

Insights

Improving Children's Vision in Your State: Lessons Learned



Early childhood eye care can drastically change a

child's health and well-being. For a baby, treatment for a vision impairment could [protect against development delays](#). For kindergarteners, diagnosis and treatment could [improve school performance](#). Yet with specialty doctors catering to young children sometimes hours away, complicated insurance coverage and costs, and competing priorities from parents, such as maintaining employment and avoiding time off, eye care can easily be overlooked or lost in those crucial first 6 years—especially since children can't articulate poor vision as an issue.

Since 2015, improvement teams in Arizona, Ohio and Wyoming have been implementing measures to improve vision care for children age 5 and under so that conditions can be diagnosed in earlier stages. As the [Improving Children's Vision initiative](#), led by NICHQ, in these three states moves into the final year, we've gathered some key lessons-learned so other states

can consider what strategies could be beneficial within their own systems and policy for children's eye care.

Increase access to vision screenings

"Recently, I worked with a school nurse who had to cover an entire district's health needs," describes Ohio Team Lead Stephanie Koscher. "Even though she is already operating with very limited resources, she is now being asked to conduct vision screenings too."

Situations like this are all too common because of the limited number of people trained in vision screenings. And less screeners means less access to diagnosis and care. Arizona, Ohio and Wyoming are all working to increase the number of vision screeners available through various methods, including supporting free training programs to volunteers, educators and healthcare professionals. Wyoming has launched an online training program, which would make it easier for screeners to obtain certification training.

Care settings also have difficulty providing vision screenings because of the cost of screening equipment. To address this obstacle, Arizona is working with philanthropic organizations to provide vision screening devices in primary care provider offices so that more children will have access.

Develop alternative communication lines to parents

Whether screenings are conducted at school or at a health center, communicating vision results to parents is often murky: screenings at school rely on the child delivering their results form to their parents, while results from screenings at a primary care office can often be overshadowed by other health questions or concerns.

The importance of early vision care can easily be lost because of these communication barriers, leading to fewer children receiving critical follow-up care. Arizona plans to implement a public awareness campaign through online mediums and events to help ensure that parents receive the right messaging at the right time. And additional forms of non-print messaging, such as emails or texts provide them with new avenues for reaching parents. Ohio is encouraging in-classroom presentations by optometrists, where children are taught about the importance of eye care, because this can generate continued conversation at home.

Test ways to help parents understand the importance of referrals

Arizona has begun testing ways to motivate parents to follow-up with referrals for their children's eye care. For example, if screenings take place in a primary care office, tools like astigmatism glasses and impaired vision simulators can help parents see what their children see, helping them better understand the impact of visual impairments. Reaching parents that do not interact with the PCP or screener means creating accessible online resources and print materials that provide succinct messaging and convincing visual representations.

Account for insurance barriers

Through parent-partner feedback, Arizona discovered that confusion over insurance can quickly become a barrier to care. "Many people do not understand what their insurance plan covers with children's vision," Karen Woodhouse from the Arizona team explains, "We're helping by providing information for parents on a concise post card or one-pager. Depending on their insurance type and coverage, the form directs them to associated helpful resources. We also

account for those that may not have insurance by highlighting how to access vouchers and find financial support.”

Seek statewide policies and guidelines

Arizona’s team is working with their department of health services to transform outdated eye-care guidelines in lieu of a new state law. This effort will not only result in beneficial new guidelines—including information on children’s vision health from birth to 3 years of age, and resources about technology updates such as internet-based screenings—but it also helped them begin to identify potential champions. When working to implement a new policy, finding passionate stakeholders increases the viability of the policy being adopted.

Because these lessons-learned stem from listening to stakeholders, especially parents, in their ongoing improvement efforts, each state team is identifying clear measures to determine their impact. By reviewing the data through a quality improvement lens, they can be confident in the next steps they pursue will continue to make improvements.

Find out more about how to [use data to advance your improvement effort](#) or [reach out to our Improving Children’s Vision team](#) to learn more about these initiatives.