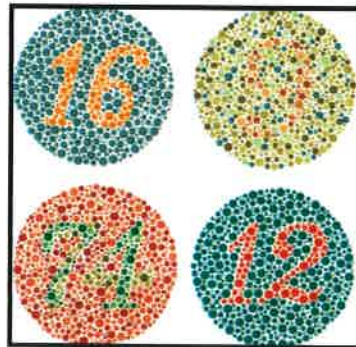
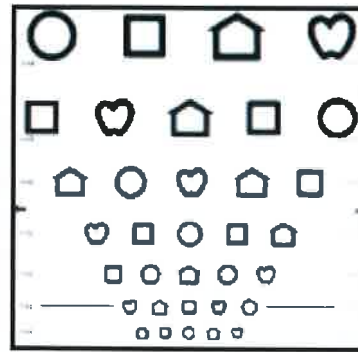




LEHP-Australia
Lions Eye Health Program



April 2021



**CHILDREN'S VISION SCREENING
FACILITATOR MANUAL**

LEHP - Australia
1800 010 234 lehp.org.au

Proudly Supported by:



Centre for Eye Health

Children's Eyes

Most children will accept vision problems and adapt to their poor sight. They rarely complain as they believe everyone sees the world like they do. Identifying and correcting issues early is paramount to a child's ongoing development

Stages of Development

Every stage of a child's development requires good eye sight.



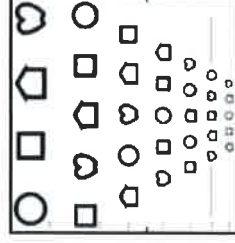
Learning is an ongoing process



Children's Vision Screening Program



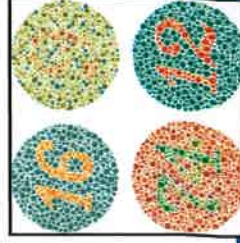
Spot Vision Screener



Visual Acuity



Depth Perception



Colour Vision

1. Example Only Facilitator Use

Further Information



LEHP-Australia
Lions Eye Health Program

Lions Eye Health Program - Australia
PO Box 433 Wahroonga NSW 2076

1800 010 234

enquiries@lehp.org.au

www.lehp.org.au

lionsaustralia
we serve



The LEHP Children's Vision Screening program is for screening purposes only.

It is critical that persons undergoing screening and/or their parents or guardians understand that this is not a substitute for a comprehensive eye examination.

It aims to identify 'common vision problems' and make a referral to an Optometrist or Ophthalmologist when required.

Supported by:



Centre for Eye Health

Lions Eye Health Program - Australia
www.lehp.org.au 1800 010 234

1 in 5 children undetected vision problem

Vision problems have a profound effect on Development

80% of learning is processed through the eyes

What makes LEHP's Children's Vision Screening Program (CVSP) Different?

Vision screening is not a new initiative. It has been around in various forms for many years.

Currently, some health and government organisations provide vision screenings in preschools and schools. Often these programs are limited in the number and type of screenings performed (e.g. visual acuity only). There is also often a restriction on the age of the children able to participate (e.g. 4 - 6 years).

LEHP's CVSP is a comprehensive screening program incorporating:

- four station screening program,
- the latest state-of-the-art equipment,
- children of all ages (6 - 18 years),
- screenings at preschools, schools, community and sport settings,
- comprehensive package of communication materials to the organising facility and parents of children whom participate.



What Screenings are Performed?

1. Spot Vision Screener

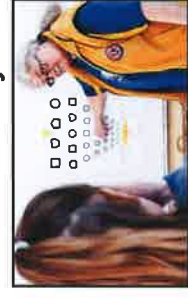
Purpose: State of the art portable machine designed to screen for:

- * Myopia (nearsightedness)
- * Hyperopia (farsightedness)
- * Astigmatism (blurred vision)
- * Anisometropia (unequal refractive power)
- * Binocular Vision (eye misalignment)
- * Anisocoria (unequal pupil size)

Screener stands 1 metre away from the child. The camera is lined up with the child's eyes. Once in view, the machine takes a picture and formulates a report.



2. Visual Acuity



Purpose: How sharp vision is at longer distances.

A symbol chart is placed 3m away from the child at head height. Covering one eye at a time, the child is asked to read out the shapes which are visible, line by line.

3. Colour Vision

Purpose: Does the child perceive colour as most people do?

Using a set of 7 cards, one by one the child is asked if they can distinguish the number on each card. Numbers are formed using a variety of different dots on contrasting coloured backgrounds.



4. Depth Perception

Purpose: Assessing the binocular function of the eyes at near tasks.

Wearing polarising spectacles the child is asked if they can see or 'pick up' the fly jumping out of the page.



Program Support

The CVSP has been created by the Lions Eye Health Program - Australia in conjunction with technical partner **Centre for Eye Health**.



Centre for Eye Health

The program has been the recipient of generous funding from **Lions Clubs International Foundation** and receives the ongoing support of Lions Australia.

Screener Qualifications

All screeners have successfully completed a three phase training accreditation in order to receive the certificate of qualification.

A working with children check or similar is also mandated.

Individual states' health and safety requirements are adhered to.

Vision Screenings can help identify children who may require further assessment by an Optometrist



_____ Insert Date
 _____ Insert Name
 _____ Insert Title
 _____ Insert Address

2.
Example Only
Facilitator Use

Dear _____

_____ Lions Club together with the Lions Eye Health Program - Australia invite you to participate in a comprehensive vision screening program for children aged 3 years and older.

Members of our Lions Clubs have been specifically trained to perform 4 vision screening assessments including:

1. **Visual Acuity** - using a Lea 3m -15 line Symbol Chart
2. **Colour Vision** - using a Quick 6 - Basic Colour Screening Book
3. **Depth Perception** - using a Stereo Fly Screening Tool
4. **Spot Vision Screener** - State of the art portable machine designed to screen for Myopia (near sightedness), Hyperopia (far sightedness), Astigmatism (blurred vision), Anisometropia (unequal refractive power), Binocular Vision (eye misalignment) and Anisocoria (unequal pupil size).

Lion screeners are subject to working with children checks or similar and adhere to state specific health and safety protocols.

The individual screening takes just a few minutes to perform. There is no physical contact made with the child and no eye drops are administered. We provide an individual result sheet which can either be handed directly to the child or given to your administration for on-forwarding to the parents/guardians.

We provide parent information and consent forms which are sent to parents/guardians prior to the screening date.

It is important to understand that this is only a screening and does not constitute an examination or diagnosis of vision problems. Children currently under the care of an optometrist are encouraged NOT to participate.

This service is offered free of charge by the local Lions Club under a program provided by the Lions Eye Health Program - Australia. If the children at your facility do not currently receive regular eye screenings, please contact me to discuss how and when we can provide this vital service.

Over 80% of what children learn is processed through their eyes. Untreated eye conditions can affect a child's learning ability and self-esteem. It is estimated 1 in 5 children in Australia have undetected vision problems. Screenings can help identify children who may require further eye review/testing.

I look forward to hearing from you. I can be reached at _____

Yours Sincerely,

_____ Signature

_____ Insert Name

_____ Insert Title/Club



3. Example Only Facilitator Use

MEMORANDUM OF UNDERSTANDING:

Between the (Lions Club) _____ operating under the Lions Eye Health Program - Australia, and the (Facility) _____ to perform Vision Screening for children registered at the facility on (Date) _____

The Lions Club will perform 4 vision screening assessments including; Visual Acuity, Colour Vision, Depth Perception and Spot Vision Screening. A results sheet will be administered per individual and provided to the Facility for individual distribution, unless informed otherwise. General group results will also be provided.

The facilitating Lions members will comply with all policies and procedures as advised by the facility. The Lions members are covered by Lions Australia Public Liability Insurance - a certificate can be presented upon request.

The Facility will distribute consent forms (provided by the Lions Club) to all parents/legal guardians, ensuring participation is limited to those with signed approval and those who are not currently under the care of an optometrist.

The Facility will ensure that a member of their staff is present in the screening room whenever children are being screened.

Signed:

(For the Lions Club)

(For the Facility)

(Name)

(Name)

(Position)

(Position)

(Date)

(Date)



4.
Example Only
Facilitator Use

Dear Parent/Guardian(s),
The Lions Eye Health Program is offering Free Vision Screening for _____
The screening will be conducted by _____
on _____

Over 80% of what children learn is processed through their eyes. Untreated eye conditions can affect a child's development. It is estimated 1 in 5 children in Australia have undetected vision problems. Screenings can help identify children who may require further eye review/testing.

Members of the Lions club have been specifically trained to perform 4 vision screening assessments including:

- 1. **Visual Acuity** - using a Lea 3m -15 line Symbol Chart
- 2. **Colour Vision** - using a Quick 6 - Basic Colour Screening Book
- 3. **Depth Perception** - using a Stereo Fly Screening Tool
- 4. **Spot Vision Screener** - State of the art portable machine designed to screen for Myopia (near sightedness), Hyperopia (far sightedness), Astigmatism (blurred vision), Anisometropia (unequal refractive power), Strabismus (eye misalignment) and Anisocoria (unequal pupil size).

The individual screening takes just a few minutes to perform. There is no physical contact made with the child and no eye drops are administered. Individual reports will be distributed. If a vision problem is detected, this will be written on the child's result sheet and you will be encouraged to seek a further eye assessment with an eye health professional.

If you would like your child to participate in this vision screening program, please complete the permission slip and return to: _____

Please note; if your child is already under the care of an optometrist it is recommended they do not participate.

Kind Regards,

CHILD'S NAME: _____ *Please tick box when answering yes*

My child is currently under the care of an optometrist or has participated in a eye examination by an optometrist in the past 12 months. **Children currently under professional care not required to participate in screening.**

I, _____, give consent for _____ Class _____
(Parent/Guardian Name) (Child's Name)

to participate in the free vision screening program conducted by the Lions Club identified above. I acknowledge that the screening is not a full eye examination and is unlikely to identify every eye problem which a full eye exam might identify.

to be photographed for the use of LEHP- Australia publications such as newsletters and website.

to provide a copy of my child's result to the facility administration (e.g. school).

_____ (Parent/Guardian Name) _____ (Date)

(Parent/Guardian Signature)

Participant Disclaimer

I understand that:

The LEHP Children's Vision Screening is intended to help detect vision problems. However, I am aware that:

This vision screening is not a substitute for an eye exam performed by a qualified eye care professional and is not intended to diagnose or treat any vision problem.

The screening results should not be relied upon as a substitute for an examination and advice from a qualified eye care professional.

The Lions Eye Health Program are not responsible or liable for any advice, diagnosis, or any other information that may be obtained from the screening results. You should use other resources, particularly your doctor, or eye care professional to check the information.



LEHP-Australia
Lions Eye Health Program



DATE: _____

LOCATION: _____

Parent/Guardian Name	Email	Childs Name	Currently Under care of an Optometrist	Permission to photograph	Signature

5.
Example Only
Facilitator Use

Sign On Sheet - LEHP Children's Vision Screening



LEHP-Australia

Lions Eye Health Program



Facilitator: _____

Location: _____ Date of Screening: _____

All Screeners, Facilitators and Instructors who are present must have their details recorded.

Name	Lions Club	Screener, Facilitator or Instructor	Time In	Time Out	Signature	Working with Children		
						Card Type	Number	Expiry

**6.
Example Only
Facilitator Use**



7.
Example Only
Facilitator Use

Individual Results Slip

	Chart:	Colour:	3D Fly:	Camera:
	Chart:	Colour:	3D Fly:	Camera:
	Chart:	Colour:	3D Fly:	Camera:
	Chart:	Colour:	3D Fly:	Camera:
	Chart:	Colour:	3D Fly:	Camera:
	Chart:	Colour:	3D Fly:	Camera:
	Chart:	Colour:	3D Fly:	Camera:
	Chart:	Colour:	3D Fly:	Camera:



8.
Example Only
Facilitator Use

Group Data Results

Date: _____ Location: _____

Facilitator: _____ Age Group: _____

All measurements in range		Total
Complete Eye Examination Recommended	Visual Acuity	Total
	Colour Vision	Total
	Stereo Depth Perception	Total
	Spot Vision Screening	
	Myopia (near sightedness)	Total
	Hyperopia (far sightedness)	Total
	Astigmatism (blurred vision)	Total
	Anisometropia (unequal refractive power)	Total
	Binocular Vision (gaze) - (eye misalignment)	Total
	Anisocoria (unequal pupil size)	Total
Unreadable		Total

Summary of Results

Total Number Screened _____ Total Number Referred _____

Please send completed form to: enquiries@lehp.org.au or PO Box 433 Wahroonga NSW 2076

Individual Results

Date: _____

Vision Screening Report

To the parents / guardians of _____

Your child underwent vision screening today at _____

The screening evaluates vision clarity and eye co-ordination. It is however a screening and not a complete eye examination. Comprehensive eye checks are advised at least every 2 years throughout your child's school life.

Results

On the basis of your child's vision screening, the current results have been categorised as:

- Passed** - The vision screening did not detect any problems in the areas that were assessed.
- Further Assessment Required** - On the basis of the results today we recommend that you arrange for your child to have a comprehensive vision examination with an optometrist. Results that were found to be *outside* normal limits were:
- Visual Acuity** - The sharpness of vision or ability of the eyes to distinguish the details and shapes of objects.
 - Colour Vision** - Ability to identify a range of colours on differing backgrounds.
 - Depth Perception** - Ability to determine distances between objects and see the world in three dimensions.
 - Spot Vision Screener (a print out from the machine is provided)**
 - Myopia (near sightedness)
 - Hyperopia (far sightedness)
 - Astigmatism (blurred vision)
 - Anisometropia (unequal refractive power)
 - Binocular Vision (gaze) - (eye misalignment)
 - Anisocoria (unequal pupil size)
 - Other
 - Unreadable Result - Spot Vision Screener unable to make a satisfactory reading.

Thank you for your participation in the LEHP-Australia Children's Vision Screening Program.