Information Release

Advice to Public Health, Local Authority and NHS Commissioners: Vision Screening of 4-5 year old children at school

The purpose of this release is to provide public health, local authority and NHS commissioners, professional bodies and associations with information on children's vision screening. It is essential that equitable, high quality, cost-effective services (in line with national recommendations and best-practice) are procured across England.

In December 2013 the UK National Screening Committee (NSC) recommended that screening for visual impairment should be offered to all children aged 4–5 years and this screening service should be organised and led by Orthoptists¹. http://www.screening.nhs.uk/vision-child. Orthoptists have specific expertise in the assessment of visual deficits in young children. It is essential that commissioners consult with Orthoptists in their area in the tendering process for this service.

The British & Irish Orthoptic Society (BIOS) has evidence that changes to the funding of health care has led to an inconsistent approach to the commissioning of the 4–5 year vision screening and that some counties in England are planning on de-commissioning this service as part of a financial savings scheme. The BIOS is working in partnership with eye care organisations to raise concerns about the provision of the 4-5 year old vision screening.

Who provides Vision Screening services?
Orthoptic-led means a designated lead Orthoptist is responsible for all aspects of delivery of vision screening to all eligible children in a school setting at age 4–5 years, which comprises mainstream state, independent and special schools and those who are home tutored.

This includes leadership of the personnel delivering the screening, the care pathway and audit and quality assurance mechanisms for the screening. It is recommended that the vision screening in schools is carried out by Orthoptists or health care workers trained and managed within the Orthoptic-led service.²

The BIOS has developed recommendations³ and tools²,⁴,⁵,⁶ that support orthoptic-led delivery of the vision screening. These recommendations are evidence-based and provide the standardising approach to screening required by the NSC.
Why is the screening necessary – the Public Health Implication?
The aim of screening is to identify children with amblyopia (reduced vision) at an age where treatment has the potential to improve vision. Amblyopia is a childhood condition which can go unrecognised. If left untreated it can result in a permanent, lifelong visual deficit. The effect of the condition on vision and quality of life can have a more serious impact if sight in the other eye is lost or damaged. Accurate detection of amblyopia is primarily achieved through vision testing. The testing of children with disabilities or with specific needs who require an alternative means of testing must be delivered by an Orthoptist and be provided for within the screening service.

"Free" school vision screening testing kits
The BIOS is aware of the availability of “free” school vision screening testing kits for teachers and school staff and the “sight testing services” for older children that are being offered to schools in England by businesses corporations. The free screening being offered to schools is not in line with the NSC guidance. It is also being offered to various age groups for which there is no evidence of benefit. It is important that children at reception age 4-5 years are screened in line with national guidance and that this is undertaken by a compliant and fully audited service. BIOS believe it is important that the difference in the services being offered is fully understood.

The national guidelines provide a population-based examination of all children ensuring the ‘at risk’ and vulnerable children in the population are reached. This is essential to those who do not seek advice or think they are at risk, and show no signs or symptoms of the condition. This guidance ensures appropriate use of resources.

The BIOS is concerned about the possible implications to children if a vision screening programme that does not follow NSC guidelines is adopted:
- Children may not receive vision screening.
- The risk that visual defects may be missed and / or not treated promptly.
- The potential for the defect to become irreversible. This has serious risks of litigation.

The BIOS hopes that this information can be passed to members of relevant professional bodies, associations of commissioners and commissioners themselves involved with the tendering process. The BIOS is happy to provide any additional information and deal with any queries on this key issue.

Advice for commissioners can be found here:
http://www.parallelvisionmatters.org.uk/index.php/144/

References
2. BIOS Statement on Orthoptic-led Vision Screening Services, April 2015
   http://www.parallelvisionmatters.org.uk/index.php/144/
   http://www.orthoptics.org.uk/GP_info
   http://www.parallelvisionmatters.org.uk/index.php/144/
5. BIOS Vision Screening Care Pathway. August 2015 http://www.parallelvisionmatters.org.uk/index.php/144/
6. BIOS Recommended Vision Screening Monitoring. September 2015

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