

VINCYP STANDARDS

Approved by the Steering Group 18 December 2020

| | Definitions /Clarification | Derivation/ linked docs |
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| 1. In each eye department there is an ophthalmologist with an identified role for children/young person with VI. | | RCOphth quality standards for children and young people |
| 2. In each Health Board there is a Paediatrician with an identified role for children/young people with VI | | VIP Scotland Group |
| 3. Children are seen in a dedicated childrens/young persons' eye clinic | Applies to all children 0-16 yrs and those up to 18 and still at school should also be seen in these clinics | RCOphth quality standards for children and young people |
| 4. Children have a dedicated childrens/young persons' eye clinic waiting area | Applies to all children 0-16 yrs and those up to 18 and still at school | RCOphth quality standards for children and young people |

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| 5. Letters should be copied to parents/young people | Exceptions are where it is felt this could be harmful Includes all specialties | RCOphth quality standards for children and young people, RCPCH |
| 6. There is a process in place to measure patient satisfaction | Any level, type, form of feedback at present | RCOphth quality standards for children and young people |
| 7. Each local authority has a service for children with VI through which all children have an assessment of need by a QTVI within at most 4 weeks from the date the referral / request for assistance was sent out (if the period of referral spans the school summer holiday, this extends to 8 weeks) | A QTVI is defined as a qualified teacher holding either a post graduate degree or diploma in teaching children with a visual impairment (this may be MEd/BPhil/Postgraduate Diploma from any recognised university) or who has gained an award through completion, via a recognised route, of all competencies deemed suitable by the Scottish Sensory Centre | Review of Community Eyecare Services. Vision 2020 |

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| <p>8. Each local authority has a service for children with VI through which all children have an assessment of need by a habilitation specialist, qualified to work with children, within 4 weeks of referral.</p> | <p>A qualified habilitation specialist is defined as one who meets the agreed Mobility21 Quality Standards for Provision of Habilitation Training (this may be a habilitation specialist, rehabilitation worker with additional training or significant experience with children, or mobility specialist with additional training)</p> <p>In very young children the assessment may be direct (face to face) or indirect in consultation with other professionals.</p> | <p>Review of Community Eyecare Services, Vision 2020</p> |
| <p>9. There is a clear pathway to access specialist assessments, investigations and support (MRI, OCT, VEP/ERG, retinal photography, fluorescein angiography, formal visual field, genetic counselling, LVA, functional vision assessment and community services)</p> | | <p>RCOphth quality standards for children and young people</p> |
| <p>10. Written information is given to parents/young people at the time of identification of VI</p> | <p>Any form of written information is acceptable- formal information sheets, web address etc</p> | <p>RCOphth quality standards for children and young people</p> |
| <p>11. There is a service within each HB which provides early intervention and family support on identification of VI</p> | <p>This is defined as a service providing contact by a professional with experience in visual impairment and emotional and practical support for families within at most 5 working days of referral. This should be available both in the community and in hospital</p> | <p>Review of Community Eyecare Services, RCOphth quality standards for children and young people</p> |

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| 12. In each Local Authority; Health \education, Habilitation and VI support agencies meet on a regular basis to identify and review the needs of each individual child with VI and produce an interagency advisory report for each child within 8 months of identification of VI. | | |
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