

## EYESIGHT TEST AND SPECTACLES CLAIM FORM

The procedure is as follows:

1. Section 1 to be completed by the employee requesting an eye test.
2. Section 2 to be completed by the Line Manager before attending the optician's for an eye test.
3. Employee attends eye test with optician of their choice. The Optician should complete section 3.
4. If no corrective lenses are required, pay for your eye test and claim the cost back.
5. If glasses are prescribed for viewing DSE, the employee chooses a pair and is entitled to receive up to £60 as a contribution from the Trust. The employee must pay for their eye test and glasses and then claim the costs back.
6. Costs associated with eyesight test and glasses must be made via HRPTS using Employee Self Service as per HRPTS Travel & Expense Claims. Please be advised when completing claim you must choose 'Eye Test' (maximum £19.50) and 'Eye Glasses' (Maximum £60) [click here](#) for instructions.
7. Return this form to the line manager prior to sending the claim to the manager for authorisation via HRPTS.

Please note:

- All claims must be supported by original legible receipts and the completion of this document.
- The Trust will not contribute towards glasses prescribed for general use.
- If the employee wishes to purchase a more expensive pair of glasses, they can use the £60 to offset against the cost.
- Financial assistance for the replacement of glasses may only be claimed once every two years.
- Where glasses have been lost or damaged in the interim period it will be the responsibility of the individual to replace them.

### SECTION 1: To be completed by the employee

<b>Name</b> <i>(please print):</i>		<b>Job Title:</b>	
<b>Department:</b>		<b>Staff Number:</b>	
<b>I declare that the information provided in this form is correct and that I understand the procedure.</b>			
<b>Signature of employee:</b>		<b>Date:</b>	

### SECTION 2: To be completed by Line Manager

<b>Name</b> <i>(please print):</i>		<b>Job Title:</b>	
<b>I confirm that the member of staff submitting this claim has been identified as a DSE User and uses DSE as a significant part of their normal work.</b>			
<b>Signature of manager:</b>		<b>Date:</b>	

### SECTION 3: To be completed by a qualified Optician:

<b>Name &amp; Address of Optician</b>			
<b>Name of Person carrying out the examination</b>			
<b>Date of Eyesight Test</b>			
<b>Please tick as appropriate:</b>			
	<b>Outcome of examination:</b>	<b>Trust contribution:</b>	
	Glasses not required	Not exceed £19.50 for the eyesight test	
	Glasses are required for general use (the employee can use this general prescription for DSE use)	Not exceed £19.50 for the eyesight test	
	Glasses are required for general use, incorporating a special prescription for DSE	Not to exceed £60 (excludes the cost of the eyesight test)	
	Glasses are required solely for DSE use (where the distance of the screen is normally viewed at arm's length)	Not to exceed £60 (excludes the cost of the eyesight test)	