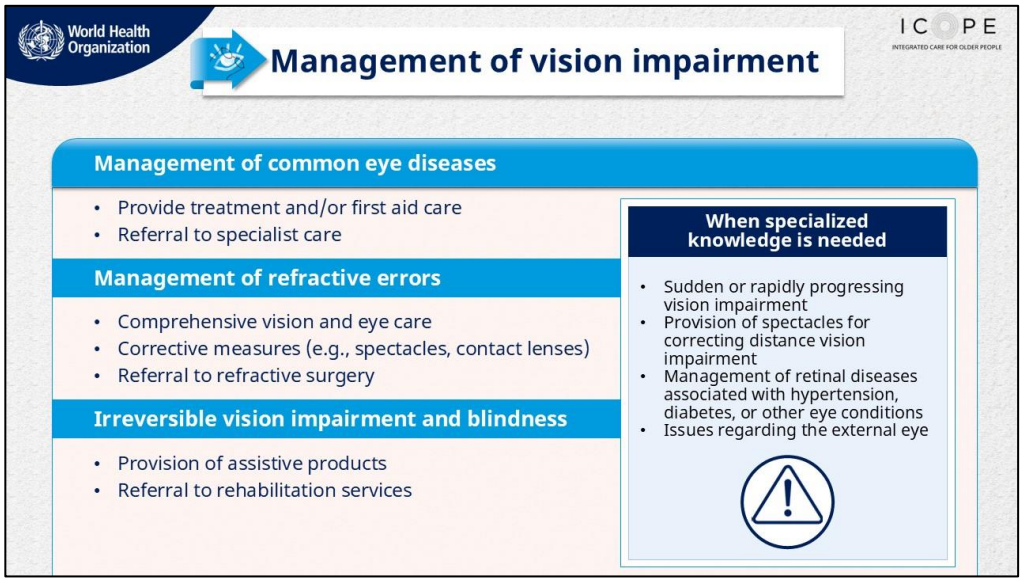

Say:

Let us discuss the management of vision impairment, looking at three main areas of work:

1. **Management of common eye diseases:** It is important to recognize and treat common eye conditions such as infections, cataracts, or glaucoma. The first step is to provide treatment or first aid care when appropriate. It is possible that many cases will require referral to specialist care, especially when the condition is beyond the scope of primary or community-level services. In such situations, referral should be actively recommended and facilitated to ensure timely access to appropriate expertise.
2. **Management of refractive errors:** Refractive errors (e.g., near-sightedness, farsightedness and astigmatism) are among the most common and easily correctable causes of vision impairment. It requires a comprehensive vision and eye care, including corrective measures such as spectacles or contact lenses. In some cases, referral for refractive surgery may be appropriate.
3. **Irreversible vision impairment and blindness:** For individuals whose vision loss cannot be reversed, the focus shifts to maximizing independence and quality of life. This includes the provision of assistive products (e.g., magnifiers, talking devices or mobility aids) and referral to rehabilitation services that can support daily functioning and social participation.

There are also specific situations when advanced expertise is required. These include:

- Sudden or rapidly progressing vision loss, which may signal a medical emergency

- Provision of spectacles for distance vision, which may require precise assessment
- Management of retinal diseases linked to systemic conditions like hypertension or diabetes
- External eye issues, such as trauma or severe inflammation

Interventions for disease and risk factors

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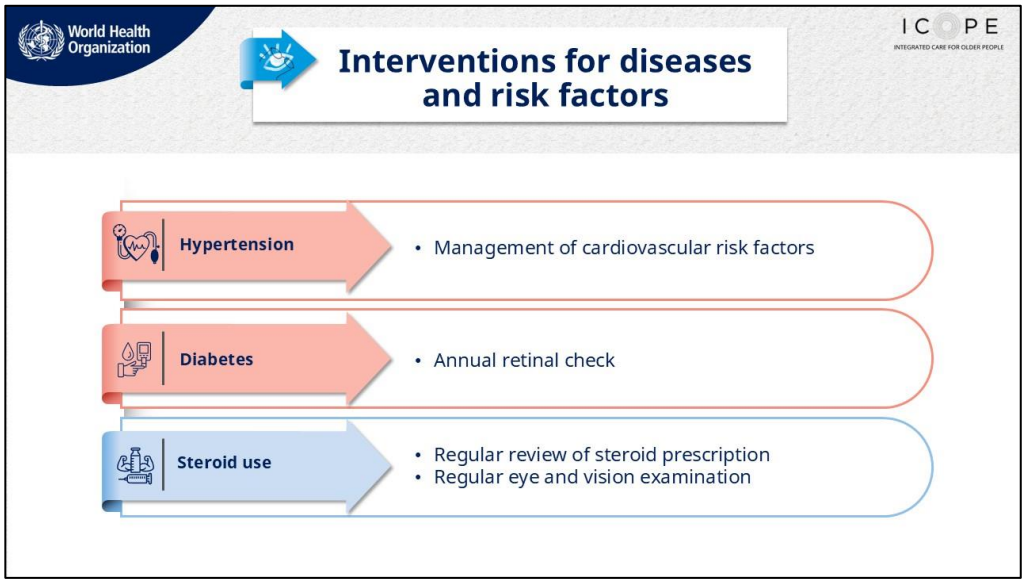

Say:

Next, let us discuss how to assess and manage diseases and risk factors that can impact vision.

Hypertension is an important risk factor for retinal diseases and glaucoma. It is crucial to manage cardiovascular risk factors in these individuals.

Diabetes requires special attention as it can lead to diabetic retinopathy. Therefore, a person with diabetes should have an evaluation by an eye care specialist every year.

Steroid use can also affect vision. Long-term steroid therapy can increase intraocular pressure or lead to cataracts, potentially resulting in vision impairment. Anyone on long-term steroid therapy should have regular eye examinations and eye pressure checks to monitor and manage these risks effectively.

By addressing these conditions, we can help prevent further vision impairment and ensure better overall eye health.

Interventions for the social and physical environment

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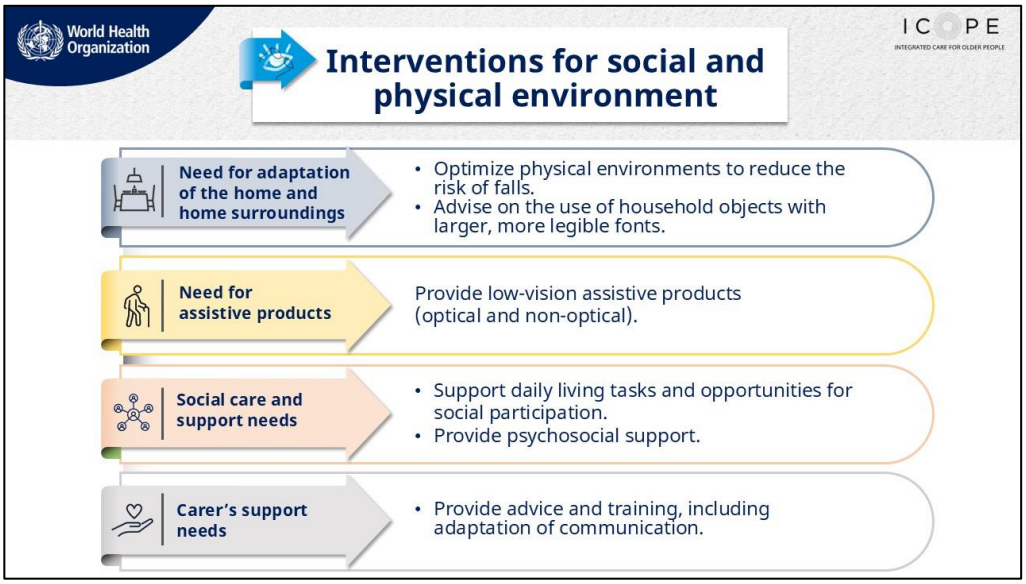

Say:

This slide presents interventions to support older persons with vision impairment by focusing on their physical and social environment.

First, home adaptations are essential to reduce the risk of falls and injuries, which can be achieved by improving lighting, removing tripping hazards and using household items with larger fonts for easier handling.

Assistive products, including optical aids (e.g., magnifiers) and non-optical tools (e.g., talking clocks), can significantly enhance independence and navigation.

It is also important to focus on social care and support, addressing the risk of isolation by aiding daily tasks, fostering social engagement and providing psychosocial support for emotional challenges.

Lastly, supporting carers is crucial. They need training and resources to communicate and adapt care practices for those they assist effectively.

Summary

Show: Slide 9

Do:

Go through the slides and recap the points discussed during the session.

Say:

To summarize this session, we have focused on the assessment and management of vision impairment in older people and the important role this plays in maintaining functional ability and independence.

We have seen that most vision impairment and blindness can be prevented through early detection and timely management of eye conditions. In many cases, loss of near or distance vision can be effectively corrected with spectacles. When vision impairment cannot be fully corrected, assistive products such as magnifiers and white canes play a key role in supporting safe mobility and daily functioning.

Finally, we highlighted the importance of environmental modifications, such as improved lighting, to enhance functional ability and reduce the risk of falls.

Together, these actions contribute to safer, more inclusive environments and improved quality of life for older people with vision impairment.

References

Show: Slide 10

Say:

Here are some useful links and citations for your reference. Thank you for your time and participation.