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# INTEGRATION OF VISION SCREENING AND OUTCOME DATA INTO EXISTING STATE SURVEILLANCE SYSTEMS

Presented by:

Sandra S. Block, OD, M Ed, FAAO , FCOVD

Professor, Illinois College of Optometry

Medical Director School Based Vision Clinics, IEI at Princeton



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# National Center for Children's Vision and Eye Health at Prevent Blindness America

- The Maternal and Child Health Bureau at the Health Resources and Services Administration of the U.S. Department of Health and Human Services recognized the need for a national uniform approach and provided support to establish the National Center for Children's Vision and Eye Health at Prevent Blindness America.
- The Center is designed to support the development of public health infrastructure to promote and ensure a comprehensive, multi- tiered continuum of vision care and eye health for young children.



**The core goal of the National Center for Children's Vision and Eye Health is to develop and implement a uniform strategy for universal screening of children prior to entry to school.**



# Specific Goals

- Develop and implement a uniform statewide strategy for universal vision screening by age 4 years.
- Establish a state Title V performance measure for vision screening.
- Determine a mechanism for uniform data collection and reporting.



# National Expert Panel

## Broad Representation.

- Multiple Disciplines: pediatrics, ophthalmology, optometry, public health, vision research, nursing
- Academicians
- Practitioners
- Parents
- Government Representation



# Workgroups

## Vision Screening Guidelines

- To develop national guidelines for children's vision screening.

## Performance Measures

- To develop white paper outline of model performance measures related to children's vision and eye health.

## Data Systems

- To develop white paper outline of model practices in structure and design of data systems relating to children's vision and eye health.





# Concerns Regarding Vision Screenings

- Screening alone will not lead to earlier detection of vision problems unless an efficient system ensures that a child who was referred for additional diagnostic testing and treatment actually receives the care.
- Vision screenings currently occur in multiple locations: pediatricians offices, other medical settings, educational settings (Head Start, preschool programs, elementary schools), and community based screenings.



# Concerns Regarding Vision Screenings

- No uniform approach to documenting vision screenings exist
- Most vision screening results are paper based or reside in “siloes” software based internal reporting systems.
- Currently, no mechanism exists to monitor/verify access to eye care providers for diagnosis and treatment.



# What is Needed?

Development of a robust, integrated data system that:

- Uses valid and reliable screening measures
- Provides a standardized data collection
- Ensures a standardized method of reporting
- Allows for appropriate tracking of that eye care was provided



# 3 Potential Options

Current providers of vision service continue to develop their own programs independently. Individual entities can experiment with design, format, and content.

## Challenges:

screening providers generally do not directly connect with eye care providers.

eye care providers do not access the same databases.

limited epidemiological information.



### 3 Potential Options

Development of a vision screening registry independent of all other registries. Similar to registries used for rare diseases.

#### Challenges:

While this would allow the registry to focus on vision issues but would also silo or isolate vision from other medical problems.

Information would not be integrated into HER or any other aspect of the other preventative services.

Epidemiological data would be incomplete.



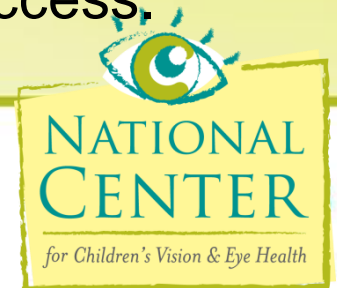
### 3 Potential Options

Work to expand the currently existing immunization registry to include vision. The primary strength is the immunization registry is in existence and relatively successful. The recommendation is to expand use to include vision screening, diagnosis and treatment.

#### Challenges:

- Cost of expansion of current system – development, expansion and maintenance.

- Access will need to be expanded to many others not currently able to access the data with variable access.



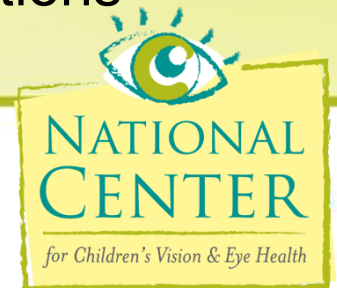
The expert panel favored expansion of the immunization registry which could lead to an integrated health information system.

An integrated data registry could lead to improved quality of vision health care for children.



## Advantages:

- Personal level: to support individuals in their own wellness and health care decision making
- Health care provider level: to ensure access to comprehensive and accurate patient data to assist in clinical decision making.
- Epidemiological level: allows for improved surveillance, monitoring changes and development of interventions

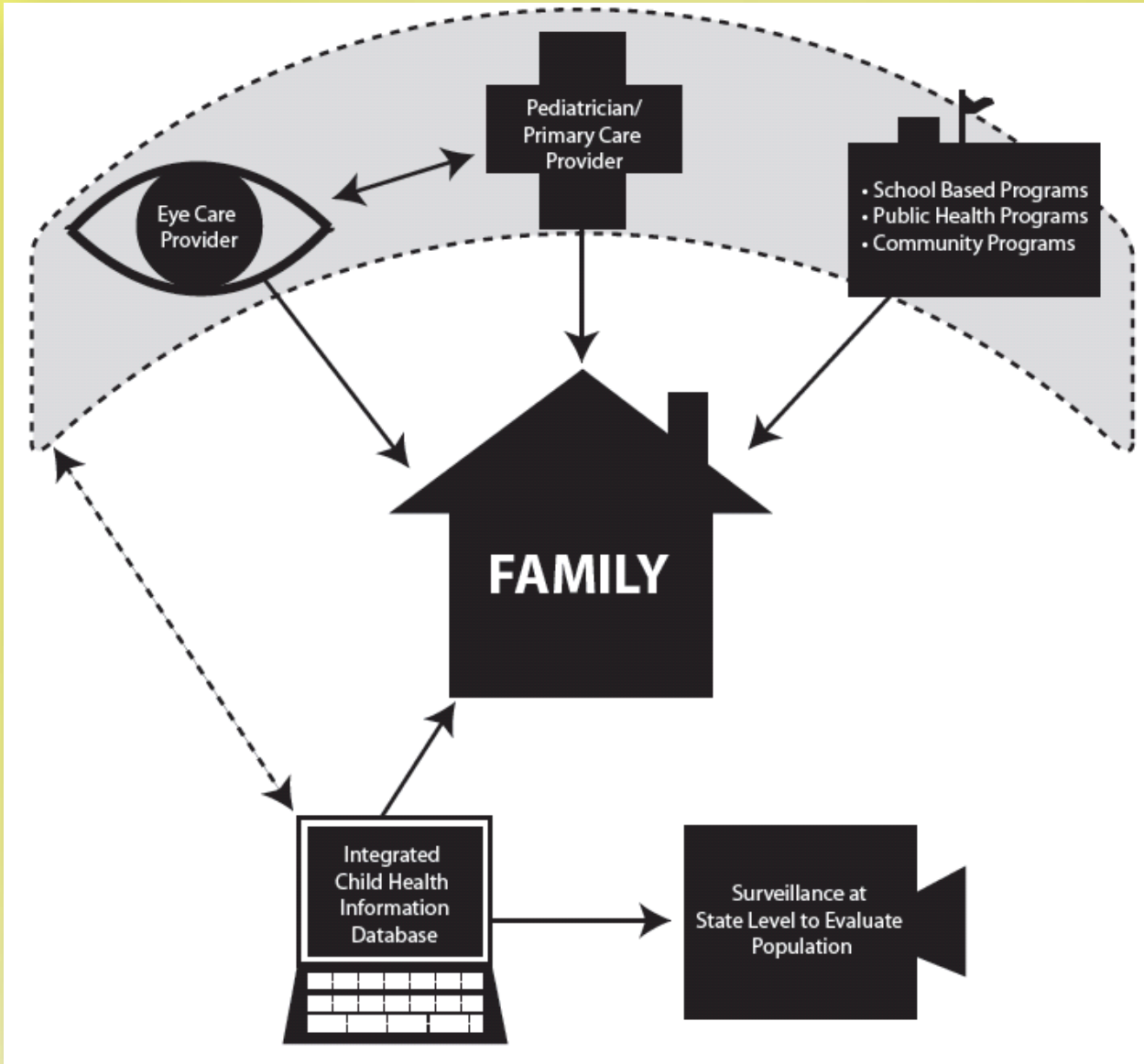




# Vision Screening Data As Part of the Immunization Registry

- Entered into the registry in the same manner statewide, no matter who conducts the screening.
- Improved validity and reliability of information
- Primary care provider would see if a child had their vision screened and whether follow up was completed.
- Eye care providers would be able to input the information about the child's visual system.
- This allows for an open line of communication.







Any questions?



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**Sandra S. Block**  
**[sblock@ico.edu](mailto:sblock@ico.edu)**

**Thank You!**



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