



**HEALTH DEPARTMENT**

**REGISTRATION OF BLIND PERSONS AND PARTIALLY SIGHTED PERSONS.**

COUNCIL: \_\_\_\_\_

**BLIND PERSONS**

**Table 1** Numbers registered as at 31 March 2006 and New Registrations during the year ended 31 March 2006.

Age Group (Years)	Blind Persons Registered as at 31 March 2006 <sup>(1)</sup>			New Cases Registered During the Year <sup>(2)</sup>		
	Male	Female	TOTAL	Male	Female	TOTAL
Under 5						
5-15						
16-29						
30-49						
50-64						
65-74						
75 and over						
<b>TOTAL</b>						

<sup>(1)</sup>By age as at 31 March 2006

<sup>(2)</sup>By age at registration

**Table 2** Blind persons registered as at 31 March 2006 who have an additional disability - by age and sex

Additional Disability	Under 5		5-15		16-64		65 and over		TOTAL	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
+ Deaf										
+ Physically Disabled										
+ Learning Disabilities										
+ Mental Health Problems										
+ Multiple Additional Disabilities										
<b>TOTAL</b>										

**PARTIALLY SIGHTED PERSONS****Table 3** Numbers registered as at 31 March 2006 and New Registrations during the year ended 31 March 2006.

Age Group (Years)	Partially Sighted Persons Registered as at 31 March 2006 <sup>(1)</sup>			New Cases Registered During the Year <sup>(2)</sup>		
	Male	Female	TOTAL	Male	Female	TOTAL
Under 5						
5-15						
16-29						
30-49						
50-64						
65-74						
75 and over						
<b>TOTAL</b>						

<sup>(1)</sup>By age as at 31 March 2006<sup>(2)</sup>By age as at registration**Table 4** Partially Sighted persons registered as at 31 March 2006 who have an additional disability - by age and sex

Additional Disability	Under 5		5-15		16-64		65 and over		TOTAL	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
+ Deaf										
+ Physically Disabled										
+ Learning Disabilities										
+ Mental Health Problems										
+ Multiple Additional Disabilities										
<b>TOTAL</b>										

**NOTES ON COMPLETION**

1. This return relates to all registered blind and partially sighted persons ordinarily resident in your Council area, including any who are currently in an institution for blind persons in another Council area. Persons ordinarily resident in another Council area but who are currently in an institution in your Council area should be excluded.
2. Voluntary organisations who deal with clients from more than one Council area should complete a separate return for each Council's clients.
3. Where a person's age is not known precisely an attempt should be made to allocate him/her as accurately as possible to one of the age groupings.

Contact for enquiries on this form:

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

**N.B. Please send the completed form to :**  
 Scottish Executive, Health Department, ASD, Room 3WR, St Andrew's House, EDINBURGH, EH1 3DG.  
 (Telephone 0131 244 3794 or 0131 244 3777 Fax 0131 244 5427 email SWStat@scotland.gsi.gov.uk).  
**Not later than 30 April 2006.**