



## 5 TIPS FOR WORKING WITH YOUR LOCAL HEAD START AND EARLY CHILDHOOD PROGRAMS

The Year of Children's Vision (YOCV) is an exciting, one-of-a-kind, collaborative effort to support the vision health of children in Head Start, Early Head Start, and early childhood programs across the United States. The goal of the YOCV is to provide national guidance to staff of Head Start programs and other early childhood educators to standardize approaches to vision screening, improve follow-up for eye care for children who fail the vision screening, provide family friendly educational information, and consult with some of the nation's leading pediatric eye care providers to ensure best practices.

You can participate in this collaborative effort by reaching out to your local Head Start, Early Head Start, and other early childhood programs to offer your support in developing a strong vision health system of care. To find your local Head Start programs, contact your state's Head Start Association.

This document provides five tips on how you could offer your support. If you implement any of the tips or create additional ways to reach out to your local programs, please email your tips to [kbaldonado@preventblindness.org](mailto:kbaldonado@preventblindness.org)

### TIPS:

1. A vision screening program will already be established in the majority of your local programs. Please do not equate support with screening vision or creating a vision screening program unless that support is requested. The goal is to work collaboratively. Instead, ask your local Head Start and early childhood programs if they need assistance with, or have questions about, enhancing their vision health system of care. Examples include:
  - a. Be available a minimum of 1 hour a month to answer questions from your local programs.
  - b. 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.
2. Share the **12 Components of a Strong Vision Health System of Care** on the back of this document with your local programs. Ask program personnel if they need assistance with any of the components. For example, programs may want assistance with providing educational material for parents about what occurs in an eye exam or tips on compliance for children wearing eyeglasses.
3. Financial barriers can prevent follow-up eye exams when children are referred from a vision screen. Consider offering one free eye exam a month for parents who cannot afford an eye exam. A listing of nationally available programs can be found at: <http://nationalcenter.preventblindness.org/resources-2>.
4. Discuss how programs wish to receive eye exam results and strategies that program personnel can implement to help ensure treatment plans are followed.
5. Place links to the YOCV and the National Center for Children's Vision and Eye Health at Prevent Blindness on your organizational website.

YOCV Program Partners: National Head Start Association, National Center for Children's Vision and Eye Health at Prevent Blindness, American Association for Pediatric Ophthalmology and Strabismus, School Health Corporation, and The Good-Lite Company. YOCV Supporters: The American Academy of Optometry's Binocular Vision, Perception & Pediatric Optometry Section, Alcon, CVS Caremark Corporation, and The Fred C. and Katherine B. Andersen Foundation.

Year of Children's Vision: <http://nationalcenter.preventblindness.org/year-childrens-vision>

## 12 COMPONENTS OF A STRONG VISION HEALTH SYSTEM OF CARE

1. Ensure 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.
2. Ensure that parent/caregiver's written approval for vision screening includes permission to:
  - a. Share screening results with the child's eye doctor and primary care provider.
  - b. Receive eye exam results for your file.
  - c. Talk with the child's eye doctor for clarification of eye exam results and prescribed treatments.
  - d. Share eye exam results with the child's primary care provider.
3. Screen vision with age-appropriate and evidence-based tools and procedures, including optotypes (pictures) and/or instruments.
  - a. Follow national referral and rescreening guidelines.
  - b. Include vision screening training for your staff that leads to certification in evidence-based vision screening procedures.
4. Establish and follow policies for screening or direct referral to an eye care provider for children with special needs.
5. Rescreen or refer difficult-to-screen (untestable) children.
  - a. Research suggests that untestable children are *twice as likely* to have a vision problem than children who do not pass vision screening.<sup>1</sup>
  - b. If you have reason to believe that the child may perform better on another day, consider rescreening the child within 6 months.<sup>2</sup> Otherwise, refer untestable children for an eye exam.
6. Provide parents/caregivers with vision screening results in easy-to-understand language (both written and verbal), which respects cultural and literacy needs and provides clearly defined and time-limited steps to take for prompt follow-up with an eye care provider.
  - a. Provide written *and* verbal results.
7. Create and implement a system for following-up with parents/caregivers to help ensure that the eye exam occurs.
  - a. Identify and remove barriers to follow up to eye care, such as transportation or a lack of knowledge of what will occur during the eye exam.
  - b. Consider ways to engage parents in peer-to-peer conversations to encourage follow up to eye care and adherence to prescribed treatments.
8. Link parents/caregivers for an eye examination with an eye doctor who specializes in the care and treatment of young children, when an eye exam is needed.
9. Obtain eye exam results for your files.
10. Send a copy of eye exam results to the child's primary care provider.
11. Ensure that the eye doctor's treatment plan is followed.
  - a. Develop a plan to assist with eye patching and/or glasses, as recommended by the eye care provider.
  - b. If insurance coverage provides two sets of glasses, consider requesting the parent/caregiver leave one set in the classroom.
12. Evaluate the effectiveness of your vision health program annually.
  - a. Compare screening results to eye exam outcomes.
  - b. Identify variations in referral rates among your screeners.
  - c. Monitor screening procedures to ensure they follow current recommendations.
  - d. Monitor follow up to eye care for children who do not pass vision screening or who were untestable.
  - e. Look for common barriers in follow up to eye care and development and implement solutions.
  - f. Report end-of-year data to health, education, and community stakeholders.

### References:

<sup>1</sup>The Vision in Preschoolers Study Group. (2007). Children unable to perform screening tests in Vision in Preschoolers Study: Proportion with ocular conditions and impact on measures of test accuracy. *Investigative Ophthalmology & Visual Science*, 48(1), 83-87.

<sup>2</sup>American Academy of Ophthalmology Pediatric Ophthalmology/Strabismus Panel. (2012). Preferred Practice Pattern® Guidelines. Amblyopia. San Francisco, CA: American Academy of Ophthalmology. Retrieved from [www.aao.org/ppp](http://www.aao.org/ppp)