

REPUBLIC OF RWANDA



MINISTRY OF HEALTH

P o Box 84 Kigali

www.moh.gov.rw

**NATIONAL GUIDELINES FOR SCHOOL EYE HEALTH SCREENING IN
RWANDA**

January 2019

FOREWORD

Rwanda was one of the first countries in Africa to have a vision 2020 - the right to sight national plan for prevention of blindness, which was implemented from 2002 to 2007. The subsequent national plan ran from 2008 to 2013. The current plan developed in 2013 is integrated into the Non-Communicable Diseases (NCDs) plan. In all these plans, the priority conditions have been cataract, refractive errors, glaucoma, diabetic retinopathy, and childhood blindness. School eye health screening was not defined as a priority in these plans.

In the last few years, various organizations have expressed interest in conducting eye health screening in schools throughout Rwanda. Currently, each organization defines the methodology, the personnel and the equipment to be used. The initiators provide funding for these activities while in other situations there is a fee demanded for the service.

In the absence of national guidelines and a defined coordination framework, school screening activities will be haphazard and sometimes with no tangible benefits to schoolchildren. The chief priority of most of these institutions is to screen for refractive errors.

A recent Primary Eye Care (PEC) impact evaluation study carried out in Rwanda showed that the prevalence of RE in children under 17 years is 0.4%, while the prevalence of other issues like conjunctivitis is close to 30%. National HMIS data also indicates that conjunctivitis is the leading morbidity in young children in Rwanda. These findings suggest that eye health school screening should be comprehensive and not solely focus on refractive errors assessment.

In order to harmonize all school eye health-screening initiatives in the country, the Ministry of Health (MoH) in collaboration with other stakeholders working in eye health developed these guidelines on the coordination and regulation of future school eye health screening activities in Rwanda and standard operating procedures for specific school eye screening activities.

These eye health school screening guidelines are a resource to be utilized and compiled by anyone involved in school eye health as a school manager, eye health stakeholders or any member of the community engaged in health education.

Dr. Diane Gashumba

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Minister of Health



NATIONAL SCHOOL EYE HEALTH SCREENING GUIDELINES

Activity
<ul style="list-style-type: none">• The PEC trained nurses using the PEC assessment protocols will examine all P1 and S1 students at their school every year.
Coordination
<ul style="list-style-type: none">• At National level, the school eye health will be integrated into Primary Eye Health package as a community outreach activity into schools. Community outreach activity into schools.• The RBC / NCDs division who will liaise with the Ministry of Education will oversee this activity.• This activity will be part of MCH week and members of the TWG- Eye Health will be part of the supervision team• The lead person at District level will be the Vice-mayor Social affairs• The roll-out in every district will be coordinated by the directors of Education and Public Health. The Information will be passed through the usual channels to the schools, Health Centres and District Hospital
Implementation
<ul style="list-style-type: none">• The supervisor at the district level will be the head of Ophthalmology department at the local district hospital.• The OCO at the District Hospital will be part of the coordination of the MCH week supervision• The head of the health Centre in conjunction with the sector education officer and the head of the schools will develop the activity schedule.• At each school, the nurses trained in PEC from the health centres together with the school health focal person will conduct the eye health assessments. <p>🚩 School eye examination protocols</p> <ul style="list-style-type: none">• The Rwanda PEC examination protocols will be used to examine each child.• All children with conditions treatable in the primary eye care package will be given prescriptions for collection of medicine at the HC.• All children with conditions needing referral will be given referral forms to go to the DH for intervention.• Referral forms will be handed to the school health focal person who will send them to the parents for action.• The welfare of the child shall be at the forefront in all these activities and all child protection guidelines will be adhered to.

Treatment

- Medicines and any surgeries arising from school eye health assessments will be covered by the CBHI or any other medical insurance for their members.
- Children needing glasses will get them at District Hospitals.

Data Collection and Reporting

- The PEC nurses will record all examinations into the usual Health Centre register.
- Eye Health Examination results will be captured using the PEC School outreach data collection form.
- The compiled report from the schools in the HC catchment areas will be sent to the OCO at the District Hospital.
- The OCOs will compile reports from all HCs in their districts and forward them to RBC/NCDs and to the District leadership.
- RBC/NCDs will produce an annual report for this activity to the eye health technical working group before distribution to other stakeholders.
- The Eye Health Technical working group will review the progress every 6 months.

Timing

- This activity will happen during the first term of the academic year, at a date agreed upon by the school authorities.
- Preferably, this will be part of the mother and child health week or any other eye health community outreach activity.
- This activity should not exceed one week in each school.

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**STANDARDS OPERATING PROCEDURES FOR AD HOC SCHOOL EYE HEALTH
SCREENING IN RWANDA**

January 2019

Standard Operating Procedures for Ad Hoc School Eye Health Screening Initiatives

All School eye health-screening activities that will be conducted outside the recommended pathway through the mother and child health week or other planned eye health community outreach activity will be guided by the following procedures.

1. An application to be addressed to the Ministry of Health for approval. Accompanying documents will be:
 - Concept note for the project stating:
 - The objectives of activity
 - The target population
 - The list of personnel who will conduct the screening and their qualification,
 - The list of equipment
 - The budget for the exercise.
 - The data collection form (if not using the recommended national form)
 - The detailed methodology describing how the activities will be conducted and its timeline.
 - Details on the capacity transfer to local teams.
 - The pathway to treatment for those who are found with the problems
 - Licence to practice in Rwanda issued by the relevant regulatory bodies for all health professionals involved.
 - Letter of collaboration with the district where the target school is located.
 - Comprehensive memo describing partnerships relevant to this activity and related funding agreement if applicable.
2. The documents will be submitted to the Eye Health Technical working group for analysis and technical advice against the defined minimum standards of requirements. (Response within 5 working days)
3. Confirmation of funding to cover all the school screening activities (Screening, on-site treatment and referral treatment) must be provided
4. The name of the ophthalmic clinical officer or ophthalmic technician in the district who will oversee the screening activities in the school should be provided.
5. All children in the target school should be screened.
6. The School eye screening report verified by the supervising hospital and countersigned by the District should be sent to the MOH with a copy to RBC within 30 days after completion.
7. The ad hoc activities should not interfere or conflict with the national screening activities.
8. The timing of the school eye health activity will preferably be within the first three months of the academic year unless confirmed otherwise by the school