

### Who provides your service

Your service is provided by [NAME].

We are a [general/limited] partner in a [limited/non-limited] partnership / We are a corporate body. [if applicable]

Our Directors are [NAMES] [if applicable]. Our Chief Executive is [NAME] [if applicable]

Our Company Secretary is [NAME]. [if applicable]. Our registered / trading office is at:

[ADDRESS LINE 1]

[ADDRESS LINE 2]

[TOWN]

[CITY]

[COUNTY]

[POST CODE]

Telephone:

Fax:

Email:

Website:

### What services are provided

We provide NHS funded mobile sight tests. If you are eligible for an NHS funded sight test, you may obtain mobile services as follows:

- **At home:** if you are unable to leave home unaccompanied because of physical or mental illness or disability
- **At a residential or care home:** if you normally live there and you are unable to leave the home unaccompanied because of physical or mental illness or disability
- **At a day centre:** if you would have difficulty in obtaining sight testing services from practice premises because of physical or mental illness or disability or because of difficulties in communicating your health needs unaided.

Patients can request services by: [PROVIDER TO PROVIDE CONTACT DETAILS]

If you have seen a particular practitioner before you may be able to request to see them again.

You qualify for a free NHS funded sight test if you are:

- Aged 60 or over
- Aged under 16
- Aged 16,17 or 18 in full time education
- Diagnosed with diabetes or glaucoma
- Considered to be at risk of glaucoma (as advised by an ophthalmologist)
- Aged 40 or over and the parent, brother, sister, son or daughter of a person diagnosed with glaucoma
- Registered blind or partially sighted
- Eligible for an NHS complex lens voucher (your optician will advise on your entitlement)
- Claiming Benefit (Income Support, Income-based Jobseeker's Allowance, Pension Credit Guarantee Credit or receiving Tax Credits and meeting qualifying conditions)
- On a low income and named on a valid HC2 (full help) or HC3 (partial help) certificate

## ***Help with the cost of spectacles or contact lenses***

You may qualify for an NHS optical voucher to help with the cost of your spectacles or contact lenses if you are: claiming certain benefits or on a low income and named on a valid HC2 (full help) or HC3 (partial help) certificate; eligible for an NHS complex lens voucher; aged under 16; or aged 16, 17 or 18 in full time education. You have the right to use your optical voucher with any supplier.

## ***Your safety***

When testing your sight we will ensure that all legal requirements relating to health and safety in the workplace are satisfied; and that we follow strictly the requirements and recommendations of the Medicines and Healthcare products Regulatory Agency.

## ***Your rights and responsibilities***

As a patient you have the right to be treated by us with fairness and with dignity. We will test your sight using sound clinical practice and using modern techniques and instruments. After your sight test we will give you your optical prescription or a statement that you do not need a prescription

We ask you to give our staff accurate information about the illness or disability which prevents you from being able to go to a high street optician without another person's help. We also ask you to treat our staff with courtesy and to keep to any appointment you have made with us. If you break your appointment without giving us reasonable notice we reserve the right to make a charge.

## ***Your information***

We treat all clinical information about your treatment with complete confidentiality, although we may sometimes need to inform your family doctor about our clinical findings during your sight test. We may also need, with your agreement, to refer you to a hospital eye department in which case we will supply them with all the relevant clinical details. We may sometimes need to make your records available to authorised staff from the local Primary Care Trust for whom we provide services. When handling your personal information we will always abide by the principles of Data Protection laid down by the Information Commissioner's Office.

## ***Complaints***

If you would like to make a complaint, please contact [NAME OF PERSON] at [NAME OF SERVICE PROVIDER], [CONTACT DETAILS]. Your complaint will be acknowledged within 3 working days and you will receive a response within 10 working days or as soon as reasonably practicable thereafter.

If you are not happy with how your complaint has been handled by us and your complaint relates to your sight test, you can contact your local Primary Care Trust. If your complaint relates to your spectacles or contact lenses you can contact the Optical Complaints Consumer Service, PO Box 219, Petersfield GU32 9BY.

We provide eye care services under contract with your NHS Primary Care Trust (PCT). We will provide, on request, the name, postal, email and website address and telephone number of that PCT, from which details of primary ophthalmic services in the area may be obtained.