



SIGHT AND HEARING



A helpful guide to your care options and entitlements



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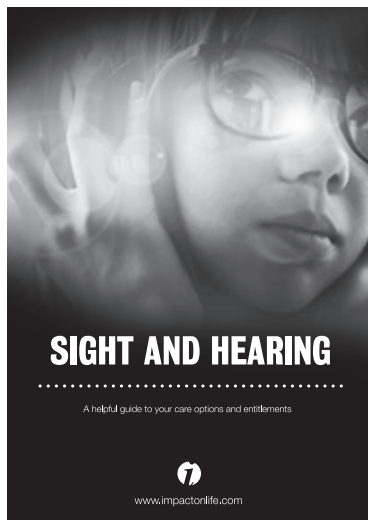
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Introduction

This booklet covers several topics of interest to people in relation to Sight and Eye Care and Hearing and Ear Care. It also includes addresses, telephone numbers and other contact details for organisation that can give further help and advice.



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Part One - Sight and Eye Care

What is an optometrist?

Optometrists are professionals who manage eye health care. They are known as eye care specialists. They have a wide range of knowledge on all aspects of eye health enabling them to perform eye health checks to determine the health of our eyes and what we can see. They are able to provide treatment/advice for various eye problems/diseases and spectacles/contact lenses to correct visual problems. If you have a red eye or pain in your eyes or any kind of eye problem your first port of call should be to your local Optometrist.

Common Eyesight Problems

The most common eyesight problems any of us experience are those that can be easily corrected by glasses or contact lenses, e.g. long-sightedness (hyperopia); short-sightedness (myopia); astigmatism and presbyopia.

Common problems that are not directly related to vision loss include dry eye, conjunctivitis and blepharitis (inflammation of the eyelids).

Children may experience problems that are associated with vision development and these are most commonly lazy eye (amblyopia) and squints or turns in the eye (strabismus)

Problems such as cataracts, glaucoma and macular degeneration are longer-term conditions that may cause vision loss.

By having regular check-ups and wearing glasses or contact lenses if you need them, you can prevent problems with your eyes in the future.

Sight Tests and why they Matter

Sight tests are the most reliable way of identifying potential problems with your eyes early on. For this reason, you are advised to visit your optician for a sight test at least once every two years; although you may be asked to attend more frequently depending on your age and medical history.

Sight tests are generally carried out by a qualified optometrist or an ophthalmic medical practitioner at a high street opticians or your local hospital's eye department. As a rule of thumb, they take between 20 and 30 minutes to complete and, as well as checking your vision and need for glasses or contact lenses, they also include checks for eye diseases - like glaucoma or cataracts - or general health problems, such as diabetes or high blood pressure, which can have a knock-on effect on your eyesight.

Generally, an eye test will involve you being asked to read a series of letters from a chart on display in front of you.

The letters become progressively smaller on each line of the chart. You may also be asked to look at a pattern of dots or lines, perhaps on a green or red background, and identify which looks clearer or sharper.

If you are taking a sight test for the first time in some while, you should wear your glasses or contact lenses (together with low vision aids if you use them) to the appointment. However, you should be advised when you make your appointment as to whether you need to take your contact lenses out prior to your sight test. This is sometimes necessary because contact lenses can affect the short-term shape of your eye and may alter your vision as a result.

At the end of the sight test, your optician should discuss the results with you and advise you of the best course of action.

If any problems that require further investigation or treatment are identified by your optician as a result of your sight test, they will be able to refer you to your local doctor or the appropriate hospital consultant ophthalmologist (specialist eye doctors who diagnose and treat eye disorders) for further treatment. It is also possible to arrange to be seen at a private eye clinic or hospital.

Opticians

It is not necessary to register with one particular optician in the way it is to register with a doctor, for example. These days, many high street companies provide an optician alongside other services. However, if you choose to return to the same optician, they will keep your records on file and many offer payment plans to enable you to spread the cost of glasses or contact lenses throughout the year.

You can discuss with your optician whether or not you need to pay for your sight test or are eligible to claim for NHS optical vouchers towards the cost of your glasses or contact lenses.

Getting a second opinion

If, after having consulted an optician, you would like a second opinion about your condition or treatment, you should ask your local doctor for a referral to another specialist, if they feel this is the appropriate course of action.

NHS Sight tests

As discussed, regular sight tests are important to check the health of your eyes. This is especially the case for children as, by identifying sight problems early on, they can be helped with potential learning and development problems.

Regular checks are also especially important if you are a driver or your eyesight may be affected by your occupation (e.g. a VDU operator). Individuals with medical conditions such as diabetes, glaucoma or high blood pressure need to be vigilant too.

You may be entitled to a free NHS sight test if you:

- are under 16, or aged 18 or under and still in full time education
- are aged 60 or over
- are registered as severely sight impaired / blind or sight-impaired / partially sighted
- have diabetes or glaucoma
- are aged 40 or over with a first degree relative (e.g. parent) with glaucoma, or you have been diagnosed as being at risk of glaucoma
- have been prescribed a complex lens
- are someone whose sight test is carried out through the hospital eye department as part of the management of your eye condition
- you're a prisoner on leave from prison
- you're eligible for an NHS complex lens voucher – your optometrist (optician) can advise you about your entitlement

You're also entitled to a free NHS sight test if you:

- receive Income Support
- receive Income-based Jobseeker's Allowance (not Contribution-based)
- receive Pension Credit Guarantee Credit
- receive Income-based Employment and Support Allowance
- are awarded Universal Credit
- are entitled to, or named on, a valid NHS tax credit exemption certificate
- you are named on a valid NHS certificate for full help with health costs (HC2)

People named on an NHS certificate for partial help with health costs (HC3) may also get help.

Making a complaint

If you have received goods or services from an optician using the services of an optometrist or a dispensing optician and they are registered with the General Optical Council, then you can make a complaint. In the first instance, you are advised to complain direct to the optician concerned as most issues can be amicably resolved. However, if you feel that your complaint needs to be further investigated, then you should put your complaint in writing to the Optical Consumer Complaints Service, (see Further Contacts and Useful Organisations section for contact details), which deals with concerns surrounding glasses or contact lenses that have been supplied during the last 12 months.

NHS Low Income Scheme

If you are eligible for help with NHS costs through the NHS Low Income Scheme, you may be able to claim some or all of the costs of sight tests, glasses and/or contact lenses for you, your partner and children. You can apply for help through the scheme by completing the HC1 form, available from your local Jobcentre Plus or NHS hospital.

HC3 holders should contact an optician to confirm any possible charges for private eye tests either at home or at an optical practice. This will depend on the amount of benefit entitlement already received.

You may be entitled to full help with health costs if you or your partner is receiving Income Support, Pension Credit Guaranteed Credit, Income-based Jobseeker's Allowance, Income-related Employment and Support Allowance, or if you are named on a Tax Credit NHS Exemption Certificate.



Getting Glasses or Contact Lenses

If you need glasses or contact lenses, a prescription will be given to you following your sight test - this will be valid for two years, and gives opticians the information they need about your vision in each eye to supply and fit glasses or contact lenses according to your individual needs.

All glasses and contact lenses are provided privately. However, some people are entitled to an NHS optical voucher to help towards the cost of buying new glasses or contact lenses, or repairing or replacing an existing pair of glasses that has been broken or lost.

You may be entitled to NHS optical vouchers if you are:

- under 16
- aged 18 or under and still in full- time education
- an adult on certain benefits
- named on a valid NHS exemption certificate
- are eligible for an NHS complex lens voucher (your ophthalmic practitioner will advise you on your entitlement)
- You are named on a valid NHS certificate for full help with health costs (HC2). People named on an NHS certificate for partial help with health costs (HC3) may also get help.

You can find out more about NHS optical vouchers on the NHS Choices website www.nhs.uk.

You may also want to obtain a copy of the HC12 leaflet, which outlines current NHS charges and entitlements.



Replacing glasses on the NHS

Children under 16 years of age are entitled to a free NHS optical voucher, which will help towards the cost of repairing or replacing damaged or lost glasses. Your optician will be able to give you further information about obtaining a voucher.

If you are aged 16 or over, you will only be entitled to help with repair or replacement costs if you have an illness that caused the loss or damage of your glasses or contact lenses. For example, if you have an illness that affects your balance or a condition which causes seizures, such as epilepsy, then your glasses may have been damaged as the result of a seizure or fall.

To qualify for help with repair costs or replacement glasses, your glasses or contact lenses cannot be covered by a warranty, insurance or any after-sales service.

If you think you might be eligible for replacement glasses or contact lenses, you should ask your optician for a GOS4 form, which - once completed - should be forwarded to your local Primary Care Trust (PCT) so that they can assess your claim. If your PCT agrees that you are entitled to help with replacement glasses, they will send you an NHS optical voucher to help you cover the costs.

Payment schemes

Some high street opticians offer a range of payment schemes towards glasses and contact lenses. For example, for a monthly fee of about £15, you may be able to receive 12 monthly-wear pairs of contact lenses each year, as well as two free replacement lenses, free sight tests and an annual contact lens check.

You should speak to your opticians about what payment plans and options they have in place to help you spread the costs of new glasses or contact lenses.

Dealing with serious eye problems

Under the NHS, a wide range of services exist to treat individuals with serious eye problems and these are supported by NHS consultant ophthalmologists and other eye care professionals. If you need to be referred for treatment, this can be arranged through your optometrist or doctor.

If you find you have a problem with your eyes and you need treatment and/or an operation, you can request to be treated at a private hospital or dedicated eye clinic. This can offer greater continuity of care as the same consultant who attended your diagnosis will usually treat you. People often choose private eye surgery because a greater range of artificial lenses and technologically advanced equipment may be available for your treatment when compared to the NHS. By specializing in eyes only, dedicated eye clinics aim to minimize exposure to MRSA and other hospital-acquired infections. Waiting lists are typically much shorter for private treatment.

There are almost 2 million people with significant eye loss in the UK. It is predicted that by 2050 this will increase dramatically to nearly 4 million.

Common serious eye problems

Listed below is information about some of the most common serious eye problems. If you are experiencing any problems with your sight, the RNIB have information about the causes, symptoms and treatment options for a wide range of sight conditions and diseases (see Further Contacts and Useful Organisations for details):

Age-related macular degeneration (AMD) - causes problems with your central vision, such as blurriness or even a blank patch. Early detection is one of the best ways to treat or manage the symptoms of AMD.

Macular hole - This is a small hole in the macula in the centre of the retina, the part of the eye responsible for our sharp, detailed central vision. A macular hole can lead to blurred and distorted vision. You may need an operation to help limit the sight problems a macular hole causes.

Cataracts - As we age, the lens inside our eye gradually changes and becomes less transparent. This misting or clouding is commonly known as a cataract. You may need a straightforward operation to remove the misty lens and replace it with an artificial lens.

Diabetes-related eye conditions - Diabetes can lead to a number of different eye conditions, including diabetic retinopathy. This is caused by fluctuating blood sugar levels, and affects the network of blood vessels supplying the retina. Diabetic retinopathy can be managed by laser treatment if it is detected early enough.

Importance of a healthy lifestyle

The Eyecare Trust has warned about the dangers to good eyesight that result from making poor lifestyle choices. They advise that to maintain good eyesight you need the following:

1. To eat healthily

Some foods can help protect your sight when eaten on a regular basis. These include fruit, vegetables and fish; in particular kiwi fruit, oranges and spinach. Just one portion of fish each week can help reduce the risk of developing age related macular degeneration. AMD is the leading cause of blindness in the UK.

2. To take regular exercise

Eyes need oxygen to stay healthy and comfortable aerobic exercise can increase supplies of oxygen to the optic nerve as well as lowering pressure in the eye. The Department of Health recommends 30 minutes exercise 5 days per week. For good eye health, this can include brisk walks, cycling and swimming.

3. To cut out smoking

Smokers are almost twice as likely to suffer AMD as non smokers. In addition they are also at risk of developing cataracts and impaired colour vision.

4. To lower alcohol consumption

Too much alcohol in the system can interfere with liver functions and reduce the production of glutathione, which prevents cell damage that can trigger the onset of cataract, glaucoma and diabetic retinopathy.

For more information, visit www.eyecaretrust.org.uk



Registered as Sight Impaired / Blind

Please note that the new term for being registered blind or partially sighted is 'severely sight impaired' or 'sight impaired' respectively. However, we have used both terms in this guide because many people are still unfamiliar with the new terms.

A hospital consultant ophthalmologist can certify that you are severely sight impaired/blind or sight impaired / partially sighted through the Certificate of Vision Impairment which, once completed, is sent to yourself, your GP and your local council.

This means that you could be entitled to help in a number of ways, including the Blue Badge parking scheme and a 50% discount on a colour TV licence (currently discounted to £73.50 per year). Some people who are registered as Severely Sight Impaired may also claim the higher rate of the mobility component of the Disability Living Allowance.

Independent living if you are blind or visually impaired

You may be able to access a wide range of services and equipment to enable you to live independently at home if you become blind or visually impaired. Here are just a few examples, aids to independent living include kitchen gadgets, specially adapted telephones and mobile phones, or computer and television screen magnifiers.

Much of the equipment on offer may be provided through the social services department of your local council. Alternatively, the NHS Hospital Eye Service can also prescribe a range of aids for people with partial sight, often free of charge.

If you are severely sight impaired or visually impaired, you are entitled to a health and social care assessment from your local council. This means that someone from social services (usually an occupational therapist) will assess your needs and help you access the equipment and services most suitable for you. You may also receive direct payments so that you can choose and buy equipment yourself instead of receiving it directly from social services.

Following this assessment, you may also be put in touch with a rehabilitation worker who can help you find new ways to manage the everyday tasks that you may previously have taken for granted. For example, they may encourage new ways for you to get around safely or communicate more easily (for example, by teaching you to touch type or use writing aids and communication software).

Commonly used gadgets are those that help blind or visually impaired people manage potentially dangerous household tasks - for example, these might include:

- devices that alert you when a pot of liquid begins to boil
- gadgets that make a sound when the pot or container you are pouring liquid into is almost full
- knives with an adjustable guide to help you cut slices of even thickness
- tactile watches and alarm clocks
- tactile flashing cards for learning
- safe and sanitary mug with sensors
- Braille E-Book

For advice and information about these products and where to buy them, you are advised to contact a charity such as the Royal National Institute of the Blind in the first instance.

To find out more about accessible technology products (e.g. computer screen readers or telephones with color contrasting touch pads), you might want to contact the British Computer Association of the Blind (see Further Contacts and Useful Organisations for details).



The Blue Badge Parking Scheme

If you are registered as blind then you automatically qualify for the Blue Badge Parking Scheme, which offers concessions for on-street parking and free use of parking meters and pay-and-display bays. You may also be exempt from the limits on parking times imposed on others and can park for up to three hours on single or double yellow lines, as long as your vehicle is not causing an obstruction. Although the scheme applies throughout the UK, there may be some variations from region to region.

To find out more, go to www.gov.uk or enquire with your local council for further details.

Eye care for disabled people

If you are disabled, then you may be entitled to a free NHS sight test and other vision-related services. If you are unable to visit an optician due to a physical or mental illness or disability, you may also be able to arrange for a sight test to be carried out at home.

Below you will find details of some of the most common sight care services:

Low vision aids

If you experience some loss of sight attending a low vision service will help you make the most of your remaining vision. Low Vision services supply devices and offer support and advice about using your eyesight. As well as devices such as spectacle and hand held magnifiers, telescopic devices and electronic viewing aids services can help by teaching you techniques to make the most of your vision. Optical devices (those that include lenses generally) can be loaned through the NHS and may be available through your Hospital Eye Service, local optometry practice or local society. Some social care teams also supply this type of equipment.

Electronic aids can be demonstrated by rehabilitation workers and skilled staff at local societies.

Some opticians provide LVAs privately but, of course, they will charge for these items.

Non-optical low-vision aids include everything from an anglepoise lamp, to bold-print books or liquid level indicators that beep to prevent you burning yourself when using hot water.

Your optician or family doctor will be able to advise you about local arrangements for the loan or purchase of LVAs.

Help from your local council

If, due to a loss of vision, you are finding it difficult to do things around the house, at school or at work, your local council may provide services to make life easier for you.

These services might include:

- social workers to support you and your family as you adjust to your vision loss
- training in how to get out independently
- help and advice concerning any health, education, rehabilitation or employment issues you may have
- equipment and alterations to your home
- machines for playing audio books
- training in the use of Braille or Moon (simplified raised print)

Rather than providing these services internally, some councils have an arrangement with a local voluntary organisation to provide support on their behalf.

Other sources of help

You may need professional help and training in order to make the most of your restricted vision. There are a number of organisations offering support to blind and partially sighted people - please see Further Contacts and Useful Organisations section.

Eye care for the over 40s

Even people who have always had perfect vision experience some deterioration in their eyesight as they get older. Therefore, it is important that you have regular sight tests.

You are entitled to a free NHS sight test if you are aged 60 or over. Also, people over the age of 40 qualify for free sight tests if they meet certain conditions, such as having a close relative with glaucoma.

Eye Care for Children

As mentioned earlier in this guide, the early detection of sight problems in children is thought to prevent ongoing problems in terms of learning and development.

If you are expecting a new baby, they will be screened for eye problems within a few weeks of birth, and then either shortly before or soon after they start school at the age of four. However, as this is not the case in all areas of the country, parents are advised to check with their local health authority. If you have any concerns in between these tests, or if there are members of your family with eye problems, you can talk to your doctor or arrange to have your child's sight tested by a local optometrist or eye doctor.



Sight tests for children

Older children are usually given the same sight tests as adults but there are special tests for younger children or older children from whom adult tests are not appropriate (using shapes instead of letter charts, for example).

Children under the age of 16 (or 19 if they are in full-time education) are entitled to free NHS sight tests.

If your child needs glasses

If your child has had their eyes tested and they need glasses, you will receive an NHS optical voucher towards the associated costs. Children can choose from a wide range of frames that are both practical and fashionable. Your optician will probably recommend choosing plastic lenses because these are more hard wearing and safer than glass lenses.

If your child loses or breaks their glasses, they are automatically covered for replacement or repair on the NHS. You will simply need to complete a GOS 4 form, which is available through your optician. You will be asked to make a statement about what has happened and you will then be given a voucher to cover the cost. If you go to a different optician to the one that originally supplied the glasses, you will need to take your child's latest prescription with you.

Children aged 16 or over are only entitled to help with repairing or replacing a pair of glasses if the loss or damage was caused by a disability.

Your optician can give you more information.

Children and contact lenses

Children can be fitted with contact lenses but it must be their choice, and they must also be able to demonstrate the ability to take the lenses in and out properly, as well as an understanding of how to look after them. Contact lenses that are not properly looked after and regularly checked can be associated with eye infections and other problems.



The UK Vision Strategy

The UK Vision Strategy is a ground-breaking VISION 2020 UK initiative, led by RNIB, to develop a unified plan for action on all issues relating to sight loss and eye health across the UK.

The Strategy was launched in April 2008 to address the aim of the World Health Assembly Vision 2020 resolution to reduce avoidable blindness by the year 2020 and to improve support and services for blind and partially sighted people.

Over 650 organisations and individuals have played a role in developing the Strategy. This includes people with sight loss, users of eye care services, eye health and social care professionals, statutory and voluntary organisations. The UK Governments have also given their support to the Strategy, which aims to:

- Improve the eye health of the people of the UK
- Eliminate avoidable sight loss and deliver excellent support to those with a sight problem
- Enhance the inclusion, participation and independence of blind and partially sighted people.

Laser Eye Surgery and the NHS

Laser eye surgery is available on the NHS for eye conditions that, without treatment, can lead to loss of vision. This includes problems such as diabetic retinopathy, wet macular degeneration and some specific diseases of the cornea, e.g. recurrent corneal erosions.

Laser surgery to correct refractive errors - e.g. long- or short-sightedness or astigmatism - is only available on a private basis. This is because other successful treatments, such as wearing glasses or contact lenses, are available.

Some NHS trusts run laser eye surgery clinics, but they usually charge a fee.

Laser refractive eye surgery

Although there are no official figures, it is believed that more than 15,000 people a year in the UK have laser refractive eye surgery to correct problems such as long and short-sightedness. Of these people, some 85% no longer need to wear contact lenses or glasses most of the time. People with low-grade near-sightedness tend to enjoy the best results.

Laser eye surgery is an appealing option for people who find wearing glasses or contact lenses inconvenient because of their job, lifestyle, sports or other leisure interests. Some people find they never properly adapt to wearing contact lenses and lack confidence in their appearance when wearing glasses. Others are prone to eye infections (perhaps because they aren't looking after their contact lenses properly) and find the daily care routine arduous.



Finding a clinic for laser eye surgery

If you decide to have laser eye surgery to correct a refractive error, you should speak to your optician first. They will be able to advise you about the procedure and recommend clinics in your area. The Royal College of Ophthalmologists say that only registered surgeons with specialist training should carry out laser surgery. It is important that you do your homework and only seek this treatment from an experienced specialist.

Not everyone is a suitable candidate for laser refractive eye surgery. Most clinics will require you to be over 21, in good general health, have healthy eyes, and have had a stable prescription for the past two or three years. There are some contra-indications to treatment, such as pregnancy, glaucoma and unstable diabetes.

What does laser eye surgery involve?

In laser eye surgery for refractive errors, a laser is used to alter the shape of the cornea, which changes the way the eye focuses light, and improves vision. The procedure is most successful in people with short-sightedness and may even correct vision completely. Laser surgery for diabetic retinopathy and wet macular degeneration involves a different technique, known as photocoagulation.

The laser targets blood vessels on the outer part of the retina, to stop them leaking fluid that damages the retina and sight.

Paying for laser eye surgery

Most reputable companies will offer you a free consultation to assess whether you are a suitable candidate for laser refractive eye surgery. This initial consultation should include an in-depth Eye Health Checks and many additional tests not carried out at a standard sight test.

You should also be informed about what after-care you can expect - including any eye drops that you will need to apply yourself - and when you will receive your follow-up appointments to assess the outcome of the surgery.

You should ask for a full outline of your treatment plan and costs in advance before you commit to the procedure, and you may find that the company you choose has a payment scheme in place to enable you to spread the costs of your surgery.

Benefit Entitlements - Sight

If you are severely sight impaired or partially sighted (or you care for someone with a visual impairment), you may be entitled to claim the following benefits:

- Housing Benefit
- Higher Rate of mobility Component
- Council Tax Benefit and/or Council Tax
- Local travel Schemes
- Help with telephone installation charges and line rental
- Disabled persons railcard
- Free postage on items marked Articles for the Blind

1. For people of working age:

- Personal Independence Payment (PIP) is a benefit that is meant to help you with the extra costs caused by illness or disability - including sight loss. It replaces Disability Living Allowance (DLA) for people aged 16 to 64.
- In October 2013, the Government replaced a number of existing means tested benefits with a single new benefit called Universal Credit. It will apply to you if you are on a low income and it does not matter whether you are in or out of work.
- Employment and Support Allowance (ESA) is for people of working age who are unable to work because of disability or illness.
- Incapacity Benefit and Income Support were the benefits paid to people unable to work as a result of illness or disability before 27 October 2008.
- You may be entitled to Tax Credits if you are on a low income: Working Tax Credit if you work, or Child Tax Credit if you have dependent children, or both. Tax Credits have been replaced with Universal Credit from October 2013.
- Disability Living Allowance – If you are aged 64 or under. This is only for existing claimants and has now been replaced by Personal Independence Payment. The only new applications considered for DLA are for those on behalf of children under 16.
- Working Tax Credit. Anyone can claim this but you must have a low income. You may be employed or self employed. You must be at least 16 years old and work at least 16 hours a week even if aged 60 or over.

2. For Older People:

- Attendance Allowance. This can help with extra costs such as taxi's, paying someone to help you with personal care or to read or reply to mail for you. You need to be over 65 to claim.
- Pension Credit helps you top up the money you earn if you have a relatively low income. You may even get it if you have some
- You can get free NHS sight tests if you are aged 60 or over.
- You can get a free TV license if you or someone you live with is 75 or over. And if you are not yet 75, you can still get a 50 per cent reduction in the price of your TV license if you or someone you live with is registered blind.

3. For Carer's

- Carer's Allowance. This is the main benefit to claim if you are caring for another person. It is not means-tested and does not depend on National Insurance contributions.
- Carer's Credit. Carer's Credit is a weekly National Insurance credit. Although not a benefit payment. It was introduced to help carers build up their qualifying years for the basic state pension. This means thousands more carers will be able to build up their basic state pension.

If you pay tax, if you're certified blind and are on a local authority register of blind persons, or if you live in Scotland or Northern Ireland and are unable to perform any work for which eyesight is essential, you can claim Blind Person's Allowance. This is an addition to the Personal Allowance and is a fixed amount that is set against your income. If you can't use up some or all of your allowance, you may be able to transfer it (see www.gov.uk for more information).

Naturally, your entitlements will vary according to your individual circumstances. RNIB publishes a useful series of factsheets about your rights to financial support (see Further Contacts and Useful Organisations section for contact details).



Financial Overview

Table of Charges and Entitlements

Sight tests		
NHS sight test	FREE	
NHS sight test at home	FREE	
Hospital eye department test	FREE	
Private sight test	Ask your optician for details	
Private sight test at home	Ask your optician for details	
NHS Vouchers for Glasses and Contact Lenses		
Optical vouchers – maximum value per pair of glasses or contact lenses		
Single vision	A	£39.10
	B	£59.30
	C	£86.90
	D	£196
Bifocal	E	£67.50
	F	£85.60
	G	£111.20
	H	£215.50
Hospital eye department	I	£200.80
Hospital eye department	J	£57
Complex lens – single vision		£14.60
Complex lens – bifocal		£37.40
Supplements to vouchers		
Where clinically necessary		Per lens
Prism	P Single Vision	£12.60
	P Bifocal	£15.40
Tint	T Single Vision	£4.40
	T Bifocal	£4.90
Photochromic	Single Vision	£4.40
	Other lenses	£4.90
Special frames		Up to £64.20

Please note that these figures may be subject to change in the future but as from March 2018 these figures are in the public domain.

Part Two - Hearing and Ear Care

Importance of a Healthy Lifestyle

As we age, our hearing can suffer through normal use or excessive noise in the workplace or at home. Because it happens gradually, often we're not aware of how bad it might be. If you're experiencing any of these problems you may have suffered some hearing loss:

- Do you complain people are mumbling?
- Do others tell you they have to repeat things before you hear them?
- Is it difficult to hear close conversations in noisy places like restaurants or pubs?
- Do you hear better with one person than a group?
- Is your television or music higher than others think necessary?
- Do you find conversations tiring because you need to concentrate?
- Do you struggle to hear telephone conversations?

Suffering with just one of these issues can mean some loss of hearing.



For more information visit Action on Hearing Loss (formerly RNID)

www.actiononhearingloss.org.uk

You can download their range of free, expert factsheets covering a range of topics, including Hearing aids, Tinnitus, Ear Health, Equipment and Benefits.

You can also take a short hearing test on the website, that may help you identify hearing loss. You can contact the Information line and speak to an advisor.

In 2035 it is expected that 15.6 million people will suffer hearing loss in comparison to the eleven million people who currently do so.

Common Hearing and Ear Problems

Hearing impairment has many causes but the most common are due to the effects of impaired circulation of the blood (vascular) or exposure to noise.

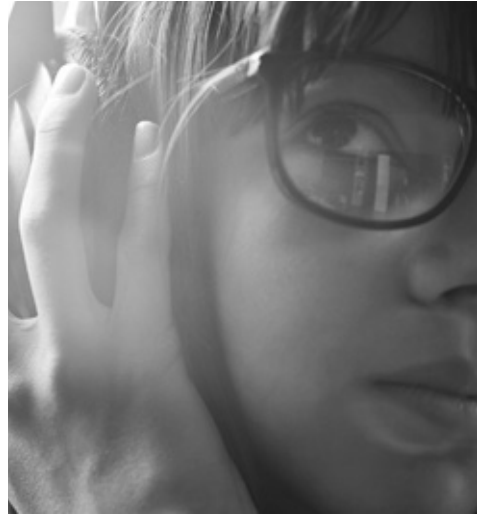
The most common cause of all is simply getting older. Less common causes are infections, ototoxic drugs which are damaging to the auditory system and disorders resulting from an unhealthy lifestyle.

There is a significant link between hearing loss and diabetes, with diabetics being more than twice as likely to experience hearing loss as non-diabetics. It is believed this is caused by damage to the nerves and blood vessels of the inner ear. If you have diabetes, you should have your hearing screened regularly.

Over 11 million people in the UK suffer some form of hearing loss, or 1 in 6 of the population. From that 4.4 million are of working ages and 7.8 million are of retirement age. About 2 million people in the UK have hearing aids but only 1.4 million use them.

Your ears and your hearing

Our hearing mechanism, more properly called the auditory system, is an amazing structure and unbelievably complex. The auditory system has three main parts: the outer, middle and inner ears. The outer ear collects sound and directs it to the middle ear via the eardrum. The middle ear converts sound into mechanical vibrations for transmission to the tiny but amazing structure of the inner ear. The inner ear converts the middle ear sound vibrations into incredibly complex nerve impulse patterns which travel, via the auditory nerve, to the hearing centres of the brain. Ultimately, it is our brain which hears all the sounds of the world around us, including the most important and complicated of all the human voice.



Accumulation of ear wax or skin infection in one or both ear canals

For many people, either a gradual or a sudden loss of hearing may be caused by something as easily treatable as a build up of ear wax or an outer ear infection. If you visit your doctor, they will check for these problems straight away and begin an appropriate course of treatment. It is always important to see your doctor if you experience a rapid loss of hearing or have earache.

A build up of fluid in the middle ear can lead to ear infections. This problem is a lot more common in children - in fact, three out of four children will have suffered an ear infection by the age of three. Symptoms of an ear infection include difficulty hearing, a red or swollen ear, pain in the ear, and the appearance of a bulging eardrum. Fluid build up in the ear often occurs alongside a cold or fever.

Tinnitus

A condition called tinnitus is surprisingly common. People with tinnitus usually report ringing, buzzing, humming or whistling sounds in one or both ears. Tinnitus is at the very least annoying but, for some sufferers, it is very distressing. Tinnitus is not a disease and is rarely a sign of a serious, ear-related condition. However, if tinnitus persists for any length of time, you should consult your doctor. Tinnitus can affect people of any age and statistics show that about one in ten adults in the UK have mild tinnitus and up to 1% have tinnitus that affects their quality of life.

Hearing problems after a head injury

Hearing problems are quite common after a head or brain injury because the inner ear is directly connected to the central nervous system. People often experience hearing tinnitus or hearing loss after a head injury, but problems such as hyperacusis (normal situations seem loud); difficulty filtering one set of sounds from background noise; and auditory agnosia (pure word deafness, i.e. being unable to recognise the meaning of certain sounds) can also occur. In most cases, these hearing problems will usually disappear with several days or weeks of an injury, although they can last indefinitely. It is usually recommended that anyone experiencing a traumatic head injury be evaluated by an audiologist, even if their hearing appears to be fine.

Working in noisy environments

Working in a noisy environment can cause permanent hearing damage. This can be gradual hearing loss or damage caused by a sudden, extremely loud noise. This damage can affect your ability to understand speech, keep up with conversations or use the phone. It is also common for people who work in noisy environments to develop tinnitus.

To protect you from the risks of working in a noisy environment, the Control of Noise at Work Regulations 2005 requires employers to take action to reduce the noise exposure and to provide you with personal hearing protection. They must also ensure that the legal limits on noise exposure are not exceeded, maintain and ensure the use of equipment to control noise risks, monitor your hearing ability, and provide you with information, instruction and training to ensure you know what steps you can take to protect your hearing in the workplace.

You can find out more about safeguarding your hearing in noisy work environments, through the Health and Safety Executive (www.hse.gov.uk).

Hearing assessments

If you suspect that you have a hearing loss or find it hard to hear a conversation, particularly in a noisy environment, you should not ignore this. You have two options: either you should contact your doctor or arrange for a hearing test at a private hearing care centre. Most private centres provide a free-of-charge and thorough hearing assessment by a professionally qualified person with very little waiting for an appointment which is usually timed for your convenience.

Alternatively, your doctor can arrange a hearing test but usually this means being referred to your nearest hospital Audiology Department. A hospital appointment for hearing tests can take some time to arrange as you may be put on a waiting list before being offered an appointment.

The most important advice which would be given to you by any hearing care professional is that you should never delay in having your hearing professionally assessed if you are experiencing any hearing difficulties. Your hearing is just as important as your eyesight. At any age, good hearing and good eyesight are important to the quality of your life and general wellbeing.





Hearing Aids

There is an enormous range of hearing aids available today for almost all types and degrees of hearing loss, and in a wide variety of sizes and styles, such as behind-the-ear (BTE), in-the-ear (ITE) and in-the-canal (ITC). The choice of the most appropriate and beneficial style and technology requires the expert advice and guidance of a qualified audiology professional.

The NHS provides hearing aids on free loan, as well as maintaining these aids free of charge. Everyone has the right to have their hearing assessed through the NHS which must be arranged through your doctor. Private hearing centres normally provide all the personalised advice necessary for suitable hearing aids completely free of charge.

It is not possible to obtain financial help from the NHS to buy hearing aids privately but, if you choose to buy a hearing aid from a private source, you will still be entitled to claim a free NHS hearing aid.

There is now a 'public private partnership' in existence, which means that a number of contracted dispensers will distribute hearing aids on behalf of the NHS. The purpose of this partnership is to cut waiting times and give patients access to the correct hearing aid as soon as possible after their need for an aid is identified.

The majority of adults and children with hearing loss are affected in both ears. This usually means that both ears should be aided for maximum benefit and to ensure balanced hearing. This particularly applies when problems are experienced with background noise. This is called a binaural or bilateral fitting. A monaural or unilateral fitting will usually limit the amount of benefit and will not normally be advised by a hearing care professional.

There are considerable differences between what is available free on loan from the NHS and what can be purchased privately. The following is a guide to the main types of mainly digital hearing aids and to what can be provided by the NHS or private hearing care services.

Hearing aid dispensers

The Health & Care Professions Council now holds the register of approved hearing aid dispensers and is the regulator replacing the Hearing Aid Council, which was abolished on 31 July 2010.

To check if a dispenser you wish to use is approved, please contact the Health and Care Professions Council (see Further Contacts and Useful Organisations section).

Any Qualified Provider (AQP)

The Any Qualified Provider (AQP) scheme was introduced in England in April 2012 to give patients more choice about which health services they can use within the NHS. For some conditions, the scheme entitles you to choose from a range of approved providers, such as hospitals and high street providers.

Adult hearing services were voted to lead the implementation of the AQP scheme in an attempt to increase the number of people given access to hearing aids, as well as information about other hearing services or assistive technology.

Under the scheme, you and your GP can choose a service based on criteria such as location, waiting list or outcomes. Services provided through the AQP scheme are free for patients to use, and access is based on clinical need.

You can find out more about the scheme on www.nhs.uk.

Types of hearing aid system	Available on NHS?	Available privately?
Behind-the-ear (BTE) usually have an earmould that fits inside the ear while the rest of the aid rests behind the ear	YES but with some limitation on size and technology	YES and in all sizes and technologies
Receiver in the ear (RITE) aids are similar to the BTE but the piece behind the ear is connected by a wire to a receiver located in the ear canal	YES but with some limitation on size and technology	YES
In-the-ear (ITE) fits entirely into your ear, tends to need repairing more often than the BTE	NO	YES
Completely-in-the-canal (CIC) these are even smaller than ITE so are less visible but unlikely to be suitable if you have severe hearing loss or frequent ear infections.	NO	YES
In the canal (ITC) hearing aids fill the outer part of the ear canal and are just visible.	NO	YES
Remote control hearing aids in BTE, ITE, ITC or CIC styles	NO	YES
Spectacle hearing aids which have the circuitry either in the spectacle arm(s) or are specially adapted for attachment to small BTE hearing aids.	NO	YES
Bone conduction aids which do not involve an ear fitting but transmit sound through the head directly to the inner ear. Used for those with outer or middle ear deformity or disease.	YES	YES
CROS and Bi-CROS aids for those with very severe or total hearing loss in one ear. The sound is detected on the unaidable side and transmitted to the opposite, better ear.	YES but usually only in BTE style	YES and in BTE, ITE and spectacle styles



Rehabilitation to better hearing and a more enjoyable life

Once a hearing impairment has been identified, you will be offered a full assessment of your needs by an audiology professional who will explain which hearing aid systems would be most suitable for you. You will then be offered a separate appointment for the fitting of your hearing aid system. It is at the fitting appointment that personalised and important advice is given about the gradual period of adjustment to a more enjoyable life with hearing aids. This is called auditory or aural rehabilitation and is a very important stage requiring the advice and support of your hearing care professional.

One of the differences between the NHS and private hearing aid services is the amount of time it is possible to devote to advising and assisting you. With private hearing aid services, you will generally be provided with more time at your appointments and with a greater range of aftercare services. It is not always possible for a NHS hospital audiology department to provide their services, although they certainly do their best to provide a high standard of care. With private hearing aid services, you receive aftercare services whenever needed.

There are greater choices of hearing aids when using private hearing aid services rather than NHS services as they produce smaller and more convenient models.

The cost privately can be between £300-£2500 but it may be possible to claim through your medical insurance. Please note, this is only an estimate of the cost and you should seek clarification from your medical insurer.

Independent living if you are deaf or hearing impaired

A great deal of equipment and other support services are available to help deaf or hearing impaired people live independently and safely in their own homes and to enjoy improved quality of life. The devices available include TV amplifiers, specially adapted telephones, textphones, special listening and alerting devices such as specially adapted doorbells, alarm clocks and smoke alarms. Such equipment can help many hearing impaired people manage a range of everyday situations.

Many people also benefit from the use of induction loops, which work on the 'T' (telecoil) setting which can be found on most hearing aids. Most public places such as banks, post offices and churches have induction loops and there should be a sign to indicate where the induction loop has been fitted.

You can seek advice about such devices from your local council's social services department, National Health Service audiology departments and a wide range of voluntary organisations. These devices can also be purchased from private hearing centres.

If you become deaf or hearing impaired, you are entitled to request a health and social care assessment by your local social services department (usually carried out by an occupational therapist). This assessment will examine your individual needs so that the right support or equipment can be provided. You can also arrange to receive 'direct payments' which will enable you to choose and buy equipment for yourself.

Communication aids and support if you are profoundly or totally deaf

Access to communication support is available through a number of routes and is often dependent on your current situation. If you have communication difficulties due to the severity of your hearing loss, you can ask for and expect to be provided with communication support in situations such as a job interview, attending court or a public meeting.

Communication support typically includes British Sign Language (BSL) and there are a number of professional groups such as BSL interpreters, deafblind interpreters, lipspeakers, notetakers and speech-to-text reporters (palantypists).

In most cases, you will need to book your communication support in advance (often as much as six weeks ahead). Therefore, you should make any service providers or potential employers, for example, aware of your needs as far in advance as possible. If you tell them as much as you can about your personal requirements, they will then be able to ensure that the most appropriate form of support is arranged. This is especially important if you are going into a medical or legal environment, as some interpreters have extra experience in these kinds of situations.

The Equality Act (2010) requires all employers and the providers of goods and services to the public to make reasonable adjustments to assist disabled people. For hearing impaired people, reasonable adjustments might include providing communication aids or services, such as an interpreter.

Text Relay is a national telephone relay service which allows very severely hearing impaired people to communicate with a hearing person over the telephone network using a Text Relay operator. The service is available 24 hours a day and is free to use, although you do of course pay for the calls you make.



Hearing therapists

If you are over 16, you may be able to access the support of an NHS Hearing Therapist to help you adapt to your hearing loss (this service differs across the country, so you should contact your local Clinical Commissioning Group for more information). Hearing therapists can provide individual support and communication training and counseling for you and members of your family. They can also give you advice about the equipment and services that you can access.

Prominent Ears

Ears are the first part of the human body to reach their adult size, which is why protruding ears can be very noticeable in children. The only way to permanently 'pin back' ears is through ear reshaping surgery known as pinnaoplasty or otoplasty.

Otoplasty is seen as a form of cosmetic surgery and is generally only available to adults through the NHS in very exceptional circumstances, where the adult can demonstrate that they are experiencing severe psychological distress.

However, it is accepted that children and teenagers are likely to suffer severe emotional stress as a result of prominent ears and they are far more likely to be offered this type of surgery through the NHS.

When otoplasty should be carried out

The human ear is fully developed at around three years old and otoplasty is an option from the age of five, when the cartilage in the ears is strong enough to hold stitches. However, at the age of five, a child may not be aware of their prominent ears and, as the benefits are purely psychological, many people decide to wait until the child is old enough to decide on the surgery with the help and support of their parents or guardians.

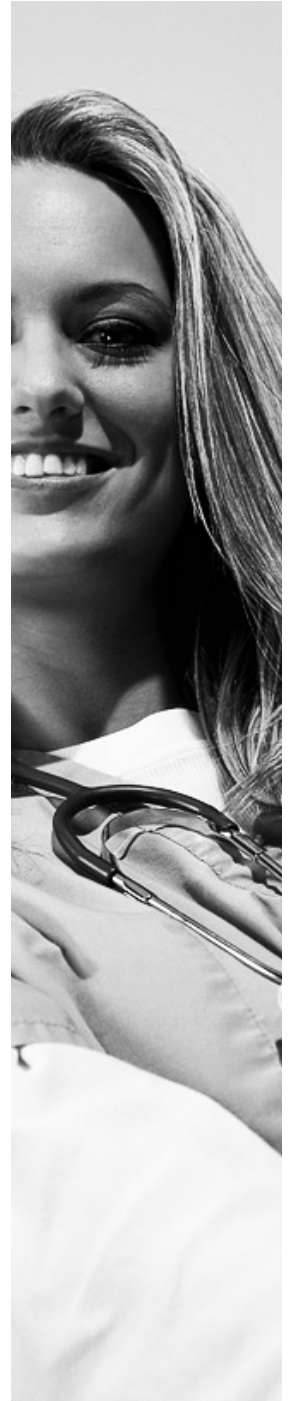
The end result

The majority of patients who have otoplasty are pleased with the results and do not need further surgery, although some people may require minor adjustments to be made if the shape of the ears is not satisfactory.

A small scar may be visible behind each ear after the operation but this will fade, becoming very faint over time. Very rarely, the patient may develop an infection in the cartilage, which may cause scar tissue to form. It will not normally be necessary to operate further as the infection can be treated with antibiotics.

A small number of patients may develop a blood clot in the ear, called a hematoma. This may be extracted in a simple procedure if it does not dissolve naturally.

If you or your child has prominent ears, you are advised to consult with your GP in the first instance.



Hearing Problems in Babies and Children



All newborns are given a hearing test before they leave hospital or in the first few weeks at home - either by your GP, midwife or health visitor - under the Newborn Hearing Screening Programme.

A small number of babies are born with a hearing loss and the screening test allows for potential problems to be identified as early as possible. This can be very important for their later development as well as giving you access to the support and information you need should there prove to be a problem.

The screening test cannot harm your baby in any way - it is very quick and usually carried out while your child is asleep. A trained hearing screener or your health visitor will place a soft tipped earpiece in the outer part of your baby's ear, which sends clicking sounds down the ear. When an ear receives a sound, the inner part - known as the cochlea - usually produces an echo. Using a computer, the screener can see how your baby's ears respond to the sound; this is called the Otoacoustic Emissions test (OAE) - it only takes a few minutes to complete and you can stay with your baby while it is done. You will be given the results of the hearing test straight away.

If the test shows a strong response in both ears that it is very unlikely that your baby has any form of hearing loss. After the test, you may still be given a checklist of sounds that your baby should react to, both immediately and as they develop.

If the screening test doesn't show a strong response in one or both of your baby's ears, you should not panic as there may be a number of reasons for this result. Often, if a baby is unsettled at the time of the test, they may show a weak response. It is also quite common for babies to have some fluid in their ears following the birth, which may have caused a temporary blockage. Other background noises may also affect the test results. At this stage, you will be asked to bring your baby back for further tests and will be given a leaflet explaining what these will involve.

If you have concerns about your baby or child's hearing as they grow older, you should mention them to your doctor or health visitor who will arrange a referral to your hospital audiology department. You can ask for your child's hearing to be tested at any age.

Glue ear

The most common cause of hearing loss in young children is called 'glue ear'. This is usually caused by poor ventilation and drainage of the middle ear(s), usually due to enlarged adenoids at the back of the nasal cavity. If your child appears to not be hearing normally, you should always consult your doctor.

General advice about ear and hearing problems

Hearing is one of our most important senses and, without good hearing, quality of life can be seriously affected. If you or a member of your family, regardless of age, is experiencing hearing difficulties, it is very important to seek advice. You can do this by consulting your doctor or by making an appointment at a private hearing care centre. Doing nothing about a hearing problem should never be an option.

Pre-payment of NHS prescription charges

If you do have to pay for your prescriptions, you may find it helpful to buy a prescription pre-payment certificate (PPC). A PPC will save you money if you need more than three prescription items in three months or more than 13 items in 12 months. From April 2011, a three-month PPC costs £29.10 and a 12-month PPC costs £104.00. You can apply for a PPC using form FP95 in England and Wales - this form can be obtained from your doctor's surgery or local pharmacy.

The Department of Health outlines its current charges in the leaflet HC 12 - Help with Costs, which can be downloaded as a PDF from the Department of Health website.

Benefit Entitlements - Hearing

If you are deaf or hard of hearing (or you care for someone who is hearing impaired), you may be able to claim some of the following benefits:

- Disability Living Allowance (DLA) - care and mobility components. You can only claim for this if you're claiming for a child under 16. Anyone over 16 must apply for Personal Independence Payment instead.
- Attendance Allowance
- Carer's Allowance
- Employment and Support Allowance
- Income Support
- Industrial Injuries Disablement Benefit (if you have been made deaf by your work or service in the armed forces)
- Severe Disablement Allowance
- War Disablement Pension / The Armed Forces Compensation Scheme
- Working Tax Credit
- Child Tax Credit
- Council Tax Benefit
- Housing Benefit
- Pension Credit

Your entitlements to any of the above will depend on your individual circumstances. The Action on Hearing Loss is an excellent source of further information (see Further Contacts and Useful Organisation section for contact details).

Employment info and legal rights

Under the Equality Act 2010, it is unlawful for employers to discriminate against disabled people. The disability parts of the act cover:

- Application forms.
- Job offers.
- Interview arrangements.
- Aptitude or proficiency tests.
- Terms of employment including pay.
- Promotion, transfer and training opportunities.
- Discipline and grievances.
- Dismissal or redundancy.
- Work-related benefits such as access to recreation or refreshment facilities.

An employer must make reasonable adjustments to applications, interviews and work so that you are not disadvantaged in comparison to non-disabled people.

Reasonable adjustments should be made to apply to the working arrangements in the workplace or any physical aspects. These can include things such as adjusting working hours or providing you with an adequate piece of equipment to help you do the job.



Further Contacts and Useful Organisations



AIHHP

(The Association of Independent Hearing Healthcare Professionals)

Tel: 01896 755474

Email: info@aihhp.org

www.aihhp.org

AIHHP is a professional association dedicated to promoting excellence within the UK Hearing Care profession.

Our members provide a range of higher quality services including hearing assessments, hearing aid provision, hearing protection and other specialised services relating to hearing than would normally be found on the high street.

So, make sure you visit an AIHHP Centre of Excellence before going to any other Hearing Aid centre!



Action on Hearing Loss (formerly RNID)

Advice and support for people who are deaf, hard of hearing or have tinnitus. We want a world where hearing loss doesn't limit or label people, where tinnitus is silenced - and where people value and look after their hearing.

1-3 Highbury Station Road, London, N1 1SE

Email: informationline@hearingloss.org.uk

www.actiononhearingloss.org.uk

Information Line (freephone): 0808 808 0123 (telephone)

0808 808 9000 (textphone)

Facebook and Twitter



BCAB
BRITISH
COMPUTER
ASSOCIATION
OF THE BLIND

The British Computer Association of the Blind c/o RNIB

58-72 John Bright Street, Birmingham B1 1BN

Tel: 0845 643 9811

Email: info@bcab.org.uk

www.bcab.org.uk

The British Society of Audiology

Blackburn House, Redhouse Road, Seafield, Bathgate, EH47 7AQ
Phone: 0118 966 0622
Email: bsa@thebsa.org.uk for general enquiries
www.thebsa.org.uk



British Society of Hearing Aid Audiologists

City Wharf, Davidson Road, Lichfield, Staffordshire, WS14 9DZ
Email: secretary@bshaa.com
www.bshaa.com



British Tinnitus Association

Ground Floor Unit 5, Acorn Business Park, Woodseats Close, Sheffield S8 0TB
Minicom: 0114 258 5694 / Freephone: 0800 018 0527
Email: helpline@tinnitus.org.uk
www.tinnitus.org.uk



College of Optometrists

42 Craven Street, London WC2N 5NG
Tel: 020 7839 6000
Email: via online enquiry form
www.college-optometrists.org
www.lookafteryoureyes.org



Deafblind UK

National Centre for Deafblindness, John and Lucille van Geest Place
Cygnet Road, Hampton, Peterborough, PE7 8FD
Tel: 01733 358 100 (Voice/Text) Info and Advice Line: 0800 132 320
Email: info@deafblind.org.uk
www.deafblind.org.uk
Contact the Info and Advice Line if you require access to any of Deafblind UK's services



The Eyecare Trust

Office 216, 3 Edgar Buildings, George Street, Bath, BA1 2FJ
General Enquiries: 0845 128 5007
Email: info@eyecaretrust.org.uk
www.eyecaretrust.org.uk
Twitter: @EyecareTrust



General Optical Council

10 Old Bailey, London, EC4M 7NG
Tel: 020 7580 3898
Email: goc@optical.org
www.optical.org



Guide Dogs for the Blind Association

Burghfield Common, Reading RG7 3YG
Tel: 0118 983 5555
Email: guidedogs@guidedogs.org.uk
www.gdba.org.uk

Health and Care Professions Council

Park House, 184 Kennington Road, London SE11 4BU
Tel: 0300 500 6184
www.hcpc-uk.org



Hearing Dogs for Deaf People

The Grange, Wycombe Road, Saunderton, Princes Risborough
Buckinghamshire HP27 9NS
Tel: 01844 348 100 (voice & Minicom)
Text Relay 18001 01844 348100 (for deaf and hard of hearing)
Email: info@hearingdogs.org.uk
www.hearingdogs.org.uk



Hearing Link

23 The Waterfront, Eastbourne, East Sussex BN23 5UZ
Tel: 0300 111 1113
SMS: 07526 123 255
Email: enquiries@hearinglink.org
www.hearinglink.org



International Glaucoma Association

Woodcote House
15 Highpoint Business Village, Henwood, Ashford, Kent TN24 8DH
Sightline: 01233 64 81 70
Email: info@iga.org.uk
www.glaucoma-association.com



Blind Children UK

Formerly National Blind Children's Society
Central Office, Hillfields, Reading Rd, Burghfield Common,
Reading RG7 3YG

Supportline 0800 781 1444

Email: enquiries@blindchildren.org

www.blindchildreuk.org



National Eye Health Week

Website: www.visionmatters.org.uk

Email: info@visionmatters.org.uk

Twitter: [@myvisionmatters](https://twitter.com/myvisionmatters)

Optical Consumer Complaints Service (OCCS)

Write to us at:

OCCS, 6 Market Square, Bishops Stortford, Hertfordshire, CM23 3UZ or
fill in the online complains form

Tel: 0344 800 5071

Email: enquiries@opticalcomplaints.co.uk

www.opticalcomplaints.co.uk



The Partially Sighted Society

1 Bennethorpe, Doncaster, DN2 6AA.

Tel: 01302 965195

Fax: 01302 556587

Email: anita.plant@partsight.org.uk

Website: www.partsight.org.uk



RNIB

105 Judd Street, London WC1H 9NE

Helpline: 0303 123 9999

Tel: 020 7388 1266

Email: helpline@rnib.org.uk or via online enquiry form

www.rnib.org.uk



Royal Association for Deaf People

Century House South
Riverside Office Centre
North Station Road, Colchester, Essex CO1 1RE
Tel: 0300 688 2525
Minicom: 0845 688 2527
Email: info@royaldeaf.org.uk
www.royaldeaf.org.uk



The Royal Society for Blind Children

52-58 Arcola Street, London, E8 2DJ
Company No : 05764810
Charity No : 1131623
Tel: 020 3198 0225
Email: enquiries@rsbc.org.uk
Website www.rsbc.org.uk



Royal College of Ophthalmologists

18 Stephenson Way, London NW1 2HD
Tel: 020 7935 0702
www.rcophth.ac.uk

SeeAbility

Newplan House, 41 East Street, Epsom, Surrey, KT17 1BL
Tel: 01372 755000
Email: enquiries@seeability.org
www.seeability.org



Sense

101 Pentonville Road, London N1 9LG
Tel: 0300 330 9250, Textphone: 0300 330 9252
Email: info@sense.org.uk
www.sense.org.uk

Smokefree NHS

To find your nearest NHS Stop Smoking service visit
www.nhs.uk/smokefree or call **0300 123 1044** to speak to a trained adviser.

Text Relay

Write to us at:

Text Relay Team c/o Internal Box 14, Telephone House,
170-175 Moor Lane, Preston, PR1 1BA

Tel: 0800 7311 888, Textphone: 0800 500 888

Email: helpline@textrelay.org

www.textrelay.org

UK Deaf Sport

Aims to support deaf people to participate, to enjoy and excel at sports

www.ukdeafsport.org.uk

Vision UK

The Pocklington Hub

Tavistock House South, Tavistock Square WC1H 9LG

Tel: 020 3761 3654

Email: visionuk@visionuk.org.uk

www.visionuk.org.uk



The information provided in this publication is given in good faith and is in no way connected to or affiliated with any of the organisations contained within this publication. The information supplied should not be taken as legal advice.

The content is also not intended to replace other healthcare professional advice that you may be encouraged to seek.

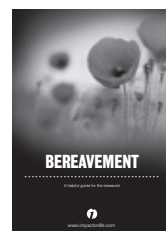
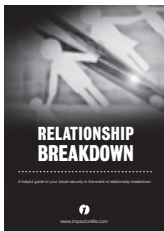
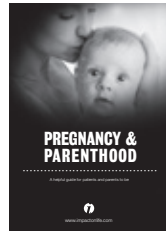
Professional advice should be sought where appropriate. Any rates and information contained within this publication was correct at the time of print in March 2018.

As benefit entitlements change regularly, you are advised to contact the benefits enquiry line or your local jobcentre plus for information about current entitlements.

IMPACT

Publishers of The Healthcare Media range of literature, distributed to over 160 health districts throughout the UK.

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