Putting Healthy Vision in Sight-
Critical Steps for Your Program

April 8, 2017
Your Presenters . . .

P. Kay Nottingham Chaplin, Ed.D
- Education and Outreach Coordinator – National Center for Children’s Vision and Eye Health at Prevent Blindness
- Director - Vision and Eye Health Initiatives for The Good-Lite Company and School Health Corporation
- Member – National Advisory Committee to the National Center for Children’s Vision and Eye Health at Prevent Blindness

Sandra S. Block, OD, M.Ed, MPH
- Professor; Medical Director, School-Based Clinics; Director of School-Based Research for the Illinois College of Optometry
- Member- Advisory Committee of the National Center for Children’s Vision and Eye Health

Kira Baldonado, BA
- Director, National Center for Children’s Vision and Eye Health at Prevent Blindness
- Member – Question Workgroup, Children’s Vision Massachusetts, to look at Birth to 3 Years vision screening
P. Kay Nottingham Chaplin, Ed.D

- Employed by Good-Lite and School Health Corporation
- However . . . The opinions expressed in this presentation are solely those of the presenter based on research and professional experience.

Kira Baldonado, BA

- This presenter has no conflicts of interest to declare.
- The opinions expressed in this presentation are solely those of the presenter based on research and professional experience.

Sandra S. Block, OD, M.Ed, MPH

- This presenter has no conflicts of interest to declare.
- The opinions expressed in this presentation are solely those of the presenter based on research and professional experience.
Today’s Presentation Goals . . .

To provide easy-to-implement, evidenced-based information to assist HS/EHS Programs in developing a strong vision health system for children. Participants will (1) learn vision screening methods (2) gain access to resources that will improve their vision health programs, and (3) learn how parents want to be engaged in follow-up to eye care.

After this session you will be able to:

1. List 3 special populations of children with diagnosed medical conditions that should bypass vision screening and go directly to eye exam.
2. Describe 2 sets of appropriate optotypes for optotype-based screening and 2 devices for instrument-based screening.
3. Describe 2 free resources that can help educate parents about their children’s vision and eye health and improve follow-up to care.
Madison’s Giraffe
12-Component Strong Vision Health System of Care to Help Ensure Future “Madisons” Differentiate Giraffe Eyes
12 Components of a Strong Vision Health System of Care

Children’s Vision Health

2014 World Forum on Early Care and Education – 81 nations represented

http://nationalcenter.preventblindness.org/resources-2
12 Components of a Strong Vision Health System of Care

--- Evaluation ---

**Annual Vision Health Program Evaluation Checklist**

<table>
<thead>
<tr>
<th>Checklist</th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Our program ensures that all parents/caregivers receive educational material, which respects cultural and literacy needs, about the importance of:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Good vision for their child now and in the future.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Scheduling and attending an eye exam when their child does not pass vision screening</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Increased risk for vision problems in defined high-risk populations.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Our Children’s Vision Health System Action Plan**

Directions: Review your responses from the program evaluation form and the notes written for each item. In all areas where “no” was the response selected, or your notes indicate a need for improvement, establish the next steps your program will take to improve efforts in that area. Once all responses have been accounted for, establish your top three priorities out of your needed actions, a date to review progress, and a completion date.

**Needed actions:**

1. 

2. 

3. 

**Priority #1:**

**Priority #2:**

**Priority #3:**

Visit [http://nationalcenter.preventblindness.org/year-childrens-vision](http://nationalcenter.preventblindness.org/year-childrens-vision) for information and resources that will help you improve your vision health program.
4 Key Considerations for Creating a Strong Vision Health Program for Children like Madison

1. Implement an evidence-based approach to vision screening.

2. Support families.

3. Ensure effective communication among all stakeholders.

4. Assess your competency—are you making a difference?

Each “key consideration” includes multiple components.
Key Considerations:

1. Implement an evidence-based approach to vision screening
Children Who Should Bypass Vision Screening and Go Directly to Eye Exam - NCCVEH

- Readably observable ocular abnormalities
  - Strabismus
  - Ptosis

- Neuro-developmental disorders, such as:
  - Hearing impairment
  - Motor, such as CP
  - Down Syndrome
  - Cognitive impairment
  - Autism Spectrum Disorder
  - Speech / Language Delay

- Systemic conditions with ocular abnormalities, such as:
  - Diabetes
  - Juvenile Arthritis

- Parents or siblings with history of:
  - Strabismus
  - Amblyopia

- History of prematurity
  - < 32 completed weeks

- Parents who believe their child has vision problem
  - Message to primary care providers: Don’t wait and see
Vision Screening Approach for Madison . . .

Screen vision with age-appropriate and evidence-based tools and procedures, including optotypes (pictures) and/or instruments.

Establish and follow policies for screening or direct referral to an eye care provider for children with special needs.

Include vision screening training for your staff that leads to state and/or national certification in evidence-based screening procedures.
We ensure new staff members are formally trained within 3 months of employment through the National Center, a Prevent Blindness affiliate program, or a state-approved training program.

If we use an “eye chart”, it meets national and international design guidelines for standardized eye charts.

We use National Center guidelines for when to bypass vision screening and move directly to eye exam.

If we use instruments, the referral criteria is set according to recommendations from the National Center for Children’s Vision and Eye Health at Prevent Blindness or our local eye care providers.

We use appropriate occluders.
NOT Recommended by NCCVEH and/or AAP

“Sailboat”

Allen Pictures

Lighthouse or “House, Apple, Umbrella”

Snellen

Tumbling E

Landolt C
Preferred Optotypes for Ages 3 to 7 Years

- NCCVEH
- AAP

Recommend LEA SYMBOLS® and HOTV letters as optotypes


Research supports using single, LEA SYMBOLS® optotypes surrounded with crowding bars at 5 feet for children ages 3, 4, and 5 years.

NCCVEH Option - LEA SYMBOLS® for children ages 3, 4, and 5 years at 10 feet

Sight Line Kit
Oculuders — Younger Children < 10 Years

Unacceptable Occluders Ages 3, 4, and 5 years

- Hand
- Tissue
- Paper or plastic cup
- Cover paddle

Why unacceptable?

Children can easily peek

Resources to Ensure Proper Screening for Madison...

Prevent Blindness Certified Screener

Children’s vision screening training and certification

Prevent Blindness America has the only national program for training and certifying screeners.

Children’s Vision Health

How to Create a Strong Vision Health System of Care

by P. Kay Nottingham Chaplin, Jean E. Ramsey, and Kira Baldonado

The authors thank the members of the Advisory Committee for the National Center for Children’s Vision and Eye Health at Prevent Blindness for their support in the development of this article.

Children, a child enrolled in Head Start did not have a vision screen.

Research suggests that up to 1 in 20 preschool-aged children may have a vision disorder.


Characteristics of Tests of Recognition Visual Acuity for Screening the Vision of Children Ages 3 Through 5 Years (36 to <72 Months)

The most commonly measured type of visual acuity, recognition visual acuity, is defined as the ability to identify certain optotypes (letters, numbers, or figures) at a specified distance. Following are characteristics of tests of recognition visual acuity based on recommendations from the National Expert Panel to the National Center for Children’s Vision and Eye Health at Prevent Blindness. Tests of recognition visual acuity whose design meets preferred practice recommendations should be used for screening in the targeted age range. Anyone using tests based on “unacceptable” characteristics should move toward using tools based on preferred practices as soon as possible.

Optotypes considered “Preferred-practice”∗

At this point, these are the only two optotypes that meet the standards of preferred practice. Other optotypes may be included in the future depending on demonstration of evidence-based research.

1. Single-surround LEA SYMBOLS®
2. Single-surround HOTV Symbols

Unacceptable optotypes

Following are examples of commonly used charts that are NOT acceptable and should not be used in a vision screening program for children aged 3 through 5 years old. Refer to Appendix A for a more comprehensive list and images of optotype-based tests that are NOT acceptable at any test distance for this age group.

- Sailboats
- Birthday cakes
- Allen Pictures
- Sjögren hands chart
- Wright figures©
- Charts with houses.
Key Considerations:

2. Components of a Strong Vision Health System to Support and Engage Families
Support Madison’s Family by . . .

Obtaining written approval to share vision screening and eye exam results with care providers (i.e., primary medical home, schools, eye care provider).

Providing written and verbal information in each family’s native language that is easy-to-understand and follow or do.

Connecting parents with peers who can assist and answer questions.
We provide vision screening referral and follow-up eye care information in the native language of all families served by our program.

The follow-up actions for families are clearly described and parents are advised to act within a specified timeframe.

We talk with the child’s eye care provider for clarification of eye exam results and prescribed treatments.
Resources to Support Madison’s Family . . .

Financial Assistance Information

Association of Schools and Colleges of Optometry
610 Executive Boulevard, Suite 510
Rockville, Maryland 20852
Phone: (301) 251-6344
Fax: (301) 770-1828
www.sconet.org

Many optometry schools offer low-cost care to people waiting to be treated by optometric students. They may also provide free care to people who pose research studies.

Catastrophic Illness Fund
6900 N. Dallas Park Road, Suite 200
Plano, TX 75024
Toll-free Patient Info: (877) 965-7223
Main: (972) 608-7141
wss.org/illnessfund

Catastrophic Illness Fund is an independent 501(c)(3) non-profit charitable organization helping patients with chronic disease, cancer or life-threatening conditions cover the expensive medications they need.

Financial Assistance Programs

Prevent Blindness Illinois
251 West Wacker Drive
Suite 1790
Chicago, Illinois 60606
312.371.2020
preventblindness.org

VS Referral Documents

Parent Education

http://nationalcenter.preventblindness.org/resources-2
Engage Peer Support Systems

- Parent-to-parent
  - I did this...
  - You can try this...
  - My eye doctor told me this...
  - Personal referrals [of doctors, resources]
- Personal advocates (for appointments)
- Provide translations
- Help parents access or get child to an eye appointment
- Peer support in treatment adherence
- Provide educational sessions to other parents and children
- Set goals for children’s health (incl. eye care) for the HS program and evaluate success
Use multiple approaches to obtain outcomes for referrals
Promote engaging the medical home
Support treatment plans and engage VI specialists if needed
Develop relationships
Key Considerations:

3. Ensure effective communication among all stakeholders
Create a system for following up with parents/caregivers to help ensure the eye exam occurs.

Send a copy of eye exam results to child’s medical home.

Create a process to help ensure that the eye care treatment plan prescribed for a child is followed.
We have a system in place to send (mail, fax, e-mail) a copy of eye exam results to children’s primary care providers.

We have a process for alerting a child’s eye care provider if the child does not wear prescribed glasses or a patch.

We talk with the child’s eye care provider for clarification of eye exam results and prescribed treatments.
Resources to Ensure Communication Among Madison’s Stakeholders

Referral for an Eye Examination

January 24, 2014

Dear Parent/Guardian,

We routinely screen vision to identify children who have vision problems or might be at risk for vision problems. We refer children for an eye exam when they do not pass vision screening or are at risk of a vision problem because of a medical or developmental reason. Vision screening does not replace a complete eye exam, but it might suggest a referral to an eye doctor for a comprehensive eye exam.

You are receiving this document because your child _____________________________ had his/her vision screened or should have an eye exam because of a medical or developmental risk for a vision problem and needs a complete eye exam with an eye doctor (an optometrist or an ophthalmologist.) It is important to schedule this exam as soon as you can. Do not miss this appointment. If the eye doctor finds a vision problem, early treatment leads to the best possible results for your child’s vision. The back of this form lists the reason(s) for this referral.

The back of this page lists the reason(s) for this referral: Please:

☐ Complete the Consent and Release of Information block below and the top part of the back of this page.

☐ Take this paper with you to the eye exam and give the form to your eye doctor.

☐ Ask the eye doctor to send exam results to us and discuss the exam results with us, if necessary.

If you need help finding a local eye doctor for your child’s appointment, use the websites below. Many programs help cover all or part of eye care expenses for children. Let us know if you want information about these programs.

Sincerely,

[Signature] (Parent/Guardian)

Referring primary care provider, school nurse, Head Start staff, Other:

Practice/Organization/Agency name and address:

Consent and Release of Information

By my signature below, I authorize: (1) the vision screening agency to release my child’s vision screening results and/or medical or developmental reason for an eye exam to the eye doctor and medical doctor (if screening did not occur in the medical home), (2) my child’s eye doctor to send exam results to the vision screening agency, (3) the vision screening agency and eye doctor to discuss exam results, and (4) the vision screening agency to send exam results to the child’s medical doctor (if screening did not occur in the medical office) for the specific purpose of notifying my child’s healthcare and educational providers of any specific vision problems, recommendations, and treatment instructions related to my child’s vision needs. I understand that I may refuse to sign this authorization and that my refusal will not affect my ability to obtain an eye exam for my child or assistance with payment for the eye exam.

[Signature of parent/guardian] (Date)

Find an eye doctor near you:

- American Academy of Ophthalmology: [www.aao.org/find_eyemd.htm](http://www.aao.org/find_eyemd.htm)
- American Optometric Association: [www.aoa.org](http://www.aoa.org)
- Centers for Medicare and Medicaid Services: [www.medicare.gov/eyecareprofessionals](http://www.medicare.gov/eyecareprofessionals)
- American Association for Pediatric Ophthalmology and Strabismus: [www.aapos.org](http://www.aapos.org)
- All About Vision: [www.allaboutvision.com/eye-doctor](http://www.allaboutvision.com/eye-doctor)
- College of Optometrists in Vision Development: [www.covid.org](http://www.covid.org)

![Referral form image]
Tips for Wearing Eye Glasses

http://nationalcenter.preventblindness.org/resources-2
Key Considerations:

4. Assess your competency— are you making a difference?
Ensure Your Vision Health System of Care is Strong Enough to Find — and Help — Children Like Madison . . .

Evaluate the effectiveness of your vision health program annually.

Develop an action plan with progress review and completion dates.

Prioritize 3 needed actions to strengthen your Vision Health System of Care.
We review our vision health program results annually to identify needs and seek solutions for barriers to follow-up care.

We compare screening results to eye exam outcomes to identify variations or needed revision in screening procedures.

We ensure training certificates are current.
Resources to Ensure Competency

12-Components of a Strong Vision Health System of Care

Annual Vision Health Program Evaluation Checklist

Evaluation Date: ___________ Completed By: ___________

Instructions: Review each component described below. Select the “Yes”, “No”, or other response that best describes your vision health program as it currently operates. Please note comments in the area indicated. Once you have responded to the questions in each of the components proceed to the “Vision Health System Action Plan” located on page 7 to identify areas for attention or improvement in your program.

1. Our program ensures that all parents/caregivers receive educational material, which respects cultural and literacy needs, about the importance of:
   a. Good vision for their child now and in the future.
   b. Scheduling and attending an eye exam when their child does not pass vision screening.
   c. Increased risk for vision problems in defined high-risk populations.

<table>
<thead>
<tr>
<th>Check Yes or No</th>
<th>Point of evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Notes: ____________________________________________

2. Our parent/caregiver written approval process for vision screening includes permission to:

<table>
<thead>
<tr>
<th>Check Yes or No</th>
<th>Point of evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Visit http://nationalcenter.preventblindness.org/year-childrens-vision for information and resources that will help you improve your vision health program.
5 Tips for Reaching Out to Head Start and Other Early Childhood Programs in Your Community
5 Tips for Reaching Out to Head Start and Other Early Childhood Programs in Your Community to Help Find Madison

1. Be available a minimum of 1 hour a month to answer questions from your local programs.
2. Provide an e-mail address where local program personnel can ask questions and designate someone from your staff to answer those questions in a timely manner.

Share the **12 Components of a Strong Vision Health System of Care.** Ask program personnel if they need assistance with any of the components.

Discuss how programs wish to receive eye exam results and strategies that program personnel can implement to help ensure treatment plans are followed.

Place links to the YOCV and the National Center on your organizational website.

Consider offering 1 free eye exam a month for parents who cannot afford an eye exam.

Discuss how programs wish to receive eye exam results and strategies that program personnel can implement to help ensure treatment plans are followed.

Share the **12 Components of a Strong Vision Health System of Care.** Ask program personnel if they need assistance with any of the components.

Discuss how programs wish to receive eye exam results and strategies that program personnel can implement to help ensure treatment plans are followed.

Place links to the YOCV and the National Center on your organizational website.

Consider offering 1 free eye exam a month for parents who cannot afford an eye exam.
Meet area eye care providers and discuss the needs of HS families

Create a resource listing local providers, hours of operation, insurance accepted, location on bus line, and ages seen (potential project for a parent or college student)

Invite providers to visit your program and talk with the families/children about vision

Report your health outcomes and NEEDS
Resource Guide for Children’s Vision
Frequently Asked Questions | List of Eye Doctors
Massachusetts 2015
Resources to support better eye health
Website for the National Center for Children’s Vision and Eye Health

- Provider education tools
- Parent/family resources
- Technical assistance
- Professional Development
- Communication tools

http://nationalcenter.preventblindness.org
Year of Children’s Vision

- [http://nationalcenter.preventblindness.org/year-childrens-vision](http://nationalcenter.preventblindness.org/year-childrens-vision)

- Archived vision screening and eye health webinars in Resources

- Free downloadable documents and fact sheets
Questions for the presenters?
Conclusion of today’s presentation

P. Kay Nottingham Chaplin
Nottingham@preventblindness.org

Sandy Block
Sblock@ico.edu

Kira Baldonado
kbaldonado@preventblindness.org