

Dementia and sight loss – what can social care do to offer better support?

The care and support needs of people with concurrent dementia and sight loss remain poorly understood. This pioneering project is designed to identify better responses to such complex needs.

Meeting the social care and support needs of people with concurrent dementia and sight loss presents a number of challenges. However the aspiration to enable greater numbers of people with complex needs to live in their own homes provides the imperative to better understand how best to provide support and care in housing settings that respond to both conditions.

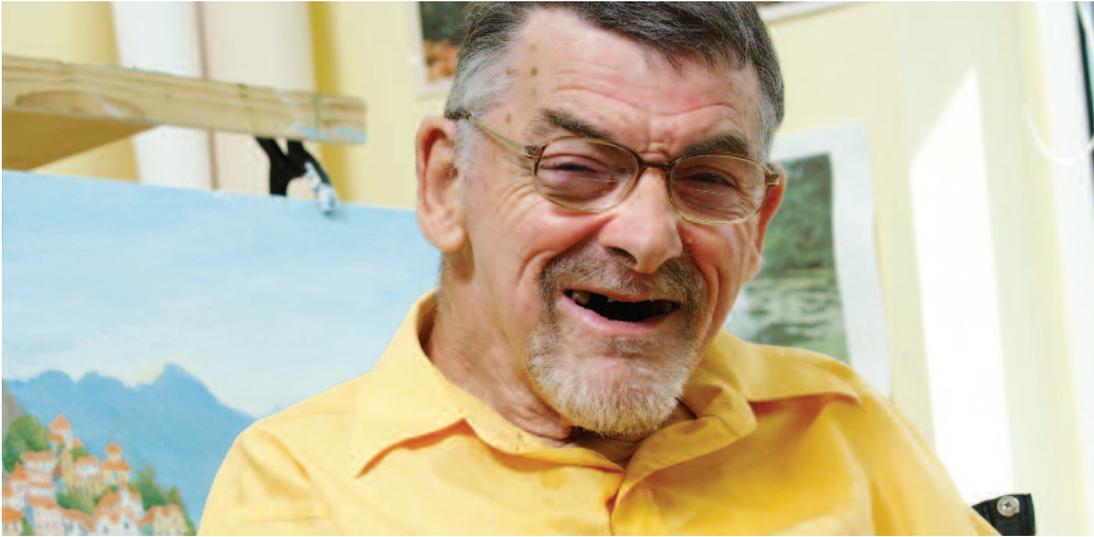
Karen Croucher and Mark Bevan from the University of York, with colleagues from the Universities of Bournemouth, Worcester and Cambridge, are leading the way in developing a better understanding of the needs of people with concurrent dementia and sight loss who are living in ordinary housing settings rather than care homes, and how these needs can be best be met.

‘Think of the kind of support or technologies you might offer people to help them manage the experience of cognitive impairment,’ Ms Croucher explains. ‘Many rely on visual cues, for example, putting a picture of a particular person by their phone number. That helps if the person can see, but it is maybe not that helpful if they have a visual impairment alongside memory problems. Similarly there are things to assist someone with a visual impairment that

might not work that well for someone with cognitive difficulties. For example, there are talking clocks, but they might be very confusing for someone with dementia.’

SSCR has commissioned the team to improve understanding of how best to provide social care and support to people with such complex needs. ‘Often the eye sight problems of people with dementia are not taken fully into consideration’, says Ms Croucher. ‘Often their eyes are not examined regularly and consequently problems that might be resolved are not diagnosed and they don’t get referred for relatively simple treatments, for example, removal of cataracts, that could improve their eyesight and possibly help reduce their confusion.’

Housing is a big issue, says Ms Croucher: ‘There is a much greater expectation now that people will live in ordinary housing, and “age in place”. This can be particularly challenging for people who have both sight loss and memory problems, and often other difficulties or impairments. Changes and adaptations to the home can be difficult to adjust to, particularly if you rely on a mental map of your home for orientation’. The team is consulting widely. ‘We’re working carefully with



'We hope this work will go some way to help improve the quality of life for people living with both memory loss and visual impairment.'

Karen Croucher, researcher

people who have problems with their memory and their sight, and asking them what type of care and support works best for them. We are also talking to carers and family members', says Ms Croucher. 'We are consulting with various practitioners who work with people with dementia and sight loss as well as people who commission services.'

The team will hold a consensus conference, bringing together key stakeholders to agree what is known as well as the gaps in knowledge, to help set a research agenda, and develop guidance on what is currently known about best or

good practice. The issue is only going to get bigger, believe the team, almost everyone over 50 needs glasses and one in four people aged over 80 can expect to have a cognitive impairment.

'It is important to acknowledge that this is the starting point for developing better services for people with memory loss and sight problems,' says Ms Croucher. 'It won't be the final word, but I hope this work will help to bring about improvements to services and the quality of life for people who are living with both conditions.'

Project: Developing best practice in social care and support for adults with concurrent slight loss and dementia within different housing settings

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