



Putting Healthy Vision in Sight- Critical Steps for Your Program

April 8, 2017



NATIONAL HEAD START ASSOCIATION

**2017 National Head Start
Conference and Expo**

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Your Presenters . . .

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- Member- Advisory Committee of the National Center for Children’s Vision and Eye Health



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- 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



Presenter Disclaimer

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.
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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



more awesome pictures at THEMETAPICTURE.COM

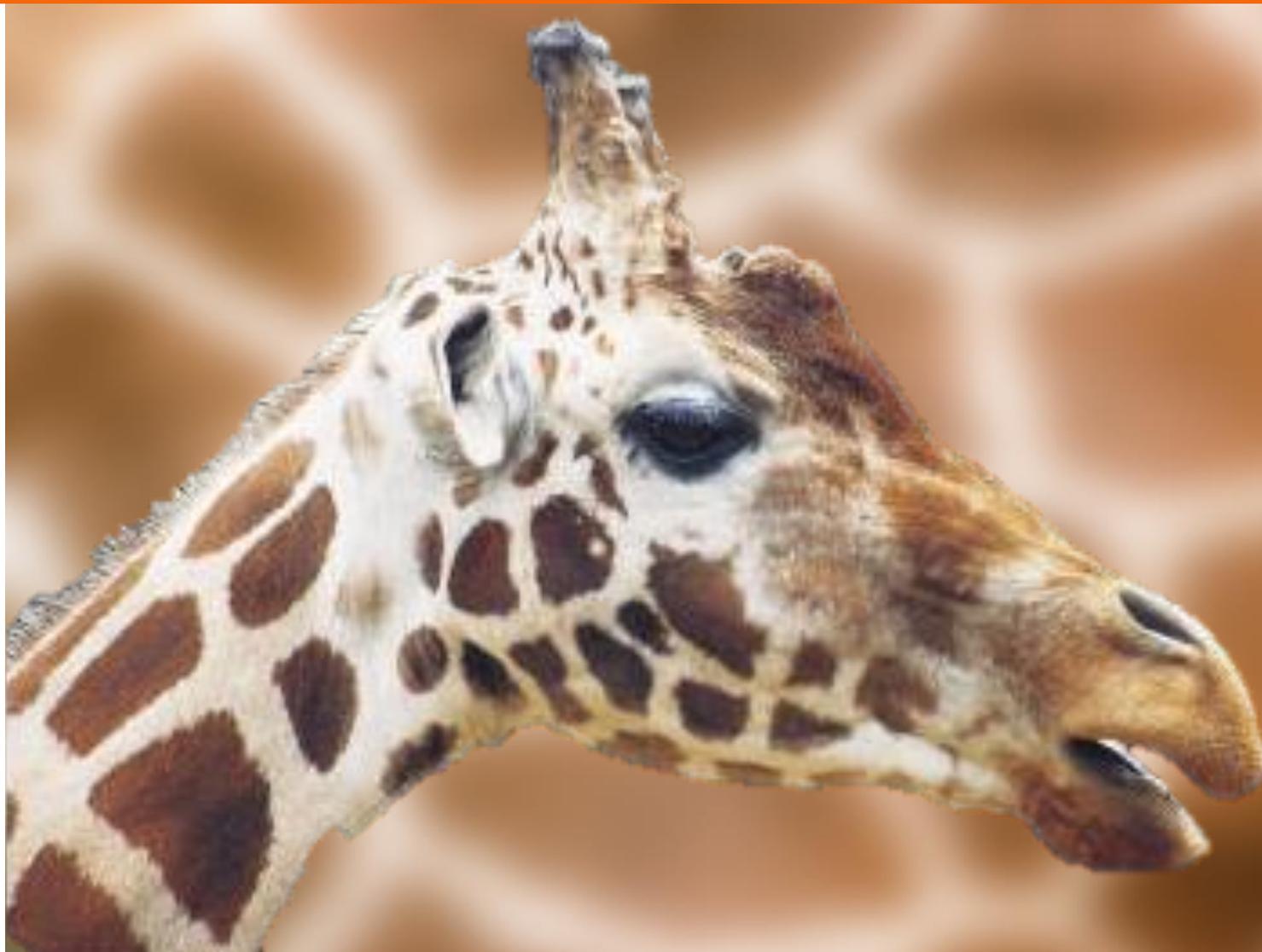


AT PREVENT BLINDNESS

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

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 as Previous Editors for their support in the development of this article.

Madison, a child enrolled in Head Start, did not pass a vision screening and received glasses after a follow-up eye exam. When she returned to her classroom with her new glasses, Madison walked into the room and looked around. A picture of a giraffe on the wall caught her attention. She walked to the picture, looked at the giraffe, turned to her teacher, and said, "I didn't know giraffes had eyes!"

This story reinforces our knowledge that children with vision disorders rarely know that the way they see their world differs from the way children with good vision experience it. Consequently, they miss out on learning opportunities all around them because of poor vision.

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Research suggests that up to 1 in 20 preschool-aged children may have a vision problem that can lead to permanent vision loss if not detected and treated early—preferably before age 3 years (Calonge, 2004). Head Start, Early Head Start, and early childhood education programs can help identify children with vision problems and refer them to eye care providers for diagnosis and treatment.

To assist front-line service providers, the National Head Start Association is collaborating with leading eye care and eye health organizations to launch an initiative called the Year of Vision (YOVC). The goal is to provide national guidance to Head Start programs and early childhood educators to standardize approaches to vision screening, improve follow-up for eye care for children who do not pass vision screening, provide family-friendly educational and consult with some of the nation's leading pediatric eye care providers to ensure best practices.

What Vision Disorders Do Young Children Have?

The development of good vision requires that the eyes see straight and

the brain receives clear, focused images from each eye. Any conditions that interfere with this development can cause vision loss known as amblyopia or "lazy eye." Four common conditions that can lead to amblyopia

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

are: strabismic amblyopia, anisometropic amblyopia, refractive amblyopia, and deprivation amblyopia.

Refractive errors such as nearsightedness, farsightedness, and astigmatism can also lead to amblyopia if not corrected.

Deprivation amblyopia occurs when the eyes are blocked or covered, preventing light from entering the eyes. This can happen if a child has a cataract or a congenitally cataracted eye.

Children with amblyopia rarely know that a child is having difficulty with vision. You can help find children with vision problems by implementing a strong vision health system of care as a part of your early education program.

CHILDREN'S VISION HEALTH: HOW TO CREATE A STRONG VISION HEALTH SYSTEM OF CARE

Madison, a child enrolled in Head Start, did not pass vision screening and received glasses after a follow-up eye exam. When she returned to her classroom with her new glasses, Madison walked into the room and looked around. A picture of a giraffe on the wall caught her attention. She walked to the picture, looked at the giraffe, turned to her teacher, and said, "I didn't know giraffes had eyes!"

This story reinforces our knowledge that children with vision disorders rarely know that the way they see their world differs from the way children with good vision see the world. Consequently, they miss out on learning opportunities in the world around them because of poor vision.

Research suggests that up to 1 in 20 preschool-aged children may have a vision problem that can lead to permanent vision loss if not detected and treated early—preferably before age 5 years (Calonge, 2004). Head Start, Early Head Start, and early childhood education programs can help identify children with vision problems and refer them to eye care providers for diagnosis and treatment.

<http://nationalcenter.preventblindness.org/resources-2>

Collaborating with leading eye care and eye health organizations to launch an initiative called the Year of Vision (YOVC). The goal is to provide national guidance to Head Start programs and other early childhood educators to standardize approaches to vision screening, improve follow-up for eye care for children who do not pass vision screening, provide family friendly educational information, and consult with some of the nation's leading pediatric eye care providers to ensure best practices.

Unless a child's eye is crossed, you will rarely know that a child is having difficulty with vision. You can help find children with vision problems by implementing a strong vision health system of care as a part of your early education program.

What is Included in a Strong Vision Health System of Care?

A vision health system of care includes at least the following 12 components:

- Ensuring that all parents/caregivers receive educational material, which respects cultural and literacy needs, about the importance of:
 - Good vision for their child now and in the future.
 - Scheduling and attending an eye exam when their child does not pass vision screening.
- Ensuring that parent/caregiver's written approval for vision screening includes permission to:
 - Share screening results with the child's eye doctor and primary care provider.
 - Receive eye exam results for your file.

12 Components of a Strong Vision Health System of Care

— Evaluation

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.

Check Yes or No	Point of evaluation
<input type="checkbox"/> Yes <input type="checkbox"/> No	We have vision health information in <u>all</u> native languages of the families that we serve.
<input type="checkbox"/> Yes <input type="checkbox"/> No	We discuss the importance of healthy vision as a part of proper child development in the general health information provided by our program.
<input type="checkbox"/> Yes <input type="checkbox"/> No	We provide parents with easy-to-understand* information on the visual milestones for children at all stages of life. <small>*Information is written at an appropriate reading level, provides graphics as well as descriptions, and has been tested for ease of understanding.</small>
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Our parent/and or health advisory committee(s) have reviewed our vision health information for, content, clarity of instruction, cultural literacy, and reading level (4 th to 6 th grade level.)
<input type="checkbox"/> Yes <input type="checkbox"/> No	We provide health information to parents of children with special healthcare needs that describe their increased risk for vision problems.
<input type="checkbox"/> Yes <input type="checkbox"/> No	We have active Parent and Health Advisory Committees

Notes: _____

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

Check Yes or No	Point of evaluation
<input type="checkbox"/> Yes <input type="checkbox"/> No	Share screening results with the child's eye care provider and primary care provider.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Receive eye exam results for our program's records.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Talk with the child's eye care provider for clarification of eye exam results and prescribed treatments.

12-Components of a Strong Vision Health System of Care



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: _____

Priority #1: _____

Priority #2: _____

Priority #3: _____

Visit <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

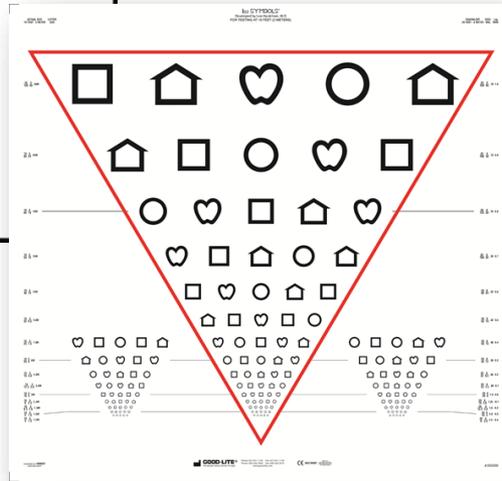
Message to primary care providers:

Don't wait and see

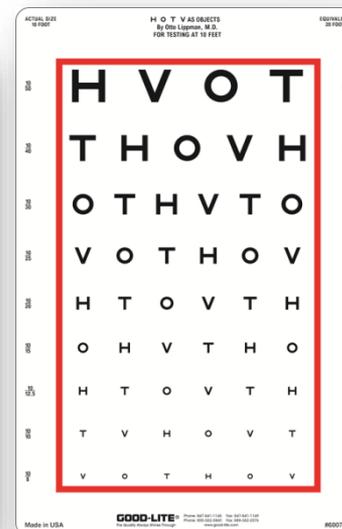
Vision Screening Approach for Madison . . .

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

YES



NO



Include vision screening training for your staff that leads to state and/or national certification in evidence-based screening procedures.

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



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Example Evaluation Items . . .

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

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 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.

We use appropriate occluders.

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



VOT Recommended by NCCVEH and/or AAP

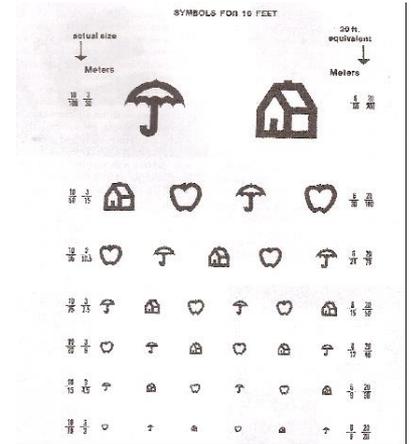


“Sailboat”

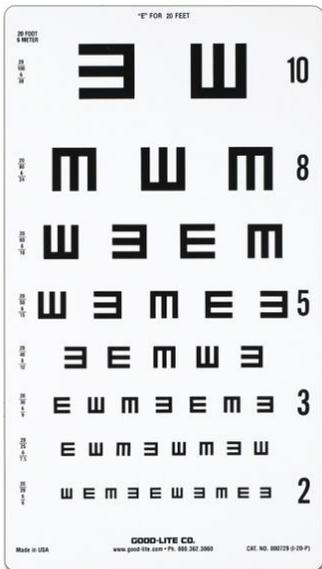


Allen Pictures

Fig. 1 (Allen). Preschool vision test characters. Actual size with 30-foot E.

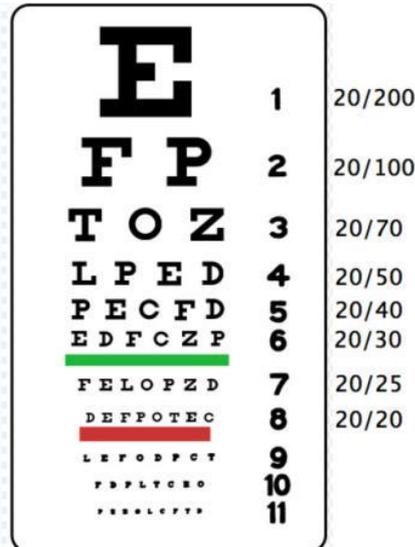


Lighthouse or “House, Apple, Umbrella”

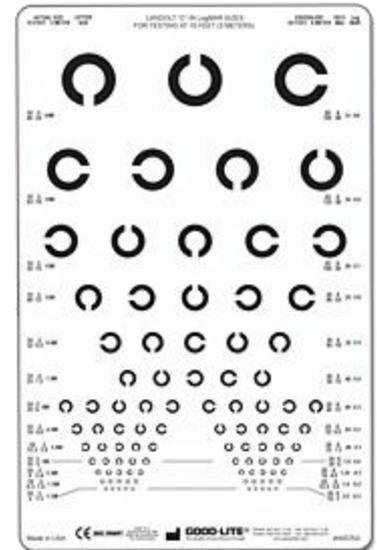


Snellen

Tumbling E



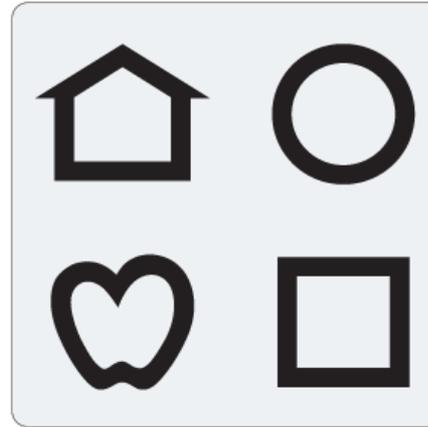
Landolt C



Preferred Optotypes for Ages 3 to 7 Years

- NCCVEH

- AAP



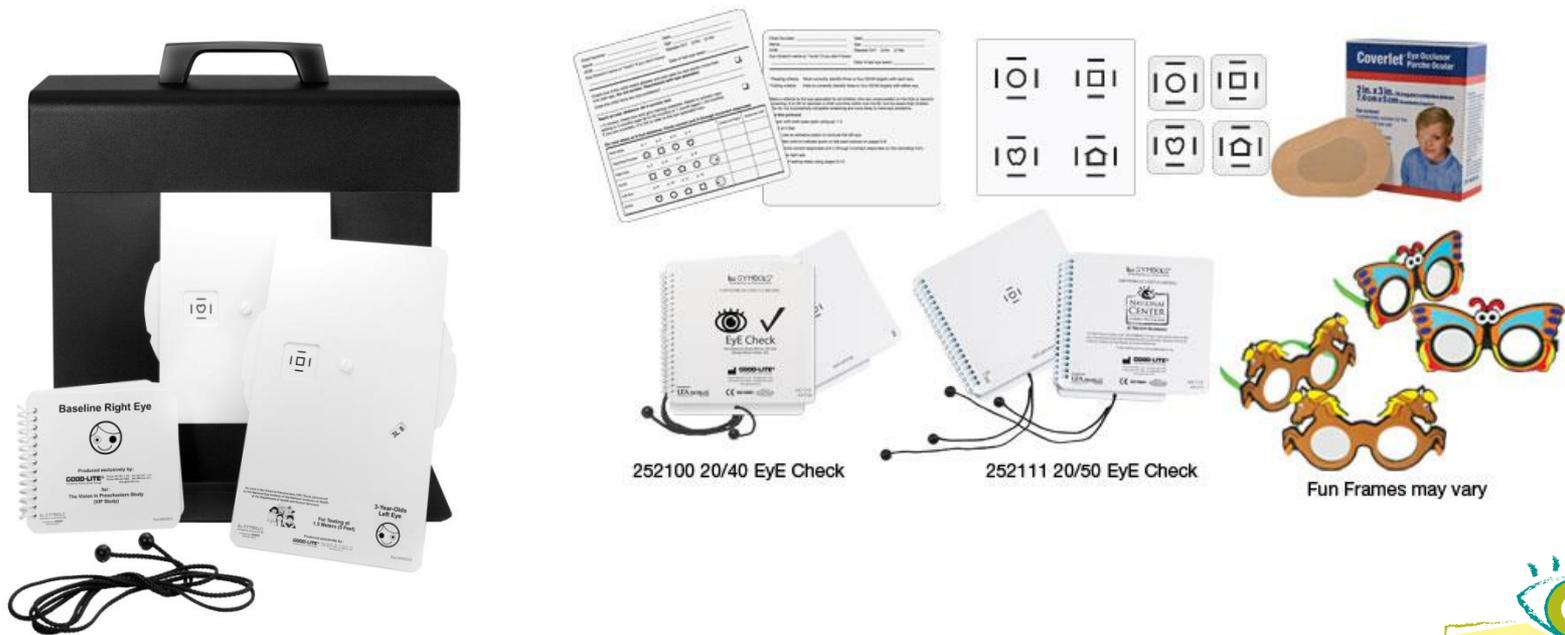
- Recommend LEA SYMBOLS[®] and HOTV letters as optotypes

Cotter, S. A., Cyert, L. A., Miller, J. M., & Quinn, G. E. for the National Expert Panel to the National Center for Children's Vision and Eye Health. (2015). Vision screening for children 36 to <72 months: Recommended practices. *Optometry and Vision Science*, 92(1), 6-16. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4274336/pdf/opx-92-06.pdf>

Donahue, S. P., Baker, C. N., Committee on Practice and Ambulatory Medicine, Section on Ophthalmology, American Association of Certified Orthoptists, American Association for Pediatric Ophthalmology and Strabismus, American Academy of Ophthalmology (2016). Procedures for the evaluation of the visual system by pediatricians. *Pediatrics*, 137(1), e20153597. Retrieved from <http://pediatrics.aappublications.org/content/pediatrics/early/2015/12/07/peds.2015-3597.full.pdf>

Single, Surrounded LEA SYMBOL at 5 feet

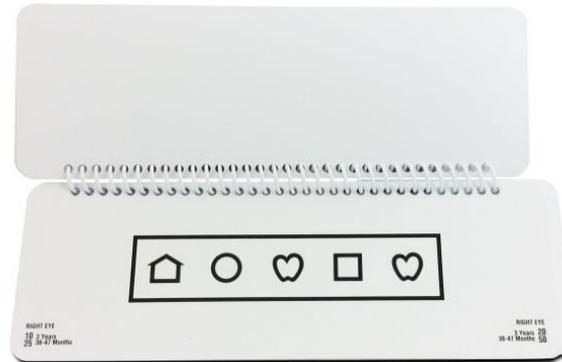
- Research supports using single, LEA SYMBOLS[®] optotypes surrounded with crowding bars at 5 feet for children ages 3, 4, and 5 years



Vision in Preschoolers (VIP) Study Group. (2009). Findings from the Vision in Preschoolers (VIP) Study. *Optometry and Vision Science*, 86(6), 619-623.

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

Sight Line Kit



Occluders – Younger Children < 10 Years



Cotter, S. A., Cyert, L. A., Miller, J. M., & Quinn, G. E. for the National Expert Panel to the National Center for Children's Vision and Eye Health. (2015). Vision screening for children 36 to <72 months: Recommended practices. *Optometry and Vision Science*, 92(1), 6-16. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4274336/pdf/opx-92-06.pdf>



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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 . . .

Children's vision screening training and certification

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

Our children's vision screening training and certification program ensures consistent, highly Blindness' professional advisors recommend screening tests designed to accurately detect and certification program prepares screeners to do the best possible job.

Why is vision screening for children so important? ►

What tests are included in the children's vision screening?

What is a Prevent Blindness Certified Screener

Join Prevent Blindness America's 35,000 volunteers, Become a vision screener! ▼

Request information about vision screening training and certification or call ☎ 1-800-331-2020 .



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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 vision 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,



Children's Vision Health

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Madison, 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...

the brain receives clear, focused images from each eye. Any conditions...

http://nationalcenter.preventblindness.org/sites/default/files/national/documents/Characteristics_of_Visual_Acuity_Charts_for_Screening_Children_NO%20INSTRUMENTS.pdf



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.

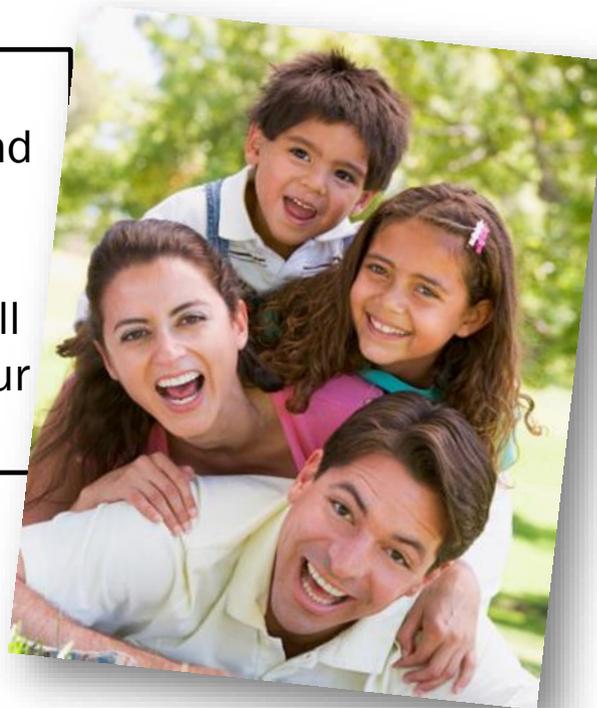
Connecting parents with peers who can assist and answer questions.



AT PREVENT BLINDNESS

Example Evaluation Items . . .

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

6110 Executive Boulevard, Suite 510
Rockville, Maryland 20852
Phone: (301) 231-5944
Fax: (301) 770-1828
www.opted.org

Many optometry schools offer low-cost care to people willing to be treated by supervised students. They may also provide free care to people who join research studies.

Chronic Disease Fund

6900 N. Dallas Parkway, Suite 200
Plano, TX 75024
Toll-free Patient Info: (877) 968-7233
Main: (972) 908-7141
www.cdfund.org

Chronic Disease Fund® is an independent 501(c)(3) non-profit charitable organization helping patients with chronic disease, cancers or life-altering conditions obtain the expensive medications they need.

Fax: (415) 561-8567

www.eyecareamerica.org

EyeCare America provides eye care to US citizens and legal residents through volunteer ophthalmologists (Eye M.D.s) at no cost to those who qualify. Go to the website or call to find out if you qualify for eye care. EyeCare America facilitates eye care for U.S. citizens or legal residents who are without an Eye M.D. and who do not belong to an HMO or do not have eye care coverage through the Veterans Administration.

- Those who are age 65 or older and who have not seen an EyeMD in three or more years may be eligible to receive a comprehensive, medical eye exam and up to one year of care at no out-of-pocket cost for any disease diagnosed during the initial exam. Volunteer ophthalmologists will waive co-payments, accepting Medicare and/or other insurance reimbursement as payment in full; patients without insurance receive this care at no charge.



211 West Wacker Drive
Suite 1700
Chicago, Illinois 60661
800.331.2020
PreventBlindness.org



Referral for an eye examination

Date: _____ Primary language: _____ Zip: _____
 Birth date (mm/dd/yyyy): _____ Grade: _____ City: _____ State: _____
 Parent or guardian: _____ Email: _____
 Mailing address: _____
 Primary phone (): _____ Home if mobile, text messages allowed (y/n) _____
 Secondary phone (): _____ Home if mobile, text messages allowed (y/n) _____
 Phone number (): _____
 Referring primary health care provider information: _____
 Office name: _____ Vision screening conducted by: _____
 Date of referral: _____ (Check all that apply):
 Reason for referral:
 Visual acuity
 Ocular alignment
 Pupillary reflex
 Retinal reflex
 Ocular structure concerns
 Family history of early onset vision problems
 Developmental delay/chronic condition (describe): _____
 Other (describe): _____
 Report from the examining eye doctor:
 Date of eye examination: _____
 (1) Uncorrected visual acuity: Right _____ Left _____
 (2) Corrected visual acuity: Right _____ Left _____
 (3) Oculomotor Assessment: _____
 (4) Diagnosis: _____
 (5) Comments: _____
 Check if appropriate:
 Medical glasses
 Contact Lenses
 Other: _____
 Corrective lenses prescribed
 Constant wear
 Near vision only
 Distance vision only
 Distance vision only
 Visual field restrictions
 Amblyopia
 Misalignment detected
 Near work may be difficult
 Preferential seating needed
 Low vision evaluation/assistance recommended
 Re-evaluation of vision advised within 6 months
 Other: _____
 Eye care provider contact information: _____ Phone: _____ Fax: _____
 EOP name: _____ City: _____ State: _____ Zip: _____
 Eye care provider, please return completed form to: _____



你知道嗎 —

兒童通常不會抱怨眼睛有問題。眼科疾病如果不及時治療，就可能導致永久失明。

- 你該做什麼：
- 在孩子玩、讀書、看電視或其他人的時候觀察孩子。如果有什麼異常情況，要及時與孩子的兒科醫生討論。
 - 與醫生討論你家庭成員的眼科病史（例如弱視、斜視、使用眼藥水更視力，或需要戴度數很高的眼鏡）。
 - 每次體檢時要詢問是否為孩子進行了眼科檢查。
 - 詢問每次眼科檢查的結果，並要明白是什麼意思。
 - 你孩子的醫生可能在眼科檢查後建議你去書眼科專科醫生，來評估在檢查中發現的問題。如果是這樣，一定要去進一步檢查。
 - 在專科檢查後，一定要將結果轉告送回給孩子的醫生，你自己也要保存一份通報報告。

眼科疾病的症狀

許多兒童的眼科疾病不能被發現。但是有些時候會有如下一些症狀出現。如果你注意到這些症狀，就要聯絡你的醫生：



Financial Assistance Programs

VS Referral Documents

Parent Education

<http://nationalcenter.preventblindness.org/resources-2>



AT PREVENT BLINDNESS

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



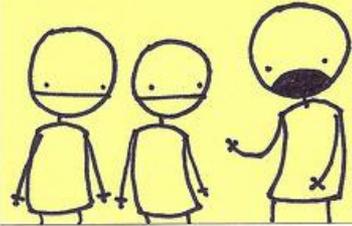
Communication is key!

- ☞ Use multiple approaches to obtain outcomes for referrals
- ☞ Promote engaging the medical home
- ☞ Support treatment plans and engage VI specialists if needed
- ☞ Develop relationships

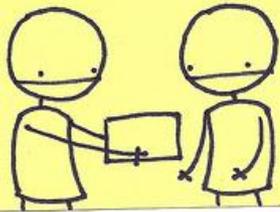


PROJECT
SUCCESS

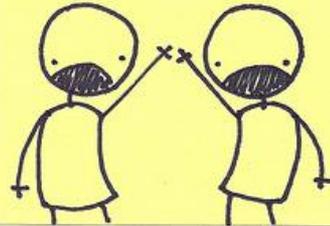
COMMUNICATION



TEAMWORK



ACHIEVEMENT

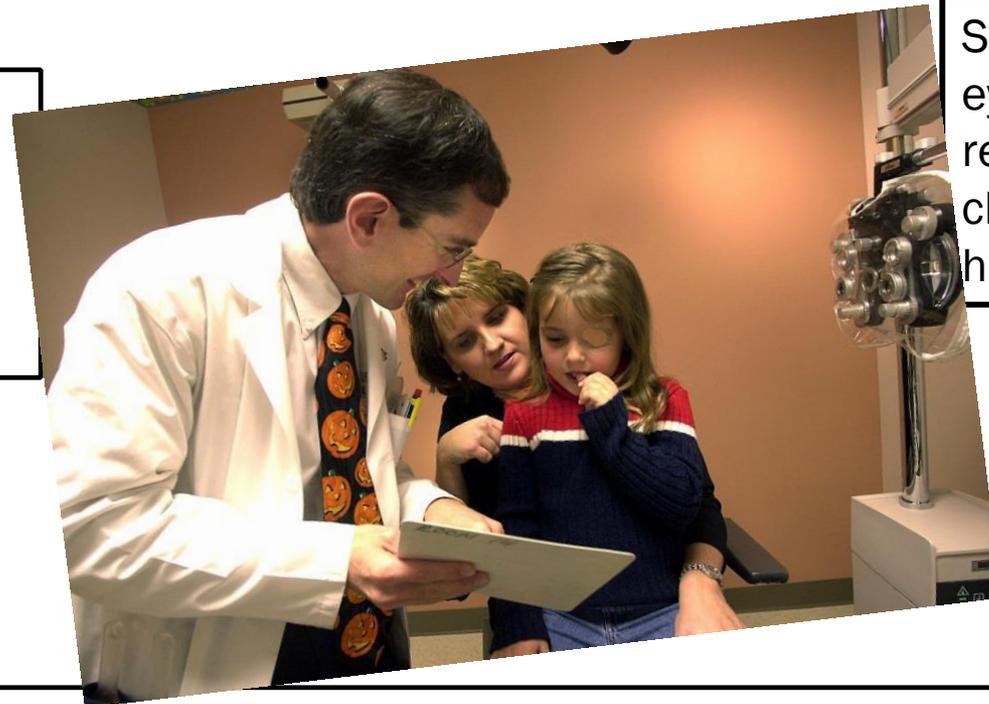


Key Considerations:

3. Ensure effective communication among all stakeholders

Ensure Effective Communication Among Madison's 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.



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Example Evaluation Items . . .

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 talk with the child's eye care provider for clarification of eye exam results and prescribed treatments.

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



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 First, M.I., Last 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 eye exam results with us, if necessary.

If you need help finding a local eye doctor for your child's appointment, use the website links 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,

(Referring primary care provider, school nurse, Head Start staff, Other.)

(Practice/Office/School/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 eye exam results, (4) and the vision screening agency to send exam results to the child's medical doctor (if screening did not occur at 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.cfm
- American Optometric Association: www.aao.org
- Centers for Medicare and Medicaid Services: www.medicare.gov/physiciancompare
- American Association for Pediatric Ophthalmology and Strabismus: www.aapos.org
- All About Vision: www.allaboutvision.com/eye-doctor
- College of Optometrists in Vision Development: www.covd.org

Referral for an Eye Examination

January 24, 2014

Patient information: Name (First, M.I., Last) _____
 Birth date (MM/DD/YYYY) _____ Sex (M/F) _____ Grade _____ Primary language _____
 Parent or guardian _____ E-Mail _____
 Mailing address _____ City _____ State _____ Zip _____
 Primary phone () - _____ (select type) MOBILE HOME If mobile, text messages allowed (Y/N) _____
 Secondary phone () - _____ (select type) MOBILE HOME If mobile, text messages allowed (Y/N) _____

Referring agency contact information and reason for referral:
 Office name _____ Phone number () - _____
 Fax number () - _____ E-Mail _____
 Date of referral _____ Vision screening conducted by _____
 Reason for referral (Check all that Apply):
 Visual acuity (Distance Near Both) Additional comments:
 Misaligned eyes
 Pupillary reflex
 Red reflex
 Ocular structure concern (i.e., ptosis (drooping eyelid)
 Family history of early onset vision problems
 Developmental delay/chronic condition (describe) _____
 Other (describe) _____

Exam results from the eye doctor:

Date of eye examination: _____

Best visual acuity		Info Vision Screening Agency Should Know/Do
Right	Left	
_____	_____	

Check if appropriate:

- Treatment recommended
 - Medical: _____
 - Glasses
 - Contact Lenses
 - Other: _____
- Corrective lenses prescribed
 - Constant wear
 - For near only
 - For distance only
- Hyperopia
- Myopia
- Astigmatism
- Anisometropia
- Amblyopia
 - Patching recommended _____ hrs daily
- Strabismus
- Low vision evaluation/assistance recommended
- Re-examination advised
 - Within 6 months
 - Within 12 months
 - Other: _____
- Other: _____

Eye Care Provider contact information:

ECP Name _____ Phone () - _____ Fax () - _____
 Address _____ City _____ State _____ Zip _____

Eye Care Provider - Please return completed form to Referring Agency

<http://nationalcenter.preventblindness.org/resources-2>

Resources to Ensure Communication Among Vision Health Stakeholders



Tips for Wearing Eye
Glasses

<http://nationalcenter.preventblindness.org/resources-2>



Dat Nwans	Non lekki la	Dat egwem na
//	//	//

's eyes

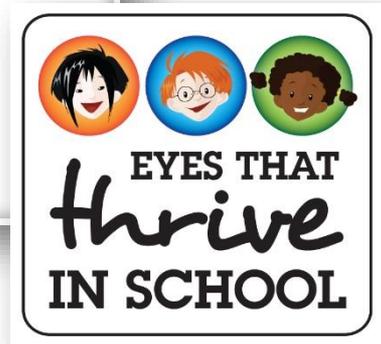
- Pou vizyon an devlope nòmalman, pitit ou a bezwen de je ki an sante ki travay byen ansanm.
- Youn nan je pitit ou a pa travay byen tankou lòt la.
- Li trè enpòtan pou pitit ou a ke pwoblèm sa a kapab trete kounye a.
- Pou kòrje pwoblèm sa a, pitit ou a dwe mete linèt li tout tan ke li reveye. Doktè je a ka deside ke pitit ou a bezwen mete yon patch, oswa itilize gout pou je poul kòrje pwoblèm sa a.
- Mennen pitit ou nan randevou doktè je yo trè enpòtan pou li.

ANBLIYOPI
(Amblyopia)

Maladi je pitit ou a rele 'anbliyopi'.

Eyes That Thrive:

<http://www.preventblindness.org/eyes-thrive>





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.



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Example Evaluation Items . . .

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



We review our vision health program results annually to identify needs and seek solutions for barriers to follow-up care.

We ensure training certificates are current.



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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.

Check Yes or No	Point of evaluation
<input type="checkbox"/> Yes <input type="checkbox"/> No	We have vision health information in <u>all</u> native languages of the families that we serve.
<input type="checkbox"/> Yes <input type="checkbox"/> No	We discuss the importance of healthy vision as a part of proper child development in the general health information provided by our program.
<input type="checkbox"/> Yes <input type="checkbox"/> No	We provide parents with easy-to-understand* information on the visual milestones for children at all stages of life. <i>*Information is written at an appropriate reading level, provides graphics as well as descriptions, and has been tested for ease of understanding.</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Our parent/and or health advisory committee(s) have reviewed our vision health information for, content, clarity of instruction, cultural literacy, and reading level (4 th to 6 th grade level.)
<input type="checkbox"/> Yes <input type="checkbox"/> No	We provide health information to parents of children with special healthcare needs that describe their increased risk for vision problems.
<input type="checkbox"/> Yes <input type="checkbox"/> No	We have active Parent and Health Advisory Committees

Notes: _____

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

Check Yes or No	Point of evaluation
<input type="checkbox"/> Yes <input type="checkbox"/> No	Share screening results with the child's eye care provider and primary care provider.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Receive eye exam results for our program's records.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Talk with the child's eye care provider for clarification of eye exam results and prescribed treatments.

12-Components of a Strong Vision Health System of Care



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: _____

Priority #1: _____

Priority #2: _____

Priority #3: _____

Visit <http://nationalcenter.preventblindness.org/year-childrens-vision> for information and resources that will help you improve your vision health program.

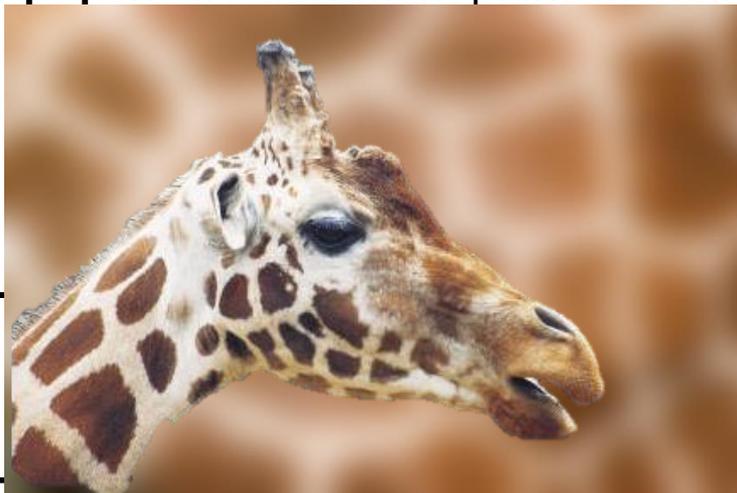


5 Tips for Reaching Out to Head Start and
Other Early Childhood Programs in
Your Community

5 Tips for Reaching Out to Head Start and Other Early Childhood Programs in *Your* Community to Help Find Madison

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

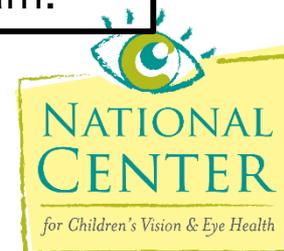
Discuss how programs wish to receive eye exam results and strategies that program personnel can implement to help ensure treatment plans are followed.



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.

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.

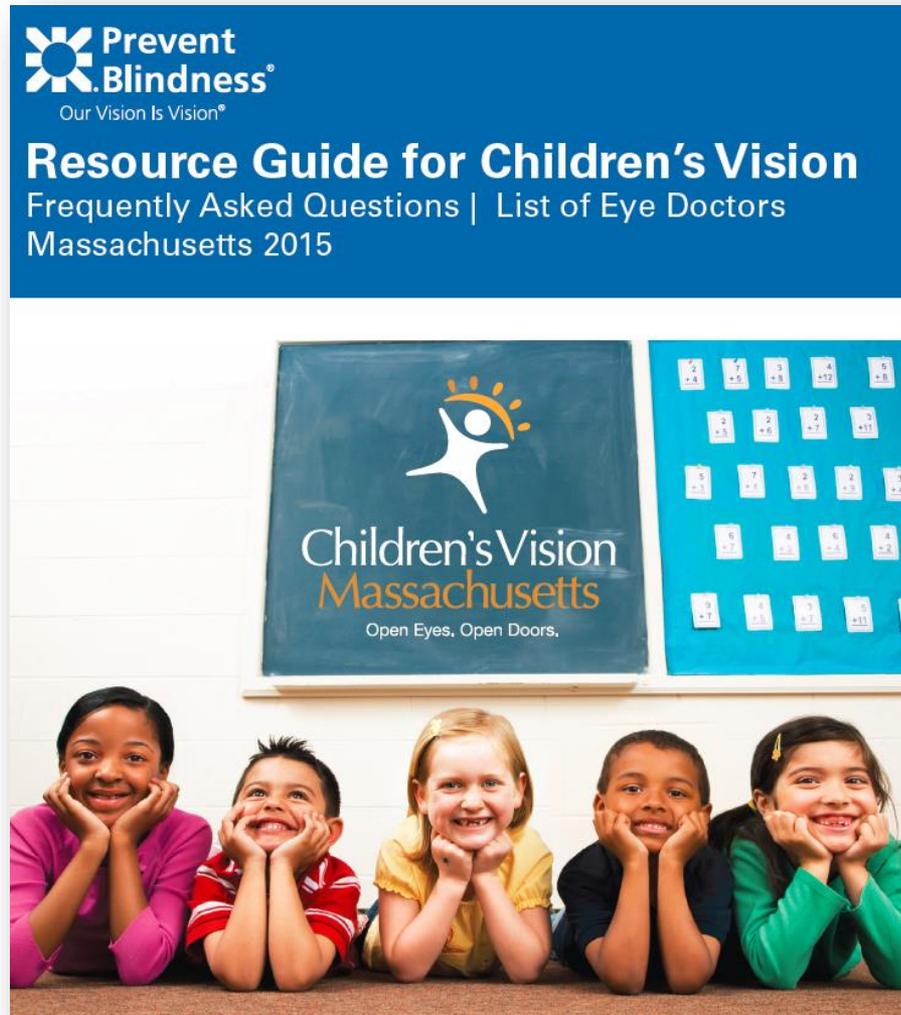


Establish Community Provider Relationships

- ☞ 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



Localize relationships and resources



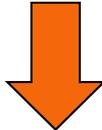
Resources to support better eye health

Website for the National Center for Children's Vision and Eye Health

Provider
education
tools



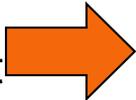
Parent/
family
resources



Technical
assistance



Professional
Development



Communication
tools



<http://nationalcenter.preventblindness.org>



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Year of Children's 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?



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Conclusion of today's presentation

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