

Michigan Department of Community Health

Vision Screening Program

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Current Vision Screening Program and Policies

- Mandated by Public Health Code, Act 368 of 1978, Part 93: Hearing and Vision
- Legislated and supported by the Rules
- Funded through the General Fund

- Quality Improvement conducted through the:
 - State-wide Accreditation process for each Health Department (3 year cycle)
 - Technician Assessment Program evaluations for each trained technician (every 3 years)

Public Health Code/Rules

- Screenings are free
- Conducted by Local Health Department (LHD) technicians who are trained by the State of Michigan/MDCH
- Parents of children who fail receive a referral letter indicating the need for care
- Care can be provided only by an optometrist or ophthalmologist

Screening Sites

- School-age screenings are conducted in schools
 - Conducted in grades 1,3,5,7, and 9
- Preschool screenings are conducted in Head Start Centers, Preschools, Daycare Centers, and school-based preschool centers
 - At least once between the ages of 3 and 5 years
 - Best practice is to screen at 3 years and each subsequent year

Screening sites, con't.

- Kindergarten Entry screenings are conducted at Kindergarten Round-ups, when available
- Kindergarten Entry screening mandated by PHC and Revised School Act of 1976
- Health Department clinics provide screenings by appointment or on a walk-in basis

Follow-up

- Follow-up is conducted by the LHD for any child who fails the LHD screening
 - **Doctors** fax back to the LHD, the outcome of the exam and treatment, if prescribed
 - **Parents** can also inform the LHD that the child received care from an eye care provider

Follow-up CON'T.

- When no follow-up is received in the screening year, the LHD will schedule the child for screening in the subsequent year
- School nurses, counselors, and teachers often aid in securing follow-up information
- CPS involved in cases of medical neglect

Surveillance

- Aggregate data submitted quarterly to MDCH
 - Total screened
 - Total passed
 - Total referred for care (after rescreen)
 - Total others (under care, permanent difficulty, UTS)
- Total seen by an optometrist or ophthalmologist
 - No relationship to other numbers due to reporting timeline

Surveillance con't.

- 45 counties
- 1 county- 10 counties per health department
- City of Detroit is separate from Wayne County
- Reporting tied to accreditation and indicators for preschool and school-age levels

Surveillance con't.

- State-wide database system developed
- Data base system not built at this time but would:
 - Link to the Michigan Care Improvement Registry (MCIR)
 - Provide real time data via the provider's EMR
 - Increase follow-up and decrease work load at the local level

Program Metrics

- Extensive data audit underway through the accreditation program:
 - Populations served (preschool v. school-age)
 - Cost per screening/cost per child
 - State fiscal support for LHD's
 - Local fiscal support by LHD
 - Technician productivity

Program Metrics cont'd.

- Technician Assessment Program (TAP)
 - Screening skills, knowledge, following protocol
 - Every three years minimum; more often if indicated
 - Conducted by evaluators contracted by MDCH

Lions of Michigan

KidSight Screening Program

- Screening services offered by participating districts and clubs
- Focus is on preschool children
- Screening cannot replace the LHD screening under law
- Follow-up conducted by central office
- Current oversight by State of MI, Lions of MI, Executive Director
- Fill a real need in places where the LHD does not screen (under 3 years of age)

Lions of Michigan con't.

Current collaboration is between MDCH and Lions of MI to:

- Decrease duplication of local services
- Increase follow-up at LHD level
- Improve communication between local clubs and LHD's

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HEARING & VISION

screening programs