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Kwara State Law No. 3 of 2013 – Childhood Sight Protection Law 2013

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A LAW TO PROVIDE FOR FREE CHILD-SIGHT SCREENING FOR EARLY IDENTIFICATION AND REFERRAL OF SIGHT IMPAIRMENT TO ENSURE PROTECTION AGAINST PERPETUAL BLINDNESS; AND OTHER CONNECTED MATTERS

BE IT ENACTED by the House of Assembly of Kwara State of Nigeria and by the authority of same as follows—

PART I - FREE SIGHT SCREENING

1. (1) As from the commencement of this Law, the State Government shall provide free sight screening against all possible forms of sight impairment for children under the age of five.

(2) Every child shall be entitled to receive free sight screening from birth until the age of five.

2. No child shall be denied access to—
   (a) early detection; and
   (b) early optical, medical or surgical management,
   of congenital or childhood cataract or other sight disorders.

PART II - DUTIES OF PARENTS, HOSPITALS AND SCHOOLS

3. Every parent or any person with parental responsibility to a child shall present the child for sight screening —
   (a) for the first screening, within three months of birth;
   (b) for the second screening, from three months to nine months of birth;
   (c) for the third screening, from eighteen months of birth to the age of two;
   (d) for the fourth screening, between the age of two and three years; and
   (e) for the fifth screening, between the age of three and five years.
4. (1) Every hospital shall carry out the sight screening of every child born at such hospital.
(2) Where a hospital does not have facility for sight screening, it shall refer the newborn to the nearest Sub-Centre.

5. A health officer may be authorised by the Commissioner to enter a dwelling place to examine any child in such place, and where the health officer finds that a child has not been sight-screened as provided under this Law, he may direct any parent or any person with parental responsibility to take the child to the nearest health centre for sight screening.

6. No private or public school in the State shall admit a child into any nursery or primary class unless evidence is produced showing that the child has been sight-screened in compliance with this Law.

PART III – OFFENCES AND PENALTY

7. (1) No person shall deny any child access to sight screening.
(2) No person shall prevent a child from being presented for sight screening.
(3) Any person who contravenes subsection (1) or (2) commits an offence and is liable on conviction to a fine not exceeding N25,000 or imprisonment not exceeding one month, or both.

PART IV – THE CENTRE AND SUB-CENTRES

8. (1) Subject to the approval of the Governor, the Commissioner may designate a hospital to be known as Childhood Sight Protection Centre (in this Law referred to as “the Centre”).
(2) At least two hospitals in each Local Government Area of the State shall be designated as Childhood Sight Protection Sub-Centre (in this Law referred to as “Sub-Centre”).

9. The Centre shall have power to—
   (a) train midwives to examine a newborn child for possible causes of sight impairment;
   (b) educate mothers attending antenatal clinics to look out for or detect different sight-threatening conditions;
(e) train community health officers involved in immunization to examine children for possible sight impairment;

(d) train medical officers and paediatricians involved in the care of children to examine causes of sight impairment;

(e) determine the detection rate, pattern and referral of potential causes of sight impairment by the trained personnel;

(f) train the tutors and management of the schools of nursing and midwifery, and community health officers on possible causes of sight impairment and advocate for inclusion of early paediatric sight inspection into curriculum of the schools; and

(g) do such other things as may be necessary to facilitate the discharge of its functions.

10. The functions of the Centre and Sub-Centres shall be to——

   (a) put in place necessary facilities that will aid detection of congenital or infantile cataract and other childhood sight disorders;

   (b) ensure that children are screened at birth and during immunization exercise in the first year of life and also at primary school enrolment;

   (c) ensure that all forms of childhood blindness are eradicated;

   (d) improve childhood sight care services;

   (e) engage in advocacy, sensitization and public awareness of every child care-giver on the need to present a child for early screening;

   (f) ensure that mechanisms are put in place to ensure sight screening at birth in every hospital or any health care centre where delivery are carried out;

   (g) facilitate appropriate surgery where necessary to restore vision to children with sight impairment to avoid perpetual blindness;

   (h) engage community leaders in their advocacy and campaign;

   (i) ensure strict documentation of forms, keep proper registers, referral and feedback cards of potential cases of sight threatening ocular defects detected in any child;

   (j) engage in public education, training of health workers and counseling of the members of the communities to ensure compliance with the provisions of this Law;

   (k) undertake research activities that will enhance the detection of various sight threatening ocular anomalies;
collaborate with donor agencies and international organizations for effective implementation of this Law; and

(m) do such other things that are essential and expedient to the effective discharge of their functions.

PART V- CHILDHOOD SIGHT PROTECTION COMMITTEE

11. (1) There is established for the management of the Centre and Sub-Centres a Childhood Sight Protection Committee.

(2) The Committee shall consist of—

(a) a Chairman who shall be an ophthalmologist with at least 10 years cognate working experience;

(b) one representative of each of the following—

(i) Ministry of Health,
(ii) Ministry of Justice,
(iii) Nigeria Paediatric Ophthalmology Society,
(iv) University of Ilorin Teaching Hospital (Paediatric Unit, Department of Ophthalmology),
(v) a non-Governmental organization with programmes related to welfare of children,
(vi) Nigeria Ophthalmic Nurses Association,
(vii) Nigeria Union of Teachers,
(viii) a voluntary donor agency;

(c) the Head of Department of Health of each Local Government Area of the State; and

(d) The Secretary to the Committee.

(3) The Ministry of Health shall be the superintending ministry of Committee.

12. (1) The Chairman and Secretary of the Committee shall be—

(a) appointed by the Governor; and

(b) paid such remuneration as may be determined by the Governor.

(2) The members mentioned in section 11(2)(b)(iii) to (viii) shall be appointed by the bodies they represent.

(3) Members of the Committee other than ex-officio members shall hold office for a term of 4 years and may be re-appointed for another term of 4 years and no more.
(4) The Governor may, if he deems it expedient in the public interest, revoke the appointment of a member appointed by him.

(5) A member other than an ex-officio member may resign his appointment by a letter addressed to the Governor and upon the acceptance of the resignation by the Governor, the appointment of such member shall cease.

13. The supplementary provisions contained in the Schedule hereto shall have effect with respect to the meetings and proceedings of the Committee and other matters mentioned therein.

14. The functions of the Committee shall be to –
   (a) make decisions for the Centre and Sub-Centres;
   (b) coordinate, regulate and monitor the implementation of the activities of the Centre and Sub-Centres;
   (c) ensure the implementation of the policies of the Centre and Sub-Centres;
   (d) set guidelines for effective cooperation with other organizations;
   (e) make recommendations when necessary on any important issue;
   (f) ensure public awareness of the Centre and Sub-Centres; and
   (g) carry out such other functions as are necessary and expedient for the effective implementation of this Law.

15. The Secretary to the Committee shall –
   (a) make arrangements for the meetings of the Committee including the agenda;
   (b) keep permanent records of the members present and the business transacted at every meeting of the Committee;
   (c) convey the decisions of the Committee to the members; and
   (d) perform other duties of the Committee as may be directed from time to time by the Chairman.

16. In this Law, unless the context otherwise requires –
   “Centre” means the Childhood Sight Protection Centre designated under section 8(1);
“child” means a person who is under the age of 5 years;
“Commissioner” means the Commissioner for Health;
“Governor” means the Governor of Kwara State;
“hospital” includes clinic, maternity home or any other place where medical services are provided;
“person with parental responsibility to a child” means a guardian, custodian or any other person responsible for the care of the child;
“State” means Kwara State of Nigeria;
“Sub-Centre” means the Childhood Sight Protection Sub-Centre designated under section 8(2).

Citation.

17. This Law may be cited as the Kwara State Childhood Sight Protection Law, 2013.

SCHEDULE

(Section 13)

SUPPLEMENTARY PROVISIONS RELATING TO THE COMMITTEE

Meetings of the Committee.

1. (1) The Committee shall hold meetings as may be necessary for the fulfillment of its functions at such time and on such days as the Chairman may appoint.
   (2) The meetings of the Committee shall hold at the Ministry of Health.

Chairman at meetings.

2. At a meeting of the Committee –
   (a) the Chairman shall if present chair the meeting; and
   (b) if the Chairman is absent the members present at the meeting shall appoint one of their members to preside.

Voting.

3. Every question at a meeting of the Committee shall be determined by a majority of the votes of members present and voting on the question and in the event of an equal decision of votes, the chairman of the meeting shall have a casting vote.

Calling a meeting.

4. Five members of the Committee may by notice in writing signed by them request the Chairman to call a special meeting of the Committee for the purposes set out in such notice and the Chairman shall thereupon call a special meeting.
5. The Committee shall have power to regulate its proceedings and may make standing orders.

Validity of proceedings
6. The Committee may function notwithstanding—
   (a) any vacancy in its membership or absence of any member;
   (b) any defect in the appointment of a member; or
   (c) that a person not entitled to do so took part in its proceeding.

Quorum
7. The quorum of any meeting of the Committee shall be the Chairman (or anyone standing in for him) and six other members.

Co-opt of member
8. (1) The Committee may co-opt any person as a member for any particular meeting for the purpose of obtaining advice.
   (2) Such co-opted member shall not be entitled to vote nor shall he count towards the quorum.

Sub-committees
9. (1) The Committee may appoint sub-committees (inclusive of standing and ad-hoc committees) to advise it or take other actions on any matter which the Committee may participate in or for other purposes whether general or special relating to the functions of the Committee which in the opinion of the Committee would be better regulated or managed by means of sub-committees.
   (2) Sub-committees appointed under this paragraph shall—
      (a) consist of such number of persons as may be determined by the Committee and a person other than a member of the Committee shall hold office on a sub-committee in accordance with the terms of his appointment; and
      (b) be presided over by a member of the Committee.
   (3) The quorum of any sub-committee shall be determined by the Committee.
   (4) A decision of a Sub-Committee shall be of no effect until it is approved by the Committee.
(5) Subject to the provisions of this Law, a Sub-Committee may make standing orders for the purpose of regulating its own proceedings.

This printed impression has been carefully compared by me with the Bill which was passed by the Kwara State House of Assembly and found by me to be a true and correctly printed copy of the said Bill.

Clerk to the House