

NC DIVISION OF SERVICES FOR THE BLIND POLICIES AND PROCEDURES VOCATIONAL REHABILITATION

Section:	M
Title:	Medical Eye Care Program
Current Effective Date:	03/08
Revision History:	Revised 02/96

Introduction and Objectives of the Medical Eye Care Program (MEC)

The Division of Services for the Blind (DSB) provides eye care services to persons with limited incomes. These services include complete eye examinations and treatment. Correction of limited vision may be provided by low vision aids, corrective lenses and/or surgery, if recommended. Vision and glaucoma screenings plus education in care of the eyes are provided to all persons and are not confined to persons with limited income. A major thrust of these efforts is to detect and treat the three major causes of blindness in the state; viz., retinal disorders, cataracts, and glaucoma.

How do these services reach the persons needing them? DSB maintains a staff of eight Nursing Eye Care Consultants who cover every area of the state. These nurses are the spearhead of the State Agency's effort to provide eye care in every county in North Carolina. The Nursing Eye Care Consultant's role is multifaceted. Basically, the following duties allow the nurse to fulfill her/his role in restoring sight and preventing blindness:

1. To ensure that all individuals of the Agency receive good eye care by serving in a consultative capacity to staff in other programs within the Agency in regard to matters relating to medical eye care. This would involve conferences with Social Workers for the Blind, Vocational Rehabilitation Counselors, Program Specialists, other nurses, and the Medical Chief. Consultation will also be made with county health staff and county Department of Social Services (DSS) staff when helpful.
2. Through Low Vision assessment (On-Line DSB-2007 Evaluation with Video Magnification with instructions), to assist persons with residual vision to maximum their visual function. Each Nursing Eye Care Consultant has received low vision training and has been provided with a low vision screening kit.
3. To authorize appropriate services on a timely basis.
4. To contact all eye care providers in their area at least every two years and to contact all new providers. To furnish such providers with information on the Agency's programs and procedures, including billing.
5. To provide screening for causes of blindness among preschool and school age children. To make referrals on findings in such screenings and to document same.

In summary, the broad objectives of the MEC Program are to use every available resource to prevent blindness and to restore vision in individuals who have suffered loss of sight.

The purpose of this writing is to provide a ready reference and authority on policy and procedure for persons working in or with the MEC Program. It is intended to augment everyone's understanding of Agency policies and to outline and explain procedures used in the program. Questions that appear to

be unanswered or issues that need clarification should be referred to the Nursing Eye Care Consultant and/or the Area Supervisor of the Social Services, as appropriate.