



NATIONAL
SCREENING
COMMITTEE

ROYAL COLLEGE OF
PAEDIATRICS AND
CHILD HEALTH

THE SECOND
**EVOLUTION OR
REVOLUTION?**

SYSTEMATIC REVIEWS OF
SCREENING IN CHILD HEALTH

TUESDAY DECEMBER 15TH 1000 - 1630
UMIST
MANCHESTER

FRIDAY DECEMBER 18TH 1000 - 1630
ROYAL COLLEGE OF PHYSICIANS
LONDON

ENROLMENT FEES: £95 & £80
[CME approved]

Five hundred providers and purchasers of child health services attended the first two **EVOLUTION OR REVOLUTION?** seminars launching the idea of reporting the reviews in public. As a result, a Children's Sub-Group of the National Screening Committee is now in being. A report on its work and priorities begins this second series of presentations.

PROGRAMME

THE NATIONAL SCREENING COMMITTEE CHILDREN'S SUB-GROUP

The introduction to the day. A summary of the new group's priorities, plans for 1999 and beyond and résumés of screening reviews not covered in today's presentations.

Seminar participants will receive more detailed coverage of these topics in the written report of the day.

FIRST, DO NO HARM

The importance of giving parents high quality information about screening programmes and back up information when their child has a positive screening test.

HAEMOGLOBINOPATHIES

Much of the work has been on secondary prevention - screening in the newborn and screening in pregnancy. In some countries there has also been progress in primary prevention by ensuring that all young people are familiar with these conditions and the concept of carrier status. Tertiary prevention - better care for people with these disorders - has also been neglected. All aspects of service provision must be improved.

CHILD GROWTH

Is revolution on the way? A short presentation in last year's EVOLUTION OR REVOLUTION? reviewed the case for further measuring during the school years: the promised high-profile workshop during the Summer re-examined all the current UK growth monitoring policies and reached a Consensus on how it should be practised for the next five years. The assessment of failure to thrive, height monitoring, quality of measurement, the public health and epidemiological usage of data and protocols/guidelines for *Health for All Children* and clinical practice were all discussed.

HIV & HEPATITIS B

The recent report on HIV screening illustrated the poor quality of service for screening of mothers in antenatal clinics. The result of poor care at this level is an increase in the number of babies presenting to paediatricians with HIV - so it is a legitimate interest of paediatrics. Screening for hepatitis B will increase demands on the NHS to ensure that babies get all their doses of hepatitis B vaccine - current performance is not well monitored and probably not good.

HEALTH VISITING AND SCHOOL NURSING - A NEW LOOK?

Has Westminster given a permanent new look to health visiting? What is the future for school nursing? With evaluation reviews of parenting programmes and school entry examinations in mind, a full hour is devoted to these questions.

issues still unresolved from the first EVOLUTION OR REVOLUTION? meeting

VISION SCREENING

What is missed in infant screening and does it matter? Do community orthoptists improve access and equity? What is the incidence of significant refractive error at school entry - have we over-emphasised amblyopia? What is the yield of vision screening after school entry. Is it justified? What about colour vision?.....

HEARING SCREENING

Neonatal hearing screen - when you hand in your systematic review your troubles are only just beginning. What about hearing tests at age 5? - to sweep or not to sweep, that is the question!

BIOCHEMICAL SCREENING

Where have we got to in the last twelve months? Do we need a trial of the tandem mass spectrometry [TMS] screening programme? This session will also report on the creation of a register of inherited metabolic disorders and provide an update on screening for cystic fibrosis.

Responsible for Screening in Child Health?

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The single source solution for



National Standard Growth Charts

Body Mass Index Charts

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Personal Child Health Records

“Purchasers whose providers are not using Personal Child Health Records should arrange for their introduction (*NHSE Child Health in the Community: A Guide to Good Practice*).”

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