



UK National Screening Committee Mandate	SchoolScreener Compliance
Data and Monitoring	
Providers should ensure that:	
 appropriate systems are in place to run the programme including audit and monitoring functions. 	Fully automated using SchoolScreener [®] Vision.
• timely and accurate completion of data takes place for all stages of the care pathway; this should be through the use of an IT system that can ensure demonstrable failsafe processes are in place, and these are monitored and managed - use of such a system is mandatory.	Fully automated, according to locality requirements using SchoolScreener [®] Vision. Used over 2 million times by NHS, Local Authority and other Service Providers
• there is continuous monitoring and collection of the recommended minimum dataset for the service and that this information and audit data is available to the commissioner	Fully automated, according to locality requirements using SchoolScreener [®] Vision. Used over 2 million times by NHS, Local Authority and other Providers
Aims and Objectives	
The primary aim of the child vision screening programme is to identify c sight, enabling timely intervention. The objectives of the child vision screening programme are to:	hildren aged 4 to 5 years with impaired
 offer parents, carers or guardians the opportunity to have their children screened for reduced vision; 	SchoolScreener [®] Vision automates management of opt-in or opt out
 ensure fair access for all children; 	SchoolScreener [®] Vision incorporates cohort management on a single screen view, so that no child is missed.





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 refer children to diagnostic services as indicated by their screening outcome; 	SchoolScreener [®] Vision automates pathway management
 provide information so parents, carers or guardians can make an informed choice whether to accept the offer of screening; 	SchoolScreener [®] Vision automates letter printing – increasingly, providers are using the SchoolScreener [®] ParentPortal to minimise letter printing and as a communications channel for parents. The SchoolScreener [®] ParentPortal provides online secure access for parents as well as any other communication requirements of the provider, in any language.
 ensure competent staff who participate in recognised ongoing training and development. 	Options for using Keeler Crowded logMAR - either using Keeler Cards with SchoolScreener Vision automation. Or, using onscreen Keeler Crowded logMAR to minimise training needs. SchoolScreener's online screening interface is used by many providers enabling Band 2 and 3 staff to screen.
 deliver a safe, effective service supported by regular and accurate data collection and audit. 	Fully automated using SchoolScreener's automated data management and workflow application. Used over 2 million times since 2013.
The screening provider supplies parents, carers and guardians with information so they can make a choice about their child having screening.	SchoolScreener's automated system supports via automated opt in/opt out management.





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The screening provider supplies parents, carers and guardians with information so they can make a choice about their child having screening.	Using SchoolScreener® Vision – the Provider uses Keeler Cards and Occluding Glasses. If using SchoolScreener's onscreen screening, SchoolScreener can provide Occluding Glasses
If a child needs further assessment following screening, the screening provider refers them to the appropriate service(s). The provider is responsible for maintaining screening records, and informing parents, carers or guardians of the screening outcome for their child.	Fully automated using SchoolScreener® Vision.
To ensure a coordinated and seamless service in a multi-provider environment, the screening programme provider must work to common standards, policies and protocols with providers of other elements of the complete pathway (such as primary care, community, and hospital eye services).	Fully automated using SchoolScreener® Vision including feedback from secondary care to community care and full audit.
Identification and invitation of the eligible population	
The local authority identifies their eligible population of children aged 4 to 5.	This information is uploaded once to SchoolScreener [®] Vision via CSV file. Once uploaded there is no further manual administration with SchoolScreener [®] Vision automating all requirements including in school data management when screening.
Eligible children are all those who turn 4 in the year preceding the beginning of the school year (with the school year running from September to the following August). It is expected that the local authority will make all reasonable efforts to ensure that any eligible children aged 4 to 5 years who move into the area following the start of the school year are identified and offered vision screening.	





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Children educated at special needs schools have visual assessment using a test appropriate for their developmental stage in line with current Royal College of Ophthalmologists' guidance.	
The provider supplies written information about the child vision screening programme to parents, carers or guardians when screening is offered	Fully automated by SchoolScreener® Vision and communications can be in any language.
Opt-in versus opt-out	
The local authority determines whether to provide an opt-in or an opt-out service.	Fully automated using SchoolScreener® Vision and SchoolScreener® ParentPortal
An opt-in service is one where parental acceptance is sought prior to the screening examination. This runs the risk of lower uptake and may miss children who are at multiple disadvantages.	
An opt-out service assumes acceptance of the screening offer unless the parents, carers or guardians decline screening. An opt-out service has higher uptake levels than an opt-in service. However, it may risk a child being screened when their parents, carers or guardians might have wished otherwise.	





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The screening test and communicating the outcome	
All children who are screened are tested by an orthoptist-led screening service, using the Keeler Crowded logMAR test. An orthoptist-led service is run by a registered orthoptist or a vision screener with competency confirmed by a registered orthoptist.	
Children who have already been prescribed glasses or contact lenses should wear them for the test.	
Children unable to complete the screening test due to lack of co-operation	
(or any other reason) either undergo a second testing attempt or are	Process fully automated using
referred by the provider directly into community or hospital eye services	SchoolScreener [®] Vision.
The provider should communicate the outcome of the screening test to the child's parents, carers or guardians.	Using SchoolScreener® Vision, automated personalised printed letters for parents are produced. Or, fully electronic version using the SchoolScreener® ParentPortal®
Referral of children needing further assessment	
The provider is responsible for ensuring all children needing further assessment are referred to the appropriate service.	Fully automated process using SchoolScreener® Vision.
For management of children with a visual acuity in one or both eyes of less	Process automated using
than 0.20 LogMAR on the Keeler Crowded LogMAR test, refer to the Royal College of Ophthalmologists' diagnostic pathway for details.	SchoolScreener [®] Vision.
Children unable to complete the screening test (for example due to lack of co-operation) should either have a second testing attempt or be referred directly to a community or hospital eye service.	Process/pathway fully automated using SchoolScreener® Vision





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Providing the Service

Roles and accountabilities through the screening pathway

The service provider is responsible for the provision of a robust pathway. The local authority is responsible for commissioning this service and managing performance of this pathway. The local authority should obtain assurance from the service provider that systems are in place to maintain the quality of the whole screening pathway. This will include, but is not limited to:

 day to day oversight of all aspects of the programme 	This is supported through automated reporting and dashboards from SchoolScreener® Vision. Including the ability to compare outcomes between screeners, schools and geographies in the locality served.	
 prompt and safe onward referral to the appropriate service. 	Pathway management and reporting automated by SchoolScreener® Vision.	
Within their organisation, the provider is recommended to have (with appropriate deputies) a:		
 local coordinator - the operational lead for the local programme. 	Local coordinator receives real time reporting to support management and decision making	





 clinical lead - a clinician trained in the diagnosis and management of visual function and eye movement disorders, providing support and clinical oversight. 	Clinician lead receives real time reporting from SchoolScreener® Vision.
Provider responsibilities	
The service provider is expected to:	
invite all eligible children for screening	SchoolScreener [®] Vision allows for full management of screening communications, from opt-in/out to delivery.
 provide written information to parents, carers or guardians explaining their choice regarding their child's participation in the screening programme 	SchoolScreener® Vision allows for full management of screening communications, from opt-in/out to delivery, including custom messsaging
 conduct vision screening in line with national recommendations 	Supported using SchoolScreener® Vision with Keeler Cards or laptop Keeler screening
 ensure children are appropriately referred if they need further diagnostic testing. 	Further referral pathways and communications are automated with SchoolScreener® Vision
 provide parents, carers or guardians with the outcome of their child's vision screening test 	Fully automated with SchoolScreener [®] Vision
 fully and accurately document the results of the programme 	Fully automated with SchoolScreener [®] Vision, KPIs are anonymised and collected in a shareable dashboard.
 work to recommended standards, guidance and policies. 	Governance reporting and management automated using SchoolScreener® Vision





ensure appropriate governance structures are in place	
• develop, implement and maintain appropriate risk reduction measures, and report incidents in a timely manner	Governance reporting and management automated using SchoolScreener® Vision
• continuously ensure quality and safety, including taking part in local quality assurance (QA) processes and implementing and recommended actions.	Reporting and management automated using SchoolScreener® Vision
 ensure the screening workforce has access to appropriate training and continuing professional development (CPD) in order to maintain competence. 	Supported using SchoolScreener [®] Vision
Programme co-ordination and oversight	
The provider and the commissioning body should meet at regular intervals to monitor and review the local screening pathway and outcomes	With SchoolScreener® Vision, both provider & commissioning body receive automated reporting according to locality standards
Clinical and corporate governance	
The provider should:	
• ensure that there is appropriate level of clinical oversight of the programme and have internal governance of the services provided	Governance reporting and management automated using SchoolScreener® Vision
• regularly monitor and audit the screening programme, and assure the provider organisation's board of the quality and integrity of the screening programme	Automated using SchoolScreener® Vision
 produce an annual report of the screening programme 	Data and reporting fully automated according to locality requirements using SchoolScreener® Vision





Governance	
The commissioner should:	
• be assured that appropriate clinical oversight and governance arrangements are in place	Governance reporting and management supported using automated reporting and data management from SchoolScreener® Vision
• be assured of the quality and integrity of the programme through the receipt of monitoring and audit information	Fully automated using SchoolScreener [®] Vision
Cross-Organisational Working	
The screening programme is dependent on effective working relationships (formal and informal) between the screening programme, ophthalmology departments, community orthoptic services, local educational services, optometric services, and primary care professionals, including school nursing or healthy child services, optical practices and GPs. It is essential that the responsible care provider is identifiable at all times, including during and after handover of care	Supported by data reporting to all stakeholders and related work processes, automated using SchoolScreener® Vision. This includes day-to-day planning by local co-ordinator
The provider is expected to fully contribute to ensuring that cross boundary systems are in place to maintain the quality and safety of the entire screening pathway.	Supported by data reporting to all stakeholders, and related work processes automated using SchoolScreener® Vision. This includes day-to-day planning by local co-ordinator
Information about child vision screening	
At the start of the school year, and at other relevant points throughout the screening pathway. The provider should supply parents, carers or guardians with relevant information	Automated using SchoolScreener® Vision





The parent leaflet may provide a useful guide for discussion. Where there are any specific communication requirements (for example, visual or hearing impairment, or where English is not the parent, carer, or guardian's first language), the provider should use appropriate interpretation services	
Data recording and monitoring	
Data recording and monitoring	
The professional undertaking the screening examination is responsible for ensuring that the results and screening outcomes are recorded. They should enter results on an IT system that has demonstrable failsafe mechanisms in place which are monitored and managed.	SchoolScreener® Vision's automated data management, administration and reporting system has been, to date, used over 3,000,000 times by many NHS, Local Authorities, and other providers.
Results Reporting	
For children who require further assessment, were absent, or were not tested, the provider should explain the outcome to parents, carers or guardians in writing. Where possible, more detailed information should be made available if requested.	Fully automated using SchoolScreener® Vision
Transfer and discharge from care obligations	
Children who require further assessment (onward referral), or who are unable to complete the screening test, remain the responsibility of the screening provider until an onward referral is accepted by the relevant service provider.	Data management, reporting and communications automated using SchoolScreener® Vision





The provider retains care obligations throughout the vision screening care programme unless a formal transfer of care is made to another care provider, and this is accounted for within a failsafe system.	
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Service standards, risks, and quality assurance	
Key Criteria and standards	
Standards for childhood vision screening for children aged 4 to 5 years are in development. Once available, providers should meet the acceptable standards for all stages of the pathway and continuously work towards the achievable programme standards	SchoolScreener® Vision has been developed so that screening protocols, results pathway management, reporting and audit are fully supported according to individual locality requirements.
Risk assessment of the pathway	
Providers should have an internal quality assurance and risk management process that assures the commissioners of their ability to manage the risks of running a screening programme.	Supported by automated reporting, using SchoolScreener® Vision
The provider and commissioner should agree plans to mitigate risk. This should involve mechanisms to audit implementation, report incidents, ensure staff training and development, and have appropriate links with internal governance arrangements.	Supported by automated reporting using SchoolScreener® Vision
Quality assurance	
Providers should participate fully in the quality assurance processes, including the provision of:	
minimum data sets as required	Supported by automated reporting using SchoolScreener® Vision





self-assessment questionnaires or tools and associated evidence	Fully automated using SchoolScreener® Vision
Providers should co-operate in undertaking audits and reviews as requested and respond in a timely manner to their recommendations.	Data management, audit and reporting all fully automated, according to locality requirements, using SchoolScreener [®] Vision
All providers should operate failsafe systems that can identify, as early as possible, children that may have been missed or where screening results are incomplete.	SchoolScreener® Vision's automated data management, administration and reporting system has been, to date, used over 3,000,000 times by many NHS, Local Authorities, and other providers.