

**Progressive**  
employer

**Eye Sight Tests and the Provision of  
Corrective Spectacles  
April 2008**



INVESTOR IN PEOPLE



## **Policy for the Provision of Eye Sight Tests and Corrective Appliances (Spectacles)**

### **1. Introduction:**

- 1.1 Under the Health and Safety (Display Screen Equipment) Regulations 1992, employers are obliged, under certain circumstances, to provide eye sight tests for their employees and, where deemed necessary, provide suitable corrective appliances (usually spectacles).
- 1.2 This policy has been drawn up following consultation with the Council's recognised trade unions.
- 1.3 The procedures will be applied in a non-discriminatory way, irrespective of age, disability, gender, marital status, race, religion and sexual orientation.
- 1.4 This Policy applies to all Salisbury District Council employees.

### **2. Aims of the Policy:**

- 2.1 To provide sight tests for employees and if necessary special corrective appliances (normally spectacles) to meet the requirements of the Regulations to correct vision defects at the viewing distances or distances used specifically for the display screen work concerned.

### **3. Definitions:**

- 3.1 Normal corrective appliances are spectacles prescribed for any other purpose and are not subject to assistance under the policy neither are so-called "VDU Spectacles" and other devices that purport to protect against radiation are not special corrective appliances.
- 3.2 Paragraph 1 of the Health and Safety (Display Screen Equipment) Regulations 1992, gives the following definitions:
  - 3.1.1 Display Screen Equipment – "any alphanumeric or graphic screen, regardless of the display process involved".
  - 3.1.2 User – "an employee who habitually uses display screen equipment as a significant part of his/her normal work".

### **4 Eligibility:**

The following will be eligible for assistance:

- 4.1 A person who is currently classified as a "user"
- 4.2 A person who is appointed to work as a "user", with display screen equipment, or undergoes a change in work activities to the extent that they will become a "user"

### **5 Regularity of Eye and Eye Sight Tests:**

Paragraph 5 of the Health and Safety (Display Screen Equipment) Regulations 1992 requires that an employer shall ensure that appropriate eye and eyesight tests are provided:

- 5.1 as soon as practicable after being requested by a display screen user;

- 5.2 for employees who are to become users, and who request a test, before the employee becomes a user;
- 5.3 for users, who so request a test, at regular intervals, thereafter to check the need for special corrective appliances for display screen work. For the purposes of this policy the council will pay for further eye tests on or after the date stated on the VDU Eyecare Certificate.
- 5.4 at the request of users who are experiencing visual difficulties, which may be reasonably considered to be related to the display screen work, for example visual symptoms such as eye strain or focusing difficulties.

## **6 Procedure:**

- 6.1 The provision of eye tests and spectacles by the Council will only be available under this voucher scheme, the voucher is redeemable at any branch of Specsavers. No reimbursement will be made to individuals who use other opticians.
- 6.2 You should make a request to your line manager using the VDU Eye Referral Form attached. Your line manager will verify and authorize the form to confirm that you qualify under this scheme.
- 6.3 Please make an opticians appointment allowing at least 10 working days for the Eyecare Voucher to be issued. To obtain your Eyecare Voucher please send the VDU Referral Form to the People and Organization Development Department (POD Department).
- 6.4 On receipt of the completed VDU Referral Form a Specsavers VDU Eyecare Voucher will be issued to you from the POD Department.
  - 6.4.1 The voucher must be used by the expiry date or returned unused to POD 10 days after the expiry date. Upon receipt a new valid voucher will be issued to you
- 6.5 The VDU Eyecare Voucher covers the total cost of the eye test and if on completion of the examination special corrective appliances for VDU use (usually spectacles) are required either the cost of a pair of single vision glasses from the designated range from the store or the employee can upgrade and use the voucher as a contribution towards a pair of spectacles of their choice.
- 6.6 At the end of the eye test the optician will give the employee a VDU Eyecare Certificate (one half of the voucher). This must be returned to the POD Department within 10 working days.
- 6.7 Abuse of this scheme may lead to disciplinary action.

**VDU REFERRAL FORM**

NAME: ..... SERVICE UNIT: .....

HOME ADDRESS: .....

.....

This section refers to an individual's working conditions, and should be completed by the employee requesting an eye test under the council's scheme.

Please complete the answers to numbers 1-7 in the boxes provided.

Please measure distances where required. For advice on the technical information only, please contact ICT Services.

- |    |  |                      |          |                      |           |                      |
|----|--|----------------------|----------|----------------------|-----------|----------------------|
| 1. | Size of screen characters –                                  | <input type="text"/> |          |                      |           |                      |
| 2. | Working distance in centimetres or inches (State which) to:- |                      |          |                      |           |                      |
|    | Screen   | <input type="text"/> | Keyboard | <input type="text"/> | Documents | <input type="text"/> |
| 3. | Position of documents relative to screen, e.g. side, front – | <input type="text"/> |          |                      |           |                      |
| 4. | Size of print on normal documents                            | <input type="text"/> |          |                      |           |                      |
| 5. | Numbers of hours of VDU use per day                          | <input type="text"/> |          |                      |           |                      |
| 6. | Length of single session if not continuous                   | <input type="text"/> |          |                      |           |                      |
| 7. | Approximate date of commencing VDU at work                   | <input type="text"/> |          |                      |           |                      |

If you have any queries on your individual VDU working conditions please contact your manager.

**FOR COMPLETION BY MANAGER**

The above named operates a VDU for a reasonable amount of time and wishes to undergo an eye examination in relation to his/her work as a VDU user. I therefore authorise that he/she can have their eyes tested in accordance with the council's Policy.

Signed: ..... Date: .....

Designation: .....

**FOR COMPLETION BY EMPLOYEE**

DATE OF APPOINTMENT .....

(Please ensure 10 working days for the Eyecare Voucher to be issued)

**NOW PASS THIS FORM TO POD**