Wisconsin Lions
Children’s Vision Screening Toolkit
Revised August 2017

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- Success Story Questionnaire
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- (Article) Children’s Vision Health by: P. Kay Nottingham Chaplin, Jean E. Ramsey, and Kira Baldonado
- (Article) Vision and Eye Health: Moving into the Digital Age with Instrument-Based Vision Screening by: P. Kay Nottingham Chaplin, Kira Baldonado, Amy Hutchinson, MD, Bruce Moore, OD.
Background: Prevent Blindness Wisconsin and the Wisconsin Lions Foundation

Since 1998, the Wisconsin Lions Foundation and Prevent Blindness Wisconsin have worked together to help fight against blindness and ensure that every child – from six months to eighteen years – sees properly.

Children’s Vision Screenings

A Children’s Vision Screening is a simple screening that utilizes a scientifically-validated and approved screening protocol. Using recommended tools, protocols, and procedures and conducted by a Certified Children’s Vision Screener trained by Prevent Blindness Wisconsin, vision screening is a cost-effective method to identify children who should continue on for a follow-up comprehensive eye examination with an eye doctor for diagnosis and treatment of vision disorders.

Why do we need Children’s Vision Screenings?

1 in 20 preschoolers and 1 in 4 school-aged children has a vision problem, and it is not always easy to detect. Sometimes children have trouble seeing and don’t even realize they are seeing the world differently than others. Healthy vision is important for learning and success in school. For most children, 80% of learning happens visually. Vision problems can make it hard for children to read and learn, and unfortunately, many fall behind in school or show behavioral problems. Certain eye conditions, if not detected and treated early, can lead to permanent vision loss.

What happens at a Prevent Blindness Wisconsin Children’s Vision Screening?

Children’s Vision Screenings must be conducted by screeners who have completed the Prevent Blindness Wisconsin Certified Children’s Vision Screener Training. At a vision screening, screeners:

1. Check the child’s eyes for signs of vision problems.
2. Test the child’s visual acuity. This measures a child’s ability to see detail from a distance. Children who go untreated with a visual acuity problem may have trouble seeing the blackboard or computer screen at school or have difficulty performing well in sports.
3. Conduct follow-up, either through phone calls or letters with the parents of children who are referred, or ensure that steps are taken so that follow-up will occur.

Training, Certification and Support

Certified Children’s Vision Screening Trainings are conducted by Prevent Blindness Wisconsin. The course includes an overview of children’s vision problems, training in the Prevent Blindness children’s vision screening procedures, charts and tools, and a review of referral criteria. Certification is obtained upon completion of the training course and is valid for three years. To schedule a Children’s Vision Screening Training for your club or district please contact Valerie at Prevent Blindness Wisconsin.

Children’s Vision Screening Protocol

The purpose of protocol is to ensure that children’s vision screenings are accomplished using valid, reliable, and age-appropriate tools and methods by individuals who completed a Prevent Blindness Wisconsin certified Children’s Vision Screener Training. Our protocol is scientifically and medically validated by the National Expert Panel at the National Center for Children’s Vision and Eye Health at Prevent Blindness.

Preschool-age Vision Screening

The goal of preschool vision screenings is to identify signs of potential vision disorders including amblyopia, strabismus, significant refractive error, and associated risk factors.

The following recommendations were developed by the National Expert Panel at the National Center for Children’s Vision and Eye Health, sponsored by Prevent Blindness, and funded by the Maternal and Child Health Bureau of the Health
Resources and Services Administration, United States Department of Health and Human Services. The recommendations describe both best and acceptable practice standards.

Vision screening methods for children aged 36 to younger than 72 months include:

1. **Optotype-Based Screening (Best Practice):** monocular visual acuity testing using single HOTV letters or LEA symbols surrounded by crowding bars at a 5-ft. (1.5m) test distance.
   - Measure amblyopic risk factors such as: significant refractive errors, anisometropia (unequal refractive errors), eye misalignment, and cataracts.

2. **Instrument-based Screening (Acceptable Practice):** Plus-Optix or SPOT Vision Screener
   - Provide information about refractive errors
   - Measure amblyopic risk factors such as: significant refractive errors, anisometropia (unequal refractive errors), eye misalignment, and cataracts.

Screening vision with optotype-based tests may be accomplished in children as young as 3 years. However, instrument-based screening remains an acceptable alternative for ages 3 to 5 years. The vast majority of children are able to perform optotype-based screening with a high degree of success and reliability by age 5.

Photoscreening and autorefraction have been recognized by the United States Preventative Services Task Force (USPSTF) as appropriate methodology for vision screening of children aged 3-5 years. Instrument-based vision screening for amblyogenic refractive error is recommended for children aged younger than 4 years, according to updated guidelines from the American Academy of Pediatrics (AAP).

**School-age Vision Screening**

The goals of vision screening in school-aged children (6-17 years) differ from those aged 5 and younger. The goal of the screening program for school-aged children shifts from a primary focus on prevention of amblyopia and detection of amblyopia risk factors to the detection of refractive errors and other eye conditions that could potentially impact the students’ ability to learn or affect their academic performance.

Sloan letters at 10 feet is the recommended screening method for school-aged (6-17) children. This preferred practice guideline is recommended by the American Academy of Pediatric Ophthalmology & Strabismus Panel (2012) and AAPOS (2014).

Most children are able to participate in optotype-based screening with a “high degree of success and reliability by age 5” (AAPOS 2014). Therefore, instrument based screening is not recommended for mass screenings of school-aged children.

**Contact Information**

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LIONS/LIONESS VISION SCREENING CHECKLIST

Before the Screening:
- Attend a Prevent Blindness Wisconsin Certified Children’s Vision Screener Training to renew certification
- Make contact with Child Care Center or School District in need of screening services and confirm Date(s) and Time
- Determine ages and number of children to be screened
- Pack or obtain age-appropriate chart(s). (See “Approved Screening Tools”)
  - Alcohol Wipes, Occluder Glasses, Paddles
  - Tape Measure, Masking Tape, Happy Feet (optional)
  - Pens, Paperwork
  - WLF brochures, stickers, bookmarks, posters (Ask Meghan at WLF if you need some)
  - *Even if you intend on using only an Instrument-Based tool, we recommend bringing charts as a back-up method in cases of technical difficulty or poor environmental conditions (poor lighting, dark pupils, etc.)
- If using Instrument-Based Tool:
  - Determine if you are going to use Quick Capture Function or if you are going to Import Class list.
    - Anonymous/Quick Capture function requires no additional steps prior to screening
  - To utilize import/export functionality:
    - Refer to tool-specific Instructional Guide for steps in import/export procedures
    - Obtain list of assigned personalized ID numbers from school nurse or child care provider.
      - (Name and Birthday is confidential information) Rather, we recommend using a number and birthdate for each child so that personal information remains known only to school or day care center.
  - Make sure tool is fully charged the day before the screening.
  - Pack extra batteries and/or charging cords

At the Screening:
- Do what Lions do best and Serve! Have a great time changing kids’ lives! 😊
- Use age-appropriate tools to screen children, and record results on “Vision Screening Results Brochure”
  - Tip: It is helpful to have someone filling these out throughout the screening vs. waiting until the very end.
- Observe ABC’s (See “The ABC’s: Signs of Possible Vision/Eye Problems”) and make note of any observable concerns
- Give Vision Screening Results to nurse or child care provider so that results may be sent home to parents.
  - * Reminder: A screening is a screening, not a diagnosis! Please do not share any information that contains language or values reserved for a medical office.
- *Important! Determine who will assist in the follow-up process. (i.e. nurse/child care provider or Lions)

After the Screening:
- If Instrument-Based Tool was used:
  - DELETE any and all personal information that was entered
  - Carefully remove batteries and place everything back in proper storage bag.
- Complete “Vision Screening Report Form” as soon as possible following the screening
- Submit Vision Screening Report form to District Vision Screening Chair — or other appointed person.
  - District Chair is then responsible for submitting all Vision Screening Report Forms to Meghan Postelnik at Wisconsin Lions Foundation.
**Approved Screening Tools**

**Preschool-age (ages 3-5) – Best Practice**

1. **Eye Check Screener or VIP Screening Wheel** – Children are screened at a 5-foot distance. These charts test for visual acuity using crowded single LEA pediatric symbols.

These charts need to be used in conjunction with occluders. The **BEST PRACTICE** occluders are surgical tape or an adhesive eye patch. The **ACCEPTABLE PRACTICE** occluder is the specially constructed fun-framed occluder glasses. (Included in the purchase of the Eye Check)

*Images of surgical tape, adhesive eye patch, and occluder glasses.*
Preschool-age (ages 3-5) – Acceptable Practice


![Image of Plus Optix Vision Screener]

2. **Welch Allyn Spot Vision Screener** – screens both eyes from a nonthreatening 3-foot distance. Lights and sounds engage child’s attention. Touchscreen display allows for one button activation. Screens for common vision problems and meets AAP screening guidelines for detection of amblyopic risk factors.

![Image of Welch Allyn Spot Vision Screener]

School-age (ages 6 and up)

1. **Snellen / Sloan Chart with occluder paddles** – represents traditional method of testing distance visual acuity at a 10-foot distance. Occluder paddles must be used in conjunction with the Snellen/Sloan chart.

![Image of Snellen Chart and Occluder Paddles]

If you have any questions, please contact Valerie Grimm, Community Health Manager, at (414) 765-0505 or Valerie@pbwi.org.
THE ABC’S
SIGNS OF POSSIBLE VISION/EYE PROBLEMS

Children with any of the signs below are an automatic referral and should have a dilated eye exam.

APPEARANCE
- Eye that turns out, in, up, or down. Crossed eyes.
- Inflamed or watery eyes.
- Red-rimmed, encrusted, or swollen eyelids.
- Eyelid that sags partially covering the pupil of the eye.
- Sties or other infections on the eyelids.
- A white spot in the pupil of the eye.
- Yellowish color to the white of the eye.
- Eyes that are bloodshot, reddened, blackened, bruised or swollen, or show evidence of cuts or scrapes.

BEHAVIOR
- Body is rigid when looking at distant objects.
- Thrusting the head forward or backward when looking at distant objects.
- Tilting head to one side.
- Rubbing eyes excessively.
- Closing or covering one eye.
- Holding objects close to eyes.
- Having difficulty reading or with close work.
- Blinking excessively.
- Squinting or frowning when looking at distant objects or chalkboard.
- Reluctance to cooperate when activity requires good vision skills.

COMPLAINTS
- Headaches.
- Blurry vision, dizziness, or nausea after doing close work.
- Blurred or double vision.
- Eyes that itch, burn, or feel scratchy.
- Unusual sensitivity to light.
Eye Care Voucher Information

**Prevent Blindness Wisconsin Vouchers:**

**Eye Exam and Glasses**
Vouchers for a free eye exam and glasses are provided through the VSP Sight for Students program. To qualify for the program, children must meet all of the following criteria:
- Family income is at or below 200% of federal poverty level
- Not covered by Medicaid (BadgerCare Plus) or any other vision insurance
- 19 years old or younger and has not graduated from high school
- Child or parent is U.S. citizen or documented immigrant with a social security number
- Has not used a voucher during the last 12 months

**Glasses Only**
Vouchers for eyeglasses are provided through the VSP Mobile Eyes Materials Only Program or the Healthy Eyes Eyeglass Program depending on the applicant’s location. No social security number is needed to receive a Healthy Eyes Eyeglass Voucher, but is required for VSP Mobile Eyes voucher. To qualify for the program, children must meet all of the following criteria:
- Family income is at or below 200% of federal poverty level
- Has a valid eyeglass prescription that is less than 12 months old
- Does not have any other eyeglass benefits they can access or have exhausted their eyeglass benefits for the year
- Has not used a voucher during the last 12 months

Please Contact Prevent Blindness Wisconsin at (414) 765-0505 for an application.

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**Wisconsin Lions and Shopko Optical Partnership:**

**Eye Exam and Glasses**
Together, the Wisconsin Lions and Shopko Optical may be able to provide vouchers for an eye exam and a pair of glasses for those in need. The Lions clubs closest to each participating Shopko Optical store are issued 5 vouchers per year. These vouchers are available at the specific stores for one exam and one pair of glasses.

If there is a Shopko Optical in your community, please contact that store or the Lions Club in your community in order to ask about the availability of these vouchers.