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 **Special School Eye Care Service**

**SERVICE PARTICIPATION & OPT-OUT**

Dear Parent/Carer

The free service described in the

Service Information Sheet and the Service Film (click [here](https://vimeo.com/motivepeak/nhsssecsparentscarers) to watch) is **OPT-OUT**

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**YOU NEED TO LET US KNOW IF YOU**

**DO NOT WANT YOUR CHILD TO RECEIVE EYE CHECKS**

from the Special School Eye Care Service Team

If you wish to Opt-Out, please go to **SECTION 2** having ensured you have first read the Information Sheet and watched the 10 minute Service Film before making a choice.

If you would like your child to receive eye checks, please read the additional information in **SECTION 1** and complete the attached questionnaire, **About My Child’s Eyes.**

**SECTION 1**

**I WOULD LIKE MY CHILD TO RECEIVE THIS FREE SERVICE**

**ABOUT MY CHILD’S EYES FORM**

Before every child’s first appointment, the Eye Care Team will need to have as much information that is known by you, the parent/carer, about your child’s eyes and health history. This is to ensure that the service is tailored to your child’s specific needs and delivered in a way that is as comfortable and anxiety-free as possible. **If your child is already receiving regular eye care**, please indicate in the About My Child’s Eyes questionnaire to let us know where they are being seen.

Please return the completed **About My Child’s Eyes** questionnaire to the school for the attention of the Eye Care Service Coordinator by 8th December.

**INFORMATION SHARING**

**SCHOOL**

To deliver the Special School Eye Care Service, the school will need to share your contact details and information about your child with the Eye Care Team. They may also share other information which will enable the team to provide the best care for your child. This may include health information or other information which is relevant to your child’s general health and wellbeing.

**EYE CARE TEAM**

The Eye Care Team will **always** share the Eye & Vision Examination Results Report with you after your child’s appointment. This will explain your child’s eye and vision needs: for example, whether or not they need glasses, if there are any problems with their eyes and if so, how this may affect them, and what can be done to help. It will also include advice and guidance on what can be done to help them get the most from their vision.

The Eye Care Team may need to share your child’s information with other healthcare and education professionals. This may include your child’s GP or a hospital clinician where a referral is required and the Eye Care Team will keep you, the parent/carer, informed. They will also share information from the Eye & Vision Examination Results Report with the school team to enhance the approach taken where a child has a visual problem.

There may be occasions where additional tests are required and if so, the Eye Care Team will contact you and obtain specific consent where appropriate, eg. your child may need to have drops in their eyes.

**CAN I OPT-OUT AT A LATER DATE?**

Your child will continue to receive regular eye care from the Special School Eye Care Service which may include, for example, checking how well they can see, checking their eyes are healthy, prescribing glasses, regular checks to make sure the glasses are fitting comfortably, glasses repairs/replacements and regular eye tests as required.

You can opt-out your child from the service at any time by informing the school and/or the Eye Care Team.

**KEY CONTACTS**

|  |  |
| --- | --- |
| SCHOOL EYE CARE SERVICE COORDINATOR | Stuart Graham – Sir Charles Parsons School  |
| EYE CARE TEAM | Lesley Oglethorpe and Angela Henderson |

**SECTION 2**

**I DO NOT WANT MY CHILD TO RECEIVE THIS FREE SERVICE**

This NHS service is **opt-out** which means you need to let us know if you **do not** want your child to receive eye checks. Please ensure you have first read the Service Information sheet and watched the service film [here](https://vimeo.com/motivepeak/nhsssecsparentscarers) before making a choice. **If you opt-out, you are able to change your decision at any point after the time of returning this form.**

If your child is already receiving regular eye care from a hospital or other provider, the Eye Care Team will not need to see them in the school. However, if you have opted-out and your child is discharged from hospital care, for example, please contact the School Eye Care Service Coordinator if you wish your child to receive this service. You can choose at any time who you want your child to receive eye care from and where, by talking to your current provider about the options available to you.

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**To opt-out, please tick the check box and complete the table below, then return this form to the school for the attention of the School Eye Care Service Coordinator.**

[ ]  Please tick/click this box if you **DO NOT** want your child to receive eye care checks in school from the Special School Eye Care Team

|  |  |
| --- | --- |
| **My child is already receiving eye care from:**  |  |
| **Date last seen** |  |

|  |  |
| --- | --- |
| **Signature of Parent/Legal Guardian**  |  |
| **Print name** |  |
| **Child’s Name** |  |
| **Relationship to child** |  |
| **Today’s date** |  |

Please return the completed **About My Child’s Eyes** questionnaire to the school for the attention of the Eye Care Service Coordinator by 8th December

**KEY CONTACTS**

|  |  |
| --- | --- |
| SCHOOL EYE CARE SERVICE COORDINATOR | Stuart Graham – Sir Charles Parsons School |
| EYE CARE TEAM | Lesley Oglethorpe and Angela Henderson |