

WELSH HEALTH CIRCULAR



Llywodraeth Cymru
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Sender:

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Enclosure(s): Certification of Vision Impairment Wales (CVIW) Form and Explanatory Note



Llywodraeth Cymru
Welsh Government



The ROYAL COLLEGE of
OPHTHALMOLOGISTS

16 September 2016

The Certification of Vision Impairment Wales (CVIW) – A new process

When a person's sight loss reaches certain levels they are entitled, if consenting, to be certified as severely sight impaired (SSI) or sight impaired (SI) by a Consultant Ophthalmologist. Certification should be seen as an opportunity for the patient to access support and services and not an end point. Certification of Visual Impairment (CVI) became an NHS outcome measure in Wales in 2015.

The aims of certification are:

1. To act as a mechanism of referral to the person's resident local authority so that their name can be added to the register for assessment and support
2. To provide epidemiological information about the causes of sight loss in Wales: this information now feeds into the NHS outcomes framework.

It is important that the new process is embedded into hospital eye services to ensure it is successful in achieving these aims.

A multi-disciplinary team has been working to improve the process which will be launched from 16th September 2016.

There are three main changes:

1. The form has been shortened, collecting only essential information, making it easier and quicker to complete
2. The new information leaflet, compiled by the voluntary sector in Wales, accompanies the CVI form, ensuring that everyone being offered certification is better informed about the process and what support and services are available.
3. Consent for agreement to be registered and consent to have information made available for epidemiological research have been separated. Previously, if a person did not consent to either part of the process the entire certification was



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abandoned leading to a loss of referral to the local authority and loss of the information that can help with service planning.

We encourage all eye care staff to familiarise themselves with the new form and explanatory notes, which are attached.

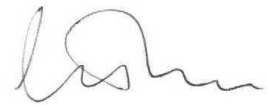
Please use this as an excellent opportunity to review the systems within your department to ensure that all members of staff are aware of the changes so that every eligible patient is offered certification and is supported in the decision.

Yours sincerely



Dr Frank Atherton

Prif Swyddog Meddygol/Cyfarwyddwr Meddygol, GIG Cymru
Chief Medical Officer/Medical Director NHS Wales



Caroline MacEwen FRCOphth

President
The Royal College of Ophthalmologists

Certification of a person as Sight Impaired (partially sighted)
or Severely Sight Impaired (blind) – Wales

Part 1: Certificate of Vision Impairment

Contact details

Title

Surname

First and middle name(s)
(identify preferred name)

Address
(including postcode)

Date of Birth

Gender

Male

Female

Daytime telephone

Mobile

Email

Preferred format of
written communication

Large print

Email

Braille

Recorded

Other

Preferred language

English

Welsh

Certification of a person as Sight Impaired (partially sighted) or Severely Sight Impaired (blind) – Wales

To be completed by the Ophthalmologist (tick one)

- I consider this person is sight impaired (partially sighted)
- I consider this person is severely sight impaired (blind)
- An information pack has been given to the person

Signed Date

Name (printed)

Hospital address

To be completed by the patient or representative

Signed Date

My name is

- I am the patient
- I am the patient's representative

Consent to share information

We need accurate information so that we can help you and others.

You do not have to consent to your information being shared. You can choose to share your information with none, one or more of the organisations listed below. If you do give your consent then you are free to withdraw this at a later stage by writing to your local health board. We will not share your information with anyone else not listed below.

You consent to share (tick as appropriate):

- A.** All your information with your GP, your health board and the Low Vision Service Wales. This information is used to offer you services which you may find helpful.
- B.** All your information with the Certifications Office, the Department of Health and the Welsh Government. This information is used for research and service planning purposes.
- C.** All your information with your local authority. This information is used to offer you the opportunity to be registered sight impaired or severely sight impaired. They will also offer to to assess your needs.

Signed

Date

My name is

I am the patient

I am the patient's representative

Certification of a person as Sight Impaired (partially sighted) or Severely Sight Impaired (blind) – Wales

Visual function

Best corrected visual acuity Right eye Left eye

Field of vision

Extensive loss of visual field (including hemianopia)

Diagnosis

Where there is more than one cause of vision impairment please tick the main cause.

| Retina | | Right eye | Left eye |
|--|----------------------|--------------------------|--------------------------|
| Age-related macular degeneration – Choroidal neovascularisation (wet) | H35.32 | <input type="checkbox"/> | <input type="checkbox"/> |
| Age-related macular degeneration – atrophic/geographic macular atrophy (dry) | H35.31 | <input type="checkbox"/> | <input type="checkbox"/> |
| Diabetic retinopathy | E10.3 – E14.3 H36.0 | <input type="checkbox"/> | <input type="checkbox"/> |
| Diabetic maculopathy | H.36.0A | <input type="checkbox"/> | <input type="checkbox"/> |
| Hereditary retinal dystrophy | H.35.5 | <input type="checkbox"/> | <input type="checkbox"/> |
| Retinal vascular occlusions | H34 | <input type="checkbox"/> | <input type="checkbox"/> |
| Other retinal: please specify | <input type="text"/> | | |

| Glaucoma | | Right eye | Left eye |
|--------------------------------|----------------------|--------------------------|--------------------------|
| Primary open angle | H40.1 | <input type="checkbox"/> | <input type="checkbox"/> |
| Primary angle closure | H40.2 | <input type="checkbox"/> | <input type="checkbox"/> |
| Secondary | H40.5 | <input type="checkbox"/> | <input type="checkbox"/> |
| Other glaucoma: please specify | <input type="text"/> | | |

| Globe | | Right eye | Left eye |
|---------------------|-------|--------------------------|--------------------------|
| Degenerative myopia | H44.2 | <input type="checkbox"/> | <input type="checkbox"/> |

| Neurological | | Right eye | Left eye |
|-------------------------|-------|--------------------------|--------------------------|
| Optic atrophy | H47.2 | <input type="checkbox"/> | <input type="checkbox"/> |
| Visual cortex disorder | H47.6 | <input type="checkbox"/> | <input type="checkbox"/> |
| Cerebrovascular disease | | <input type="checkbox"/> | <input type="checkbox"/> |

Certification of a person as Sight Impaired (partially sighted) or Severely Sight Impaired (blind) – Wales

| Choroid | | Right eye | Left eye |
|------------------------|-------|--------------------------|--------------------------|
| Chorioretinitis | H30.9 | <input type="checkbox"/> | <input type="checkbox"/> |
| Choroidal degeneration | H31.1 | <input type="checkbox"/> | <input type="checkbox"/> |

| Lens | | Right eye | Left eye |
|--------------------------------|-------|--------------------------|--------------------------|
| Cataract (excludes congenital) | H25.9 | <input type="checkbox"/> | <input type="checkbox"/> |

| Cornea | | Right eye | Left eye |
|-----------------------------|-----|--------------------------|--------------------------|
| Corneal scars and opacities | H17 | <input type="checkbox"/> | <input type="checkbox"/> |
| Keratitis | H16 | <input type="checkbox"/> | <input type="checkbox"/> |

| Paediatric | | Right eye | Left eye |
|---|----------------------|--------------------------|--------------------------|
| Retinopathy of prematurity | H35.1 | <input type="checkbox"/> | <input type="checkbox"/> |
| Congenital CNS malformations | Q00-Q07 | <input type="checkbox"/> | <input type="checkbox"/> |
| Congenital eye malformations | Q10-Q15 | <input type="checkbox"/> | <input type="checkbox"/> |
| Congenital: please specify syndrome or nature of the malformation | <input type="text"/> | | |

| Neoplasia | | Right eye | Left eye |
|---------------------------------|----------------------|--------------------------|--------------------------|
| Eye | C69 | <input type="checkbox"/> | <input type="checkbox"/> |
| Brain & CNS | C71-C72 | <input type="checkbox"/> | <input type="checkbox"/> |
| Other neoplasia: please specify | <input type="text"/> | | |

Diagnosis not covered in any of the above – please specify, including ICD10 code (where known)

Additional notes:

Please note that this is not intended to be a comprehensive list of all possible diagnoses. It does include all but the rare causes of reduced vision abstracted from the 2001 BD8 part 5 returns. The codes above are ICD10.

Additional information for support

Do you:

- Live on your own?
 Have problems with your hearing?

If you are a child, do you or your parents:

- Want information about schools, education or training?

Ethnic group

Choose one option that best describes your ethnic group or background

White

1. Welsh / English / Scottish / Northern Irish / British
 2. Irish
 3. Gypsy or Irish Traveller
 4. Any other White background, **please describe**

Mixed / Multiple ethnic groups

5. White and Black Caribbean
 6. White and Black African
 7. White and Asian
 8. Any other Mixed / Multiple ethnic background, **please describe**

Asian / Asian British

9. Indian
 10. Pakistani
 11. Bangladeshi
 12. Chinese
 13. Any other Asian background, **please describe**

Black / African / Caribbean / Black British

14. African
 15. Caribbean
 16. Any other Black / African / Caribbean background, **please describe**

Other ethnic group

17. Arab
 18. Any other ethnic group, **please describe**

Patient Information Sheet (To be given to the patient)

This Certificate of Vision Impairment (CVI) has three main functions:

1. It qualifies you to be registered with your local authority/ social services trust as sight impaired (partially sighted) or severely sight impaired (blind).
2. It lets your local authority/social services trust know about your sight loss. They have a duty to contact you to offer registration, and to see if you need help with day-to-day tasks.
3. The CVI records important information about the cause of your sight loss. It helps the NHS to identify any trends in certain eye conditions and helps with planning services.

Certification and registration

Once you have been certified as either sight impaired (partially sighted) or severely sight impaired (blind) you are able to be registered with the local authority. If you have decided that the local authority can receive your details they will contact you to talk about an assessment of your needs. The assessment will enable local authorities to find out if they can help you to live independently. They will also talk to you about registration.

The advantages of registration

Local authorities have a duty to establish and maintain sight loss registers. Registration will help your local authority to understand the needs of its local population which will help them plan services for people with sensory loss.

Registration is often a positive step towards getting help to stay as independent as possible. It will also be easier for you to prove to service providers, employers, schools, colleges, or other people what your level of sight is. Registration will assist you, and anyone caring for you to become eligible for certain entitlements, including benefits.

Information for research

The form allows for the medical information about your eye condition to be sent to the Certifications Office for medical research. The Certifications Office will gather medical information and collate records of the incidence of eye conditions. This information is important as it can lead to medical developments in the future. It also provides evidence of what eye conditions are affecting people so that NHS Wales eye services can be designed to meet patients' need.

Things to remember

Being certified as severely sight impaired does not necessarily mean that you are totally without sight or will lose all of your sight in the future.

1. You do not have to be registered by a local authority if you do not want to be registered; being registered is your individual choice.
2. You can be assessed for help by a local authority without the need to be registered.
3. You can withdraw your consent to be registered at any time.
4. You may be entitled to receive benefits if you are registered by the local authority. They can give you more information about this.

Driving

As a driver with sight loss you must inform the DVLA of this at the earliest opportunity. Whilst the DVLA will consider each case on an individual basis it is likely that if you have been given this information you should not continue to drive.

If you decide to keep driving without informing the DVLA, you could face some very serious consequences including a fine of up to £1,000. You will also be putting yourself and others at risk.

For more information please contact the DVLA at:

- Drivers Medical Branch, DVLA, Swansea, SA99 1TU
- Telephone 0300 790 6806

Email eftd@dvla.gsi.gov.uk



Llywodraeth Cymru
Welsh Government

Certificate of Vision Impairment Wales

Explanatory Notes for Consultant Ophthalmologists and
Hospital Eye Clinic Staff

Prepared by the Welsh Government

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Status of the form

1. The form Certificate of Vision Impairment Wales (CVIW) replaces the use of form CVI 2003, in Wales.

Background

2. The CVI process was recently revised by the Welsh Government with input from a range of key stakeholders including representatives of: The Royal College of Ophthalmologists; Aneurin Bevan University Health Board; the Wales Optometric Postgraduate Education Centre; local authority social care; specialist rehabilitation workers; Certifications Office at Moorfields Eye Hospital, London; Optometry Wales; Low Vision Service Wales; third sector organisations including Sight Cymru, RNIB, Guide Dogs UK and Vision Support.
3. Previously, the CVI form¹ interlinked certification of sight impairment with consent for referral to local authorities and consent for epidemiological information to be sent to the Certifications Office. This meant that individuals who did not consent to the entire process were not certified, resulting in lost opportunities for social care support and lost opportunities for analysis of epidemiological information.
4. The aim of the revision was to improve the process so that people could choose to consent to the whole or part of the process; to encourage local authorities to carry out more robust social care assessments of individuals and; facilitate more epidemiological data capture to aid research about the prevalence of eye disease in Wales. It is envisaged the new process will ultimately lead to improved provision of services for people who need support because of sight loss.

Purpose of the form

5. The CVIW form is the mechanism that enables:
 - a person to be certified as either sight impaired (partially sighted) or severely sight impaired (blind) and;
 - a referral to local authority for the purpose of assessment and/or registration and;
 - the recording of a standard range of diagnostic and other data that may be used for epidemiological analysis by the Certifications Office at Moorfields Eye Hospital, London on behalf of the Royal College of Ophthalmologists.

Registration and assessment by the local authority

6. Upon receipt of the completed CVIW form, social services departments of local authorities should contact the person to offer them registration on its registers² and offer to carry out an assessment of need³. Where need is established, the local authority will aim to meet the needs of that individual. The local authority may also

¹ CVI form 2003 (that replaced the BD8) was used in England and Wales.

² In accordance with section 18 Social Services and Wellbeing (Wales) Act 2014.

³ In accordance with section 19 Social Services and Wellbeing (Wales) Act 2014.

carry out a needs assessment of any carer in the same way.⁴ Access to social services is not dependant on registration, however, access to some benefits will be. The local authority will be able to help the individual with information about the benefits available to them.

Epidemiological data

7. The collection and analysis of the anonymised epidemiological data will be undertaken on behalf of the Royal College of Ophthalmologists by the Certifications office at Moorfields Eye Hospital. The data will be made available to the Welsh Government, local health boards and local authorities upon request to the Certifications Office. Evidence of prevalence can be used by the Welsh Government, local authorities and local health boards in its assessment of need of the resident population and consequently aid planning of future services to meet those needs.

CVI Wales form

8. The CVIW form is set out in three parts and enables the person being certified to have the choice of whom they wish to have their information shared with. Therefore a person may consent to share their information with the certifications office and/or with their local authority at the time of their certification.
9. CVIW Part 1: This section formally certifies a person's sight loss; requests patient consent to share information; and details visual function and diagnosis of eye disease. This section should be completed by the ophthalmologist in all cases with patient consent.
10. CVIW Part 2: This section enables information to be gathered to aid referral to local authorities and records ethnicity. This part can be completed by any member of eye care staff with patient consent.
11. Patient Information Sheet: This section contains a patient information page about the process. A copy of the patient information page must be given to the person being certified in all instances.

What should be explained to the person being certified?

11. In all cases, ophthalmologists and any other staff member involved in the certifications process should ensure that the following information is communicated to individuals:
 - A person being certified does not have to consent to referral to their local authority or for their information about their eye disease being shared with the Certifications Office at Moorfields Eye Hospital. It's entirely their choice.
 - A referral to local authority is advisable because it will mean that a person will be offered an assessment of their need and have their identified needs met. This may help the person to live independently.

⁴ In accordance with section 24 Social Services and Wellbeing (Wales) Act 2014.

- Carers of the person can have an assessment of their need and have their identified needs met.
- A person referred to their local authority does not have to be registered. Assessment of needs should happen as a separate process.
- Registration for sight impairment may help with access to certain benefits. Local authorities will provide information about this.
- The Certifications Office at Moorfields Eye Hospital can analyse the epidemiological information to evidence the incidence of eye conditions affecting people in Wales. This analysis (anonymised) can then be used by the Welsh Government, local health boards and local authorities to plan and tailor services to meet the needs of the population.
- A driver with sight loss must inform the DVLA at the earliest opportunity or they will risk a £1,000 fine.

Advice on completing the form

12. The patient should be actively involved in completing the form.
13. If there are different causes in either eye, choose the cause in the last eye to become certifiably visually impaired. If there are different pathologies in the same eye, choose the cause that in your opinion contributes most to visual loss. If it is impossible to choose the main cause, indicate multiple pathologies.

Who should be certified severely sight impaired?⁵

14. People can be classified into three groups:

Group 1: People who are below 3/60 Snellen

- Certify as severely sight impaired: most people who have visual acuity below 3/60 Snellen.
- Do not certify as severely sight impaired: people who have visual acuity of 1/18 Snellen unless they also have considerable restriction of visual field.
- In many cases it is better to test the person's vision at one metre. 1/18 Snellen indicates a slightly better acuity than 3/60 Snellen. However, it may be better to specify 1/18 Snellen because the standard test types provide a line of letters which a person who has a full acuity should read at 18 metres.

Group 2: People who are 3/60 but below 6/60 Snellen

- Certify as severely sight impaired: people who have a very contracted field of vision.
- Do not certify as severely sight impaired: people who have a visual defect for a long time and who do not have a very contracted field of vision. For example, people who have congenital nystagmus, albinism, myopia and other conditions like these.

⁵ Section 64 (1) of the National Assistance Act 1948 previously defined severely sight impairment as "a person can be certified as severely sight impaired if they are "so blind as to be unable to perform any work for which eye sight is essential". The National Assistance Act 1948 has since been revoked in Wales as a result of the enactment of the Social Services and Wellbeing (Wales) Act 2014.

Group 3: People who are 6/60 Snellen or above

- Certify as severely sight impaired: people in this group who have a contracted field of vision especially if the contraction is in the lower part of the field.
- Do not certify as severely sight impaired: people who are suffering from homonymous or bitemporal hemianopia who still have central visual acuity 6/18 Snellen or better.

Other points to consider when considering certification as severely sight impaired

15. These points are important because it is more likely that you will certify a person in the following circumstances:
- How recently the person's eyesight has failed? A person whose eyesight has failed recently may find it more difficult to adapt than a person with same visual acuity whose eyesight failed a long time ago. This applies particularly to people who are in group 2 and 3 above.
 - How old the person was when their eyesight failed? An older person whose eyesight has failed recently may find it more difficult to adapt than a younger person with the same defect. This applies particularly to people in group 2 above.

Who should be certified sight impaired?

16. People who are certified as sight impaired are entitled to the same help from their local social services as those who are certified as severely sight impaired. However, they may not be eligible for certain social security benefits and tax concessions for people who are certified as severely sight impaired.
17. As a general guide, certify as sight impaired, people who have visual acuity of:
- 3/60 to 6/60 Snellen with full field.
 - up to 6/24 Snellen with moderate contraction of the field, opacities in media or aphakia
 - 6/18 Snellen or even better if they have a gross defect, for example hemianopia, or if there is a marked contraction of the visual field, for example in retinitis pigmentosa or glaucoma.

Other points to consider when considering certification as sight impaired

18. These points are important because it is more likely that you will certify a person in the following circumstances:
- How recently the person's eyesight has failed? A person whose eyesight has failed recently may find it more difficult to adapt than a person with same visual acuity whose eyesight failed a long time ago.

- How old the person was when their eyesight failed? An older person whose eyesight has failed recently may find it more difficult to adapt than a younger person with the same defect. This applies particularly to people in group 2 above.
- Does the person live alone or do they have a hearing impairment?

Diagnosis not covered (including ICD-10 code)

19. The International Classification of Diseases (ICD)-10 was endorsed by the forty-third World Health Assembly in May 1990 and came into use in World Health Organisation States as from 1994. The ICD has become the international standard diagnostic classification for all general epidemiological and many health management purposes. These include the analysis of the general health situation of population groups and monitoring of the incidence and prevalence of diseases and other health problems in relation to other variables such as the characteristics and circumstances of the individuals affected. More information about ICD-10 is available on the World Health Organization's website at: <http://www.who.int/en>

Who should receive a copy of the completed CVIW form?

20. A copy of the form should be sent to the agencies that the person has consented to share information with. See Annex 1. The consent to share information section is found on page 2 of the CVIW form.
21. The hospital eye service should keep the original completed form, signed by the consultant and the patient, for their records and a copy must also be given to the patient in a format that is in the most accessible format for them.⁶

Third sector support

22. In all cases ophthalmologists and other hospital eye care staff should use every opportunity to signpost people to local charities for support and advice and especially if a person has declined consent for referral to their local authority.
23. It is advised that hospital eye services work in collaboration with local third sector agencies to put together information packs to be given to individuals when their sight loss reaches certifiable level.

Enquiries

24. Any enquiries regarding the process and form should be made to:

Ophthalmic and Audiology Policy Branch
The Welsh Government
4th Floor
Cathays Park
Cardiff
CF10 3NQ

⁶ The All Wales Standards for Accessible Communication and Information for People with Sensory Loss (published July 2013 by NHS Wales) can be found at: <http://gov.wales/topics/health/publications/health/guidance/standards/?lang=en>

Annex 1

1. Local authority means the local authority responsible for the area the person is resident.
2. The Certifications Office: clinics should send a stapled copy of the CVIW form to:
Royal College of Ophthalmologists,
c/o Certifications Office
Moorfields Eye Hospital
City Road
London
EC1V 2PD
3. A copy of any completed form that has consent for information to be passed to the local authority should be sent to the local authority on the day of certification or as soon as possible thereafter. Any delay in sending the form to the local authority will mean a delay to help for the individual if they need it.
4. The Low Vision Service Wales: clinics should send a stapled copy of the CVIW form to:

Low Vision Service Wales
Teilo
Glangwili General Hospital
Dolgwili Road
Carmarthen
SA31 2AF

Scanned copies sent from a secure email address may be sent to:
Low.vision@wales.nhs.uk
5. Clinics may wish to send packages of forms monthly or quarterly, depending on usage. Please ensure the package is clearly marked with the year to which the forms relate.