Wisconsin Lions
Children’s Vision Screening Toolkit
With support from the Wisconsin Lions Foundation, Prevent Blindness Wisconsin developed this toolkit to maximize the independence of the Lions and Lioness Clubs that conduct vision screenings and to simplify the process as much as possible.

This toolkit includes a sample of the Lions Club Screening Kit. All materials can be copied for use at certified Children’s Vision Screenings and can be found on our website. To obtain a copy of the Wisconsin Lions Foundation vision screening posters (free) and stickers (for a charge), please contact Elizabeth Shelley, Wisconsin Lions Foundation Administrative Assistant, for more information.

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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?
More than 12.1 million school-age children, or one in four, have some form of a vision problem. If not detected and treated early, these conditions could 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.

Materials, Equipment and Cost

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost/Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>VIP Crowded Acuity Test, Eye Check Screener (3-5 year olds) or Snellen/Sloan Chart (6 years and older)</td>
<td>$58.00 or $14.00 – Depending on the chart you choose</td>
</tr>
<tr>
<td>Educational brochures, such as “Your Child’s Sight” and “Amblyopia”</td>
<td>Provided free of charge by Prevent Blindness Wisconsin</td>
</tr>
<tr>
<td>Referral paperwork/follow-up letters</td>
<td>Master copy provided by Prevent Blindness Wisconsin</td>
</tr>
<tr>
<td>Web-based resources on children’s vision problems, treatments, etc.</td>
<td>Available free of charge on the Prevent Blindness Wisconsin website</td>
</tr>
<tr>
<td>Training/Certification</td>
<td>Provided free of charge by Prevent Blindness Wisconsin</td>
</tr>
</tbody>
</table>
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, and a review of referral criteria. Certification is obtained upon completion of the training course and is valid for three years.

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.

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 to 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.

The best practice vision screening methods for children aged 36 to younger than 72 months include:

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

2. **Instrument-based Screening:** Retinomax Autorefractor or SureSight Vision Screener
   a. **Do not** measure visual acuity
   b. Provide information about refractive errors
   c. Measure amblyopic risk factors such as: significant refractive errors, anisometropia (unequal refractive errors), eye misalignment, and cataracts.

**Note:** Using the Plusoptix Photoscreener or Welch Allyn Spot Vision Screener is considered acceptable practice.

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 years.
Photoscreening and autorefration have now 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 detection of refractive errors and other eye conditions that could potentially impact the students ability to learn or to 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 Ophthalmology 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.

<table>
<thead>
<tr>
<th><strong>VISION SCREENING TOOLS FOR CHILDREN – COMPARISON CHART</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Recommended for use on ages 3-5</strong></td>
</tr>
<tr>
<td><strong>Recommended for use on ages 6 and older</strong></td>
</tr>
<tr>
<td><strong>Can detect amblyopoeic risk factors</strong></td>
</tr>
<tr>
<td><strong>Can detect anisometropia (unequal refractive error)</strong></td>
</tr>
<tr>
<td><strong>Can detect significant refractive errors</strong></td>
</tr>
<tr>
<td><strong>Can detect misalignment of the eyes (strabismus)</strong></td>
</tr>
<tr>
<td><strong>Can detect the presence of media opacities (cataract)</strong></td>
</tr>
<tr>
<td><strong>Requires a child’s attentiveness and responses</strong></td>
</tr>
<tr>
<td><strong>Provides a visual acuity result</strong></td>
</tr>
<tr>
<td><strong>Provides printout of refraction for eye glasses</strong>*</td>
</tr>
<tr>
<td><strong>Provides diagnostic results</strong>*</td>
</tr>
<tr>
<td><strong>Cost Range</strong></td>
</tr>
</tbody>
</table>
Screeners should **not** provide the detailed printout/diagnostic results from the instrument based screening tools; instead, children who do not pass the screening must be referred to an eye care professional for diagnosis and treatment.

Vision screening – using recommended tools, protocols, and procedures – is a cost-effective method to identify those children who should continue on for a **follow-up comprehensive eye examination with an eye doctor** for diagnosis and treatment of vision disorders.

The following tools are approved by Prevent Blindness for use during vision screening:

**Preschool-age Vision Screening (3-5 years)**

*Best Practice*
- 5 ft. VIP Visual Acuity Chart
- Eye Check
- Suresight Vision Screener

*Acceptable Practice*
- LEA Symbols 10ft. Flip Chart
- PlusOptix
- SPOT

**School-age Vision Screening (> 6 years)**

- Snellen/Sloan
Getting Started: How to set up a Children’s Vision Screening Group

To successfully set up a screening group in your community, follow these steps:

1. Ensure that your club is committed to this project and is prepared to provide financial resources and volunteers.
   a. Identify two co-chairs responsible for ongoing project coordination.
   b. Identify at least five people to become Certified Children’s Vision Screeners. Volunteers must have daytime availability.

2. Attend a Children’s Vision Screener Training. Contact your District Vision Screening Chairperson for more information about upcoming Children’s Vision Screener Trainings in your community. If possible, schedule screening dates shortly after the training session. The best way to become proficient vision screeners is to screen as much as possible shortly after the training session.

3. Contact the daycares and preschools in your community.
   a. Send the enclosed “New Preschool/Daycare Letter” (see Appendix A) to the preschool/daycare directors in your community. Please contact Prevent Blindness Wisconsin for a list of preschools/daycares in your area.

4. Follow up with a phone call to each director. Ask if he/she would like your club to provide the service. If the director would like more information, direct them to Tami Radwill, Program Director at Prevent Blindness Wisconsin.

5. Prepare for the screenings.
   a. At the training, the co-chairs will receive a packet of information on how to prepare for and what is needed at a vision screening (see Appendix B). The packet includes master copies of all forms that need to be copied and a supply order form for educational brochures.
   b. Confirmation packets should be sent to the preschool/daycare directors.
   c. Make copies of all of the necessary forms.

6. Confirm the location and time of the screenings with the screening team.

7. Start screening! Screen the 3 to 5 year-old children at the preschools and daycares in your community. If you are interested in screening school-age children, contact the local school nurses to see if they need any assistance.

8. Report screening activity to Prevent Blindness Wisconsin. Please make a copy of the registration form and fax, scan, or mail it to Prevent Blindness Wisconsin in a timely manner. Submit the registration form by December for fall Screenings and June for spring screenings.
Appendix A
New Preschool/Daycare Letter Sample

[Insert Date]

[Center Name]
[Address 1]

Dear Preschool/Daycare Director,

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

One way we achieve this goal is by offering free vision screenings for preschool-age children. A children’s vision screening is a systematic approach to identifying children with potential vision problems. The purpose is to identify and refer children with potential vision problems to an eye care professional for further examination, diagnosis, treatment, and follow-up.

What does a screening include?

- Observations – Looking at the appearance, behavior, and complaints of children
- Distance Visual Acuity (chart) or Instrument Screening
- Follow-up

Why is preschool vision screening so important?

- 80% of a child’s learning is visual
- Certain vision problems, such as Amblyopia (lazy eye), must be identified before a child is six to ensure successful treatment
- Vision problems can be detected through a simple vision screening

To schedule a screening, our Lions Vision Screening Coordinator will contact you, the center, and will then recruit club members to come assist. Two to three weeks before the screening, your center will receive a “Pre-Screening Packet”. This includes directions, brochures for parents, and more. If you would like a sample packet, please let us know.

After the screening, our Lions Vision Screening Coordinator will follow up with your school/center to ensure that all referred children receive care and to answer any questions the children’s parents may have.

We screen throughout the school year (September – May) and are eager to work with you and your staff to provide screening for your children. Thank you for taking the time to give each child’s vision a chance.

Sincerely,

[Insert Name]
Appendix B
Lions Club Screening Kit Sample

Order of Contents

Supply Order Form

Screening Confirmation Letter

Registration Form | Ages 3-5

Registration Form | Ages 6+

Intro to Symbols

Happy Feet

Glasses Pattern

Results Brochure

Sample Follow-Up Letter – English

Sample Follow-Up Letter – Spanish

Success Story Form
Prevent Blindness Wisconsin  
Preschool and School Age Supply Order Form

Date supplies are needed: __________
Order speed is dependent on supplier turnaround time. Orders are placed every two weeks.

Please Return To: Prevent Blindness Wisconsin ◦ 731 N Jackson Street ◦ Suite 220 ◦ Milwaukee, WI  53202
(414) 765-0505○ Fax: (414) 765-0377 ◦ info@pbwi.org

Documents: 
One copy of each per order. Please make copies as needed.

<table>
<thead>
<tr>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coloring Sheet</td>
</tr>
<tr>
<td>Vision Service Plan Application</td>
</tr>
<tr>
<td>Healthy Eyes Eyeglass Application</td>
</tr>
</tbody>
</table>

Publications: 
Please order only ONE brochure for each family. * Denotes publications also available in Spanish.

<table>
<thead>
<tr>
<th>Title</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your Child’s Sight *</td>
<td></td>
</tr>
<tr>
<td>Play It Safe</td>
<td></td>
</tr>
<tr>
<td>Signs of Possible Eye Trouble in Children*</td>
<td></td>
</tr>
<tr>
<td>Common Eye Problems</td>
<td></td>
</tr>
<tr>
<td>Amblyopia * (for referred children)</td>
<td></td>
</tr>
<tr>
<td>Your Child’s Sight *</td>
<td></td>
</tr>
<tr>
<td>Super Specs Eyeglass Program</td>
<td></td>
</tr>
<tr>
<td>The Eye Patch Club</td>
<td></td>
</tr>
<tr>
<td>Vision Resources &amp; Services for WI Children</td>
<td></td>
</tr>
<tr>
<td>Strabismus (for referred children)</td>
<td></td>
</tr>
<tr>
<td>First Aid for Eye Emergencies (1 per school) *</td>
<td></td>
</tr>
</tbody>
</table>

Supplies: 
We are not able to accept purchase orders- Payment by check or credit card only please.

<table>
<thead>
<tr>
<th>Item</th>
<th>Price</th>
<th>Quantity</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preschool</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 ft. VIP Screening Wheel</td>
<td>$57.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LEA Symbols 10 ft. Flip Chart</td>
<td>$26.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Year Old Eye Check Screener- with occluder glasses</td>
<td>$44.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4/5 Year Old Eye Check Screener- with occluder glasses</td>
<td>$44.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3/4/5 Year Old Eye Check Screener- with occluder glasses</td>
<td>$80.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occluder Fun Frames (circle choice): Horse, Parrot, Butterfly, Tiger</td>
<td>$33.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Snellen/ Sloan 10 ft. Wall Chart</td>
<td>$14.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good-Lite Plastic Occluders (6 per package)</td>
<td>$24.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Order Total</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name: ____________________________________________ Organization: __________________________________________
Mailing Address: ___________________________________ City: ____________ County: ____________
Zip: ____________ Phone: ___________________________ E-mail: ____________________________________________
Payment Method: ☐ Visa/ Master Card ☐ Check payable to ‘Prevent Blindness Wisconsin’
Visa/MC #: ______________________________________ Exp. Date: ____________ CSC #: ____________
Signature: ____________________________________________
To: Date:
The _________________________ Lions / Lioness Club and Prevent Blindness Wisconsin is pleased to offer the children at your center a free vision screening. Certified screeners will be at your center on:

Date: Time:

TWO WEEKS BEFORE THE SCREENING

- Post the enclosed poster prominently for your parents’ viewing.
- Distribute one of the enclosed brochures to each family.

ONE WEEK BEFORE THE SCREENING

- Using the enclosed *Introducing the Games to Your Children* sheet, start practicing the games with children 3 years of age and older.
- Emphasize that the vision screening is a game. We do not want the children to worry about a test.
- Cut out and color a pair of glasses to be used as “nametags” during the screening. *Please be sure all children write their first name on the glasses.*
  - **NOTE:** If your center chooses not to decorate and cut out glasses, please have each child wear a nametag.
- Please fill out the enclosed *Registration Form*. On the form, please indicate any concerns you have about a child’s vision or eyes, and check the glasses box if a child normally wears glasses.

DAY OF THE SCREENING

- **Have the completed Registration Form ready for the screeners when they arrive.**
- Volunteer screeners will arrive 15 minutes before the start time to set up.
- Bring the children to the screening area in groups of no more than four children. Children feel more secure if an adult they are familiar with is in the screening area.

- **Chart Screening**
  - Provide a well-lit and quiet area with an 8-10 foot lane for the screening.

- **Instrument-based Screening**
  - Provide a quiet area, with access to an electrical outlet that has controllable lighting for screening.

DAY OF THE SCREENING FOLLOW UP

- Each family will receive a results brochure with their child’s vision screening results.

- **If a child does not pass the screening**, the certified Prevent Blindness Wisconsin Screeners will request the family’s name, address and telephone number for follow-up contact. Prevent Blindness Wisconsin will contact the parents through mail to both remind and confirm that their child has been seen by an eye care professional.

- **If your facility cannot provide this information**, please help us with the follow-up procedure by talking to the parent about the importance of following through with an eye exam. Check back with the parent periodically until the child has been seen by an eye care professional. Any follow-up information will remain confidential.

This service is offered free of charge by certified screeners from Prevent Blindness Wisconsin. Please call _________________________ at _________________________ if you have any questions, or contact Prevent Blindness Wisconsin at (414) 765-0505.
INTRODUCING THE GAME TO YOUR CHILDREN

Dear Teachers,

Before your vision screening, it is important that you:

- Explain and practice the game with the children one week before your screening.
- Approach the activity as a GAME, not a test.

The Picture Game

1. To play, the child just names the pictures they are shown.
2. Together with the children decide what to call the pictures.
   You might pick: SQUARE HOUSE APPLE BALL
3. Give each child a turn to tell you the name of each picture.
4. Explain that the screener will gently cover one eye at a time with a pair of glasses so that each eye gets to play the game alone.

NOTE: During the screening, children who are shy or hesitant can point to a matching picture.
Dear Parent or Guardian:

On _____________________, a letter was sent to notify you that your child, ____________________
did not pass the vision screening at school and should receive a professional eye exam by an eye doctor.

If your child has already received his/her eye exam, please share that information with me.

Thank you for making your child’s healthy vision a priority! Please fill out the form below and return it to me.

Sincerely,

___________________________________________________________________________________
______________________________________
Lions / Lioness Club

_________________________________________________________________________
______________________________________
School Name

Telephone Number

➢ My child has an appointment on _____________________ for an eye examination with:
  Doctor’s Name: __________________________________________________________

➢ I need help planning or paying for an eye examination.  ☐ Yes ☐ No

➢ My child had an eye exam on ________________________ (Date of Exam)

➢ Appointment results ____________________________________________

REMINDER: Please take this with you to your appointment

Dear Doctor,
Please help us evaluate this program by completing and returning this form by one of the methods below.

Child’s Name: ____________________________________________

Date of Exam: ____________________________________________

The results were:
☐ Normal  ☐ Amblyopia  ☐ Strabismus  ☐ Refractive Error  ☐ Hyperopia
☐ Astigmatism  ☐ Myopia  ☐ Other: __________________________

History: ☐ New Case  ☐ Previously Diagnosed

Treatment: ☐ Glasses  ☐ Patching  ☐ Other: ______________________

Additional Comments: __________________________________________

Notes: _______________________________________________________

Doctor’s Name: ____________________________________________

You can return the Record of Examination by: [Insert contact information]
Estimados Padres:

El ________________, tu hijo(a) no paso el examen de la vista en la escuela, y debe recibir un examen profesional de los ojos con un optometrista o oftalmólogo. Su hijo(a) puede haber tenido un examen de los ojos y no sabemos los resultados. Por favor llene este formulario y envíalo a la dirección que se muestra abajo. Se agradece la prontitud en la respuesta.

Atentamente,

____________________________

Lions / Lioness Club

Fecha

Nombre de la escuela

Número de teléfono

➢ Mi hijo(a) tiene una cita el ______________ para un examen de los ojos. Nombre del optometrista o oftalmólogo ______________

➢ Necesito ayuda financiera para pagar el examen de los ojos o lentes. ☐ Sí ☐ No

Si necesitas ayuda financiera llama al ____________.

➢ Mi hijo tuvo un examen de la vista ______________.

Fecha del examen

Recordatorio – Por favor lleva este formulario a la cita de tu hijo(a).

Dear Doctor,

Please help us evaluate this program by completing and returning this form by one of the methods below.

Child’s Name: ________________________________

Date of Exam: ________________________________

The results were:

☐ Normal ☐ Amblyopia ☐ Strabismus ☐ Refractive Error ☐ Hyperopia

☐ Astigmatism ☐ Myopia ☐ Other: ________________________________

History: ☐ New Case ☐ Previously Diagnosed

Treatment: ☐ Glasses ☐ Patching ☐ Other: ________________________________

Additional Comments: ________________________________

Notes: ____________________________________________________________

Doctor’s Name: ________________________________

You can return the Record of Examination by: [insert contact information]