## Wyoming Vision Collaborative

### Wyoming Institute for Disabilities

August 2015



## Overview

- Why screening is important
- Who we are and what we do
- Screening information
- Best Practice Framework
- Financial resources and information for families

### Why is Vision Screening Important?

- A majority of learning, from birth, is visual
  Untreated vision problems can cause
  o Permanent vision loss
  o Learning difficulties
  - Delayed sensory, motor, cognitive or socialemotional development

# Video



### Why is Vision Screening Important? (continued) 1 in 20 preschoolers experience a vision problem And higher numbers for head start programs (1 in 5 children)

- Early detection of amblyopia especially important (found in 1-2% of children 6 months to 6 years old)
  - Can prevent permanent vision loss
  - Best results when treated by age 7
     \*(according to the National Center for Children's Vision & Eye Health at Prevent Blindness)

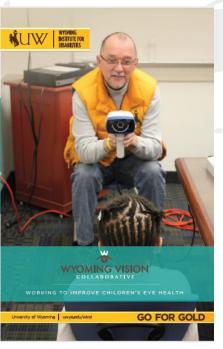
## Wyoming Vision Collaborative



Wyoming Institute for Disabilities (WIND) College of Health Sciences University of Wyoming 1000 E. University Ave. Laramle, WY 82071 At the Intersection of 9th and Clark Streets Phone: (307) 766-2441 Fax: 766-2763 E-mail: www.sion@uwvo.edu Website: www.uwvo.edu/wind/vision







### WHO ARE WE?

The Wyoming Vision Collaborative works to improve children's eye health. We are an initiative of the Wyoming Institute for Disabilities (WIND) at the University of Wyoming.

The Wyoming Vision Collaborative unites over 30 key Wyoming stakeholders and professionals in an ongoing process to establish a coordinated system of education, training, referral, and family support around childhood vision. Our stakeholder group includes representatives from: the Wyoming Optometric Association, Department of Health Department of Education, Department of Family Services, Lions of Wyoming Foundation, and various non-profit organizations.

### WHAT DO WE DO?

Our goal is to build an effective statewide system for vision screening using the most up-to-date research and evidence-based practices. The Wyoming Vision Collaborative focuses on coordination, training. education, referral, surveillance and family support focuses.

To build a coordinated system, we are using the nine essential elements for a statewide vision system:

> uniform planning surveillance coordination and collaboration screening infrastructure training for professionals

 technical advisory processes laws and regulations public and professional education and awareness sustained funding

### WHY IS VISION SCREENING IMPORTANT?

A majority of learning, beginning at birth, is visual, Vision problems left untreated can cause permanent vision loss, learning difficulties, and delayed sensory, motor, cognitive or social-emotional development.

One in 20 preschoolers experience a vision problem. For children in Head Start programs, the number grows to one in five children. Finding vision problems early many children and families. This is especially important in detection of amblyopia, a preventable vision problem that can cause permanent vision loss if not treated by the age of seven.

### WHEN IS THERE AN UPCOMING VISION SCREENING IN MY COMMUNITY?

Check in with your local Child Development Center or Lions club for their vision screening schedule. Screenings are free for all children ages birth-5 years old. Please also see our website at www.uwvo.edu/wind/vision for additional vision resources.

### WHEN SHOULD CHILDREN RECEIVE AN EYE EXAM?

are recommended to be done annually from the time a child is born throughout his or her adult life. Exams are different than vision screenings; exams should be done by an eye doctor. Even if a child passes his or her screenings will only catch some eye problems.

However, vision screenings can be a good way for families to identify treatable eve problems and prevent vision loss in young children in case they are not regularly seeing an eye doctor. As mentioned above, amblyopla is one eye problem that can cause permanent vision loss is not treated and is found in 1-2% of children between the ages of 6 months to 6 years old.

### WHAT OTHER ACTIVITIES DOES THE WYOMING VISION COLLABORATIVE HOST? The Wyoming Vision Collaborative:

- Gathers stakeholders for conferences and the Informs statewide strategic planning around eve health for all ages Produces and shares information for families and
- professionals about eye health
- Facilitates trainings for community screeners
   Helps provide screening follow-up
- Provides technical assistance to organizations
- regarding eye health and vision screening



### Wyoming Vision Collaborative

Mission: The mission of the Wyoming Vision Collaborative is to establish and ensure cohesive, statewide system of education, training, referral, and family support.

Goal: Increase and expand access to childrens vision and eye health services throughout Wyoming. This will be accomplished using statewide stakeholders and to re-evaluate our systematic approach based on newly published evidence based practices

- Focus:
  - improve training for screeners
  - increase the number of children screened
  - create a cohesive and consistent statewide program
  - increase public awareness about recommended regular eye exams
  - support families
  - improve follow-up care

### About the Wyoming Vision Collaborative

### History

- Evolved out of the Wyoming Lions Early Childhood Vision Project beginning in 2000
- Ensures continuity and access to evidenced-based screening services for all children under 6 years of age
- Held Statewide summit kick off and re-engage stakeholders in Casper in October 2014
- An initiative of the Wyoming Institute for Disabilities (WIND)

### Funding

- Currently funded primarily by the Wyoming Department of Health (Maternal and Child Health)
- Additional donors, including the Lions of Wyoming Foundation and Miracles in Sight
- Technical assistance and program support from National Center for Children's Vision and Eye Health

## **Best Practice Framework**

- Nine essential elements for statewide vision systems:
  - Uniform planning
  - Surveillance
  - Coordination and collaboration
  - Screening infrastructure
  - Training for professionals
  - Technical advisory processes
  - Laws and regulations
  - Public and professional education and awareness
  - Sustained funding

(National Center for Children's Vision and Eye Health, 2010)

# Stakeholders

- Approximately 35 stakeholders
- Representation from:
  - Wyoming Institute for Disabilities
  - Wyoming Department of Health
  - Wyoming Department of Family Services
  - Wyoming Department of Education
  - Wyoming Optometric Association
  - Various Community non-profit organizations
  - Lions of Wyoming Foundation
  - National Center for Children's Vision and Eye Health, Prevent Blindness
  - Wyoming Early Hearing detection and Intervention
- Regular meetings held to discuss statewide vision screening program

	Name	Organization	Position	
1	Dr. Ashlee Mills-Fischer	Gillette Optometric Clinic PC	Optometrist/ WOA Pediatric Task Force Member	
2	Canyon Hardesty	Wyoming Institute for Disabilities	Coordinator of Community Education	
3	Charla Ricciardi	Wyoming Dept of Health	Child Health Program Manager	
4	Cheryl Godley	Wyoming Independent Living		
5	David Orr	Lions of Wyoming Foundation	Executive Director	
			Optometrist/ WOA President Elect/ WOA Pediatric Task	
6	Dr. Dana Day	Wyoming Optometric Association	Force Member	
7	Dr. Dustin Asay	The Eye Institute of Wyoming, P.C.	Optometrist/ WOA Pediatric Task Force Member	
8	Helen Norcross	Wyoming Independent Living	Program Manager (Casper Office)	
9	Irene Forsman		Health Resources and Services Administration	
10	Dr. Jessica Albers	Cheyenne Vision Clinic/Laramie Vision Clinic	Optometrist/ WOA Pediatric Task Force Member	
11	lennifer Davis	Wyoming Citizens Review Panel	Executive Director	
12	Jennifer Jones	Fremont County School District #24	School Nurse	
13	lennifer Zook	Wyoming Department of Family Services	Quality Early Childhood Program Manager	
14	lim Rapp	Sheridan Sundowner Lions Club	District Governor	
15	John Harper	Cheyenne Sunrise Lions	Tail Twister/Lion Tamer	
16	Julia Lausch	Wyoming Institute for Disabilities	Project Coordinator, Wyoming Vision Collaborative	
17	Kelsy Been	Wyoming Kids First	External Relations Manager	
18	Keri Kline	Wyoming Optometric Association	Executive Director	
	Kira Baldonado	National Center for Children's Vision and Eye		
19		Health, Prevent Blindness	Director	
	Laura Ozios-Townsend	Vision Outreach Services, Department of		
20		Education	Education Consultant	
21	Lauri Atencio	Snowy Range Vision	Vision Rehabilitation Therapist	
22	Leslea Rapp	Sheridan Sundowner Lions Club	First Vice-President	
	Leslie Vanorman	Vision Outreach Services, Department of		
23	Lestie vanorman	Education	Interim Special Programs Division Director	
24	Lewis Gordon Lyon	Laramie Plains Lions Club	Board Member	
25	Mary Bregantini	Prevent Blindness	Project Consultants- National Center	
26	Melody Warren	DFS Clinical Services Division	State Licensing Supervisor	
27	Michelle Heinen	Uplift Wyoming	Executive Director	
	Nancy Pajak	Wyoming Early Hearing Detection and	Universal Newborn Hearing Screening, Development, an	
28		Intervention	Intervention Project Manager	
	Dr. Nathan Edwards	Wyoming Optometric Association/ Casper Family	Optometrist/ WOA Pediatric Task Force Co-Chair	
29		Vision Clinic		
	Nicholas Whynott		Part B/619 Coordinator, Early Intervention and Education	
30	Wienolds Whyhole	Wyoming Department of Health	Program Unit	
			Optometrist/ WOA President of the Wyoming Optometri	
_	Dr. Paul L. Gustafson	Casper Vision Center	Association/ WOA Pediatric Task Force Co-Chair	
_	Rebecca Walk	Wyoming Department of Health	Early Intervention Education Unit Manager	
	Dr. Sue Lowe	Snowy Range Vision	Optometrists	
_	Dr. Theresa Taylor-Back	Quality Vision Casper	Optometrist/ WOA Pediatric Task Force Member	
35	Tom Lealos	Wyoming Council of the Blind	President	

## WVC Strategic Plan

Attachment 1 <u>2014-2017 Wyoming Vision Collaborative Logic Model</u> The Wyoming Institute for Disabilities will employ an innovative program, The Wyoming Vision Collaborative, to build statewide coordination and improve the participation and professional practices surrounding vision screening								
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INFOIS	ACTIVITIES	0017013	INTERMEDIATE	LONGTERM				
Wyoming's Vision Collaborative (WVC)           Wyoming Institute for Disabilities (WIND)           Vision Collaborative Coordinators           Wyoming Department of Health funding (Wyoming Department of Health funding)           Wyoming State Agency stakeholder (Wyoming Department of Health (Maternal Child Health (WDH-MCH))           Wyoming Early Hearing Detection Intervention Services- (WDH-EIS))           Wyoming Early Hearing Detection Intervention (EDHI) Program (WDH-Public Health Nursing           Health Care Professionals Wyoming Optometric Association (local providers)           Primary Care providers Medicaid Insurance Providers           Wyoming Department of Family Services (Early childhood division)           Wyoming Department of Family Services (Carly childhood division)           Wyoming Early Hearing Services of Wyoming (CDS)           Wyoming Early Childhood Association (COS)           Wyoming Early Childhood Association (CDS)           Community and Family Partners State Lions Organization (local club Fembratiner forwity Benices Workforce Services Uccal libraries (childrers story time) Community Centers Local libraries (childrers story time) Community Centers Local libraries (childrers story time) Community Centers Heip Me Grow Z11 Parent groups	Coordinate Vision Screening Stakeholders Set up symposium and other group/one- on-one stakeholder meetings Collaborate and plan next steps Allocate funding for supplies/ initiatives Create/ distribute educational materials Establish a set guideline to ensure all children are screened Training for Screeners Create a noilne course through UW for trainers to get certified Require training to become a screener Screening Create an online course through UW for trainers to get certified Require training to become a screeners Uethold gaps and overlaps Develop a comprehensive plan for who will conduct statewide screening (divide and conquer) Clear communication between screeners Include screening on vaccination records Screening Reporting and follow-up data reporting and follow-up Use a database that all key stakeholders can access Community education and parent assistance Adversive sureening (wision screening data reporting vision screening Share a cohesive statewide message, especially how vision screening can prevent vision loss Contact parent groups to reach children not in day cares Provide information for families (i.e. handouts, details on eye diagnoses. Prevole information for families (i.e. handouts, details on eye diagnoses.	Stakeholders gather and collaborate (detrmined by stakeholders) Information disseminated is cohesive and uniform (guidelines established) Evaluation of collaborative by stakeholders and families A training manual for screeners is complete A nonline course is available A complete list of certified screeners is compiled Complete list of certified screeners is applied of screening have a part of screeners is compiled Complete list of certified screeners Gaps and overlaps of screening have a part of screeners is compiled Complete list of certified screeners Gaps and overlaps of screening have a part of screening have a coverage plan WC has a clear channel of communication for stakeholders # of children serviced/follow up Data reporting has a clear protocol A central database exists for all key stakeholders to gain access to Other screening in access to Other screening and are kept in the same database A clear campaigning plan exists Pamphets are created os share WVC message Partners available to contact parent groups	A cohesive vision screening program is in place Clear communication channels exist Higher rates of early intervention Screeners are well trained and know how to use the machines screeners know what information to give families All Wyoming stakeholders, including healthcare providers, have similar protocol for vision screening, as well as other screening systems in place More children serviced Improved surveillance Reporting systems in place More children serviced Consisten follow up with families provided Consisten follow up with families provided Chesive information disseminated Improved community Knowledge about the VVC and supported and serviced Statewide collaboration A cohesive vision screening program in place WVC continuelly seeking	-Increased capacity of Wyoming to identify and service children -Increase community education about vision screening -stakeholders coordinate and collaborate to avoid overlap and meet shared goals - establish an effective platfom for early childhood screening and servicing - contribute to the fields of optometry with better data -inform state legislation based on better data and improved program efficiency -sustain funding IMPACT An efficient (vision) screening program monitors and services the (vision) needs for				
National Resources National Center for Children's Vision and Eye Health Prevention Bindness Other states' materials and experience The Early Childhood DATA Collaborative	Program reflection/ adjustment     Stakeholders discuss strengths and     weakness of program model     Stakeholders plan adjustments	Discussion held at 2015 Vision Symposium to evaluate program Surveys given to stakeholders A plan is created for how to adjust program for upcoming year	refinement and ways to keeps up with changing community needs	all children in Wyoming.				

## **Current Activities**

- Research other states' vision screening programs
  - Communicate with other program coordinators to gather new ideas and understand different program's strengths and weaknesses
- Hold one-on-one meetings with various stakeholders to assess strengths and weaknesses of existing infrastructure
- Digest current national best-practice recommendations
- Strategically plan with key stakeholders in regular meetings
- Create and distribute Wyoming's Screening Program Guideline documents
- Create and distribute Wyoming's Vision Screening Protocol Handbook

# **Current Activities (Continued)**

- Look at EHDI database, as well as other possible databases for future use that will fit evidence based practice recommendations
- Coordinate Plus Optix Technical Training
- Revise follow-up and referral documents
  - Provide current financial resource information, including information about the Affordable Care Act
  - Provide a current list of Wyoming Optometrist offices
- Pilot test revised follow-up documents and procedures (distributed at time of screening vs. mailing out after)
- New use of Language Line, a resource for communicating with Spanish (and other language) speaking families
- Set up Webinars on vision screening practices
- Create brochures and hand outs for community education

## Screening vs. Eye Exam

Screenings DO NOT replace an eye exam!!!

- Still encourage parents of children that pass the screening to regularly see an eye care professional
- Screenings DO NOT catch all eye problems
- Yearly exams are recommended

# Pre- Screenings

- Children should automatically be referred for an exam based on the following:
  - o diagnosis of any known neurodevelopmental disorder
    - (e.g., hearing impairment, motor abnormalities such as cerebral palsy, Down syndrome, cognitive impairment, autism spectrum disorders, or speech delay)
  - systemic disease requiring eye surveillance
  - medication side effect profile
  - prematurity <32 weeks gestation</li>
  - parent suspects eye or vision problem
  - family history reveals an increased risk of eye abnormality
  - o parental request, prior eye examination requiring follow-up
  - physical examination (observation) shows eye abnormality

## Pre-Screenings (continued)

ABC's of potential Vision/Eye Problems

- <u>Appearance</u> (crossed eye, watering eyes, red or drooping eyelids)
- <u>Behavior</u> (thrusting head forward or back while looking at objects, squinting, rubbing eyes)
- <u>Complaints</u> (headaches, nausea, itchy eyes, unusual sensitivity to light)

# Pre-Screenings (Continued)

- Children that are 'untestable' or very difficult to test due to lack of cooperation or unreadable results should be automatically referred
- Children already wearing corrective lenses should be automatically referred

## **Best Practice Framework**

In January 2015, the National Expert Panel from National Center for Children's Vision and Eye Health at Prevent Blindness published their evidence based recommendations in three separate articles. These articles are titled as follows:

### 1) Vision Screening for Children 36 to <72 Months: Recommended Practices

Cotter, S., Cyert, L., Miller, J., & Quinn, G. (2015). Vision Screening for Children 36 to <72 Months: Recommended Practices. Optometry and Vision Science, 92(1), 6-16. Retrieved January 1, 2015, from Wolters Kluwer.

### 2) Vision and Eye Health in Children 36 to <72 Months: Proposed Data System

Hartmann, E., Block, S., & Wallace, D. (2015). Vision and Eye Health in Children 36 to <72 Months: Proposed Data System. Optometry and Vision Science, 92(1), 24-30. Retrieved January 1, 2015, from Wolters Kluwer.

### 3) Vision and Eye Health in Children 36 to <72 Months: Proposed Data Definitions

Marsh-Tootle, W., Russ, S., Repka, M. (2015). Vision and Eye Health in Children 36 to <72 Months: Proposed Data Definitions. Optometry and Vision Science, 92(1), 17-23. Retrieved January 1, 2015, from Wolters Kluwer.

# **Screening Recommendations**

- Visual Acuity test/ Testing distance using the HOTV or LEA symbol chart (approximately 5 minutes)
- Stereopsis test using the Smile II test or Lang-Stereotest (approximately 5 minutes)
- **Color vision testing** (approximately 5 minutes)
- Extraocular eye movement testing (approximately 5 minutes)
- Instrument based photo screening using Plus Optix or Pedia Vision (approximately 5 minutes)
  - Total time: Approximately 25 minutes total per child for tests, 30 minutes total with paperwork, introductions/ instructions, and observations

## Follow-up

Active engagement of parents in the discussion of failed vison and feedback about a visit to an eye care provider to review the results and return these results to a central location.

# Follow-up

- 1- Parent Letter
- 2- Financial Supports for Eye Care
- 3- List of Wyoming Optometrists (by city)
  (Packet for Eye Care Provider- stapled together separately)
  4-Packet cover sheet ("Eye Care Professional Evaluation Packet")
- 5- Eye Care Provider Letter
- 6- Eye Care Professional Evaluation Sheet
- 7- Parent Consent Form
- 8- Vision Screening Test Results Overview
- **9- Photoscreener Results**

# Follow-up (continued)

Why follow-up is important:

- Follow-up with families to ensure children get necessary care
- Evaluate performance of the system
  - Gaps of populations
  - Accuracy of screenings
  - Quality screening programs
- Ensure effective communication between families, child care providers, eye care providers, and state advisors for evidence based practices
- Increase prevention and early intervention rates

### Affordable Care Act (ACA) and Vision • ACA compliant plans have vision coverage available for children (>19 years old)

- Families must select plan 'D' (includes dental, vision and hearing coverage)
- Healthcare.gov for enrollment and to see if you qualify for a subsidy
- Subsidies (discounts) may apply to people that make from around 100% to 400% of the Federal Poverty Level

\*Only short term plans do not need to be ACA compliant

Affordable Care Act (ACA) and Vision (Continued)

- Various vision insurance plans available separately
  - Vision Services Plan (VSP)
  - Eye Med
  - o Spectera
  - Davis Vision
  - Kid Care CHIP

## Foundation and Public Support

- Lions Clubs
- Rocky Mountain Lions Eye Institute Foundation
- VSP Sight for Students Program
- Wyoming Medicaid
- Maternal and Child Health
- Wyoming Children's Special Health Program (CSH)
- Vision USA- American Optometric Association
- InfantSee/Wyoming Optometric Association
- Wyoming Optometric Association's "Give One Day" Program through the Wyoming Department of Family Services

\*See Financial Supports for Eye Care flier for more details

### UNIVERSITY OF WYOMING Wyoming Institute for Disabilities

### FINANCIAL SUPPORTS FOR EYE CARE

There are options to help you pay for eye care for your child. This document will help you determine which options will work best for you. Please see our website at: <a href="http://www.uwyo.edu/wind/vision">www.uwyo.edu/wind/vision</a> and go to Resources for more information.

### THE AFFORDABLE CARE ACT

### ACA AND WYOMING

All Affordable Care Act (ACA) compliant plans have vision coverage available for children. **But, families have** to select the plan that is labeled "D". This indicates that the plan includes dental, vision, and hearing. All different plans, regardless of its classification as a bronze, silver, or gold level insurance, have the "D" option. Within this plan, at the minimum it will cover a vision exam and one pair of glasses or contact lenses annually for children under age 19.

Health insurance plans for families purchased on the private market that are ACA compliant also have the plan "D" option. A private market plan is defined as any plan not enrolled in through <u>healthcare.gov</u> (and/ or does not qualify for a subsidy, which is when you can get money to help you pay for insurance). Please note, families can sign up both through <u>healthcare.gov</u> or through the private market to purchase a separate vision insurance plan.

All insurance companies have to be ACA compliant. However, there is one loophole to be aware of when signing up for insurance. Short term policies do not have to offer ACA compliance, and therefore they will not offer dental, vision, or hearing coverage. Furthermore, people who want a short term policy can only qualify if they do not have any pre-existing conditions.

## WYOMING VISION

FOR MORE INFORMATION:

The ACA compliant insurance companies in Wyoming

- WinHealth, Blue Cross/ Blue Shield (available on the ACA website)
- Assurant (on private market, meaning cannot get a subsidy)

### QUALIFYING FOR A SUBSIDY

In order to qualify for a subsidy (money to help you pay for insurance) through ACA, a person or family must answer the following:

- Is anyone in the family offered health insurance through their employer? If so, then they do not get a subsidy.
- How many people are in the household? Based on number, they are given an amount for which their income.

Subsidies (discounts) for insurance through the Affordable Care Act Marketplace may apply to people that make from 100% to 400% of the Federal Poverty Level. For more information on subsidies visit: <u>www.obamacarefacts.</u> <u>com/obamacarefacts.com/federal-poverty-level</u>.

WYOMING VISION COLLABORATIVE Department 4298, 1000 University Ave. Laramie, WY 82071 Phone: (307) 766-2441 Fax: (307) 766-2549 www.uwyo.edu/wind/vision wyvision@uwyo.edu

### VISION INSURANCE PLANS

Vision insurance plans may be a way to help pay for eye exams and care. The following is a short list of plans, but these are not the only vision insurance programs available. To find out more, visit the following organizations:

Vision Services Plan (VSP) www.vspdirect.com | (800) 785-0699

Eye Med www.portal.eyemedvisioncare.com (888) 439-3633

Spectera www.spectera.com (800) 638-3120

Davis Vision: www.davisvision.com (210) 524-7666

### Kid Care CHIP

www.health.wyo.gov/healthcarefin/chip/index.html (855) 294-2127, a division of Blue Cross Blue Shield, www.bcbswy.com/, or (800) 442-2376. CHIP has income requirements for its vision coverage.

\*Please note, this is intended just as an initial guide to families to help people understand what resources are available to them. Call your local health agent and/or reference: www.bealthcare.gov for the most up to date and accurate information. There are local health insunance agents around the state that can walk you through the process, stepby-step, free of charge. They are extremely helpful to help answer any specific questions you may have. All agents are listed at: www.locallbelp.bealthcare.gov. Enter your zip code, and a list of local agents will appear. On the left side of the screen, you can refine your results. It is recommended that you turn the setting. "Show Agents and Brokers in my results?" to the "On stering. Again, all agents and brokers who are listed are free of charge.

### FOUNDATION AND PUBLIC SUPPORT

Some foundations and public organizations may be able to help pay for eye exams and eye care. To determine if this is an option for you, contact the following organizations:

Lions Clubs www.lionsofwyomingfoundation.org |(307) 631-5423 (Lion David Orr, Executive Director)

Rocky Mountain Lions Eye Institute Foundation www.colions.org/rmleifindex.html | (720) 848-2020

VSP Sight for Students Program www.sightforstudents.org | (888) 290-4964

Wyoming Medicaid <u>www.health.wyo.gov/default.aspx</u> | (866) 571-0944 | (307) 777-7656

Maternal and Child Health: www.mchb.hrsa.gov | (800) 438-5795

Wyoming Children's Special Health Program (CSH) www.health.wyo.gov/familyhealth/csh/index.html (800) 438-5795 | (307) 777-6921

Vision USA- American Optometric Association www.aoa.org/visionusa | (800) 766-4466

InfantSee/Wyoming Optometric Association: www.infantsee.org/ | (888) 396-EYES (3937)

Wyoming Optometric Association's "Give One Day" Program, through the Wyoming Department of Family Services:

www.aoafoundation.org/vision-usa/vision-usa-staterun-programs | (307) 777-6800





# Next Steps of WVC

- Develop next steps:
  - Pilot newly recommended vision screening protocol
    - Child Development Centers
    - Outreach events with local Lions clubs
    - Optometrist community outreach
  - Establish possible incentives for vision screening
  - Ensure follow-up procedures are evidence-based
  - Second stakeholder summit in the Spring 2016
  - Create a formal training program and infrastructure for vision screener using new Vision Screening Protocol (STARs credit, others?)

# Upcoming Webinar

### WVC webinar: Why screen early?

A free webinar with Dr. Nathan Edwards, O.D.

### Tuesday, August 18, 2015, 4-5 p.m.

Enjoy a free training from Wyoming's very own Dr. Edwards, an Optometrist based in Casper and co-chair of the Pediatric Task Force, on why screening early for vision problems is important. This information is geared toward vision screeners and will be derived from evidence based practices. Be sure to bring any questions!

### For more information and registration visit: www.uwyo.edu/wind/vision/trainings.html



### Contact

Canyon Hardesty Coordinator of Community Education <u>canyon@uwyo.edu</u> (307) 766-5003

Julia Lausch Project Coordinator- Primary Contact <u>wyvision@uwyo.edu</u> or <u>jlausch@uwyo.edu</u> (307) 766-2441





# Questions?



http://www.childandfamilyeyecare.com/symptoms-checklist.html