Introduction

- Visual impairment (VI) occurs to 70% of patients following stroke. Stroke may result in defects such as visual field loss, ocular motor defects due to muscle and/or nerve damage which may in turn cause diplopia, and visual neglect (lack of awareness of one side of the body or space).
- Rowe (2010) found that 45% of stroke services across the UK did not provide any formal vision screening for their patients.
- There is currently no information available regarding the current provision for vision screening services across Wales.
- Therefore the aim of this pilot study was to assess the vision screening (VS) services available for stroke patients in Wales. This information is essential if services to detect VI and to provide appropriate treatment/rehabilitation to maximise quality of life are to be improved.

Method

- A survey was set up using the Bristol Online Survey tool and a link was sent for circulation to members of: Welsh Stroke Special Interest Group, Welsh Stroke Association for Stroke Physicians, Occupational Therapists, British and Irish Orthoptist Society, Welsh Stroke Alliance and Stroke Association Wales.
- An interview with the Stroke Lead Executive was also requested to discuss the VS in their Health Board (HB).

Results

- Sixty-one survey responses were received, which included all the HBs except one (Fig 1).
- The majority of respondents worked in hospital (44.4%) or in a specialist Stroke Unit (31.1%) with the remaining working in the community (24.5%) (Fig 2 & Table 1).
- The role of the respondents is shown in Figure 3.
- All HBs aimed to provide some form of VS and the tests included varied across HBs.
- The VS was primarily undertaken by Occupational Therapists (41.5%) and Orthoptists (24.4%) (Table 1).
- Respondents were involved in screening for cognitive impairment, mobility difficulties, and vision problems (Table 2).
- The tests included in the VS varied (Table 3). One HB assessed visual fields whilst another used VS assessment forms to ensure that all relevant aspects of vision are assessed.
- 67.2% of respondents received information about the visual status of patients following stroke and 60.7% reported inter-discipline communication was effective.
- The role of Orthoptists in vision assessment & management was not understood by 44.3% of respondents.

Discussion

This pilot study has uncovered existing good practices which could be extended to all HBs.

- There were a number of free text comments and suggestions to improve services.
- - Introduction of uniform VS protocol to be used across all HBs.
- - The use of a ‘Stroke Passport’ that can be taken with patient from hospital into the community (as used in Cwm Taf HB).
- - Database of volunteer Stroke survivors willing to give advice to stroke sufferers.

Conclusion

- The current VS provision for stroke patients varies across Wales.
- All HBs who responded provide some form of visual assessment for all stroke patients admitted to their care.
- The majority of screening is carried out by Occupational Therapists and Orthoptists.
- There is variation between HBs both in terms of who is responsible all stroke patients admitted to their care.

References

- RNIB (2011) Sight Loss UK

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