

CARING FOR PATIENTS WHO ARE BLIND OR VISUALLY IMPAIRED: A FACT SHEET FOR THE INPATIENT CARE TEAM



This fact sheet is intended to assist all who provide direct inpatient care to blind or visually impaired Service members or Veterans. The bullets below suggest best practices for caring for blind and visually impaired Service members and Veterans while safely maintaining or regaining his or her independence and quality of life during hospitalization.

- Knock on the door and ask to enter the room; address the patient by name and identify yourself.
- Ask the patient how he or she performs activities of daily living and how you can help while in the hospital. Include the patient, family and hospital team in the plan.
- In a normal, natural tone of voice, face the patient directly and if possible, make eye contact and explain what you're going to do in detail before you do it (e.g., taking blood or vital signs); ask permission or notify the patient before you touch him or her.
- Always address the patient directly, even if family members are present. Don't worry about saying the words "look," "see" or "blind."
- Describe the room layout including dimensions. Use compass directions to describe the location of objects in relation to the bed (e.g., "you are facing north in the bed", "the door is to the west").
- Place the phone, call bell and bedside table within the patient's reach and let the patient know where they are. Place the item in the patient's hand, or the patient's hand on the item, if needed.
- Once you've oriented the patient to the room, alert staff to leave things in position. Notify the patient before you move, take or add any objects (e.g., furniture, trash can).
- Refer to your hospital's policy regarding service dogs.
 If a service dog is present, do not feed or pet the dog without permission and ask the patient about the dog's care plan (e.g., food, water, relief, exercise).

- Use the "Human Guide" technique to assist the patient with ambulating:
 - Ask the patient from which side he or she would prefer to be approached and guided
 - Extend your arm so that it touches the patient's; he or she can grasp and follow your elbow
 - While the patient is holding your arm, walk to his or her side, one step ahead, at a pace that is comfortable for him or her
- Use clock coordinates to describe the location of food on the plate and all items on the tray. Ask the patient what assistance is needed.
- Indicate to the patient when you are leaving the room.
- Encourage the patient to bring assistive devices (e.g., talk clocks/watches, radios, books/tapes on CD, digital devices) with them, if preferred. Encourage the patient to use reading technology for educational materials.
- Tailor education and discharge material to meet patient needs:
 Keep it simple
 - Provide information via audio tape or digital recording, if preferred
 - Provide written material in large black and white print
- Don't forget to use the resources at your local hospital. If you would like more information from nurses with expertise in treating blind and visually impaired patients, please contact:
 - Department of Veterans Affairs Blind Rehabilitation Services (BRS) at 202-461-7317
 - Department of Veterans Affairs Polytrauma Rehabilitation Field Advisory Committee at 708-202-5140
 - The Vision Center of Excellence (VCE) at 301-400-1130

Resources and References:

- ADA Checklist: Health Care Facilities and Service Providers: http://www.afb.org/section.aspx?FolderID=3&SectionID=3&T opicID=32&DocumentID=529
- Blind Rehabilitation Services Blind Rehabilitation Service: http://www.va.gov/BLINDREHAB/BRS_Coordinated_Care.asp
- Care of the Blind Patient Louisiana State University Health New Orleans: http://www.sh.lsuhsc.edu/policies/policy_manuals_via_ms_ word/Nursing/Stds_of_Care/Standard%2028.pdf
- Caring for a Visually Impaired Patient: http://www.nursingcenter.com/_PDF_.aspx? an=01212983-200809000-00006

