

Hawaii Lions District 50 Vision Screening Handbook

Prepared by
D50 Vision Screening Steering Committee

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Introduction

District 50 Hawaii Lions are comprised of nearly 1400 men and women in 53 Clubs throughout the State. Hawaii Lions have been providing free hearing and vision screenings at elementary schools throughout Hawaii since 1993, when the Hawaii State Department of Health first asked D50 Lions to assist with preschool vision screening. In 1995 the DOH discontinued their vision and hearing screening program altogether and D50 Lions expanded screenings to elementary, intermediate and high school students.

This handbook aims to provide instructions for D50 Lions to prepare and set up vision test equipment to test young students' vision for possible vision problems according to three test protocols.

Background

The free screenings are conducted on the islands of Kauai, Oahu, Molokai, Maui, Lanai, and Hawaii, by trained Lion volunteers providing a standardized, systematic program based on current best practices for elementary students in the State of Hawaii. Both the Lions Screening Programs (hearing and vision screening) have been upgraded with state-of-the-art instruments providing improved screenings in a fraction of the time that it took in the past. Only students who have parent consent are screened (Opt-In Consent). [The Hawaii Keiki Nursing Program](#) also lends a hand to the Lions' screening program with on-site hands-on nurses.

For those students who are referred for further attention to vision needs, and whose families are under-insured or uninsured, the Hawaii Lions Foundation (HLF) has the Helping Children See (HCS) Program. For those eligible, the HLF through the HCS program, is able to supplement the cost for an eye exam and a pair of glasses.

The Helping Children See Program (HCS) is funded by the Hawaii Lions Foundation specifically to purchase eye examinations and eyeglasses for needy children identified through a Lions Vision Screening Program. HCS enables parents to better prepare their child for success in school. Uncorrected vision can severely impact a child's ability to learn. The inability to benefit from classroom instruction can have life altering consequences. The Lions of Hawaii have had a long and proud history of Vision Screening. With HCS we can now close the circle by offering not only vision screening but also a referral to a professional eye care provider and ultimately fulfillment by providing glasses for those children who are under insured or not insured at all.

In addition to HCS, the D50 Vision Screening Committee Chair maybe able to assist students in need of eye glasses through the Lenscrafters - OneSight organization.

Program Goal

The goal of the statewide Lions screening program is to identify students that most likely have, or may develop, a vision impairment that may affect their academic, social or personal development. The focus is on early detection, by screening children who are in preschool and in grades K, 1, 3, 5, and as resources/manpower permits, grades 7 and 10. Many of the Lions clubs have responded to requests for whole-school screenings. Screening many of the [Title I Schools](#) also remains a program goal.

Procedures

The 2024 – 2025 District 50 Lions Vision Screening Protocols follow the recommended standards set by the State of Hawaii, Department of Health and use the current ‘best practices’ vision screening tools for preschool and elementary school age children. Our Lions Vision Screening Committee annually reviews the recommendations of the Department of Health to adhere, modify and adopt our current, evidenced based, ‘best practice’ model.

The procedures are described in 3 phases.

- Pre-Test
- Testing
- Post-Test

Pre-Test Phase

The Lions Club Vision Screening Coordinator’s (hereafter referred to as coordinator) first step is to contact the school principal or preschool director. It is recommended that the initial contact with the school be in person.

Get the School Ready

- A. At the initial meeting, the coordinator should:
 - Introduce him/herself.
 - Describe the club’s mission and the vision screening program including:
 - [School’s preparation for the screening project](#)
 - Provide for a suitable test room and tables and chairs
 - Need for school/parent volunteers
 - Describe what the [school can expect from the screening program](#)

- Using the [Signs of Possible Vision Problems Checklist](#) as a self-check for vision problems by parents and teachers.
- Provide a copy of the **[Parent Consent and Screening Results Form*](#)**
 - [Protocol 3 Dual Modality Screening](#) using both Photoscreener-autorefractors and Visual Acuity Testing
 - [Protocol 2 Photoscreener-autorefractor only \(Preschool\)](#)
 - [Protocol 1 Visual Acuity Testing only](#)
- Agree on a date and time
- At the discretion of the coordinator, a kit of documents (the four aforementioned documents) describing these topics may be provided to the principal/director as refresher information and checklist.

Get the Club(s) Ready

- B. The coordinator's responsibilities include:
- Place the school on the master schedule by filling in school and scheduling info on the [D50 Vision and Hearing Master Calendar](#).
 - Ensure the screening equipment is complete and operational and is ready for "deployment" to the school.
 - Photoscreener/Autorefractor(s) are charged and working
 - Equipment settings are current (date, time, other operational settings) to allow minimal setup in the screening room
 - Printer(s) are charged and working
 - Adequate supplies of printer labels are on hand
 - Visual Acuity chart test kit(s) and supplies are complete, including [approved eye patches/occluders](#) and [proper method to occlude children](#).
 - Visual Acuity test Flipbooks, Charts, patches/occluders ([supplies found here](#).)
 - A paper image of a child's [footprint](#) for taping at the 10-foot distance.
 - Ensure that the Club's Lions on the screening team are trained and familiar with the testing techniques
 - Determine if additional Lion screeners and volunteers will be needed and enlist assistance from other Lions clubs if necessary.
 - Contact the registered nurse member(s) of the [Hawaii Keiki Nursing Program](#) assigned to the school in question for additional help.
 - Clubs desiring to begin a vision screening program are encouraged to enlist experienced clubs for assistance.
 - The coordinator will forward to the school a copy of the appropriate **[Parent Consent and Screening Results Form* \(see above\)](#)** citing the host club's name, school name, screening date, date form is due in advance of the screening date and in sufficient time to collect the signed consent forms.
 - A team assignment forms for [Protocol 1](#), [Protocol 2](#) or [Protocol 3](#) may be used assemble the screening team.

*The Parent Consent and Screening Results Form is key to the testing process and serves two purposes:

- It informs and engages the parents/guardian for consent to have their child's vision assessed.
- It documents the results of the tests.
- Having a copy of the [Signs of Possible Vision Problems Checklist](#) printed on the reverse of the consent form makes the checklist readily available to the parents/guardian.



This form is due: _____

Gr. _____ Rm. _____

District 50 Hawaii Lion
Vision Screening Program
Parent Consent and Screening Results Form

Teacher Name _____

CONFIDENTIAL

Dear Parents/Guardian of _____
Please print child's legal name No Nicknames

(Please circle child's age or grade)

Age: 2 3 4 5 6 or older

Grade: K 1 2 3 4 5 6 7 10

Your consent is necessary for a free vision screening by the _____ Lions Club at _____ on _____. This is not eye examination, and no eye drops are used.

Your child will be asked to identify letters or symbols using eye charts, or a hand-held photoscreener/autorefractor will determine if vision problems may exist. Students who have glasses must wear their glasses to the screening.

I **consent** to having the Hawaii Lions screen my child's vision. I understand that screening results are preliminary, are not a diagnosis of my child's vision, and that not all vision problems are detectable. I will not hold the Hawaii Lions responsible for any misinformation. The Lions do not retain any personal information following the screening.

Parent/Guardian Signature _____ Date _____

Photoscreener/Autorefractor Results

☐ You **Passed** the Photoscreener Test

(Affix referral label here)

☐ **UTT** = Unable to Test

☐ **Wears Glasses** – Photoscreen with Glasses On

Use “/” mark for pass or “√” for UTT or Glasses

Eye Chart Visual Acuity (VA) Results

VA Age	3yr	4yr	5yr & up	Glasses On <input type="checkbox"/>
Threshold	50	40	32	
Right eye				
Left eye				

UTT ☐

/ = Identified 3 or more symbols/letters – **Pass**
X = Identified less than 3 symbols/letter – **Refer**

UTT = Unable to Test - **Refer**

Screening Results

☐ Your child **Passed** the Vision Screening

☐ Your child should **see an Eye Doctor** for a comprehensive eye examination. Please give this report to your Eye Doctor and/or your child's Primary Care Physician.

Notice to Parents of Students Who Are Being Referred

The vision screening shows potential vision deficiencies that should be evaluated by an eye doctor. Normal vision is critical to your child's learning process. It is also easier and less costly to correct vision problems at an earlier age.

The Hawaii Lions Foundation has a program to assist students' families who don't have sufficient medical/vision insurance. The Foundation can assist with costs for an eye examination and a pair of eye glasses for families who qualify. Please ask your school for information to contact the Lions Club.

Thank you for your assistance and cooperation

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The Parent Consent and Screening Results form may be used for either a photoscreener/autorefractor test and/or a visual acuity test.

Testing/Recording/Data Summary Phase

Choose One:

Dual Modality Vision Testing (Protocol 3) (Recommended Best Practice)

Clubs which are well versed in vision screening and choose to test students under the Dual Modality method should follow the [Protocol 3 procedures](#). Data can be recorded on one of these forms: [Blank Form](#), [K to Grade 10 Form](#), or [PreK to Grade 10 Form](#).

-Or-

Preschool Photoscreener/Autorefractor Testing (Protocol 2)

Photoscreener/autorefractor screening alone, is approved for preschool children (ages 2—5): Clubs should follow the [Protocol 2 procedures](#). Data can be recorded on [this form](#).

-Or-

Traditional Visual Acuity Chart Testing (Protocol 1)

Clubs which do not possess a photoscreener/autorefractor or choose to simply test with the traditional visual acuity chart should follow the [Protocol 1 procedures](#) and use this [Flowchart](#). Data can be recorded on [this form](#).

Conclusion of Testing

- Return the room and furniture to its original configuration.
- The screening coordinator should give the school's designee for a brief discussion of the screening.
 1. Hand over all data forms which are to be returned to parents/guardians.
 2. Recommend that the parents/guardian of students who did not pass the vision screening be urged to see an eye care professional/doctor.
 3. Call attention to the note at the bottom of the Parent Consent and Screening Results form.
 4. If the student's family lacks sufficient medical insurance for an eye exam, have the parent/guardian contact the Lions club's screening coordinator. (Some financial assistance from the Hawaii Lions Foundation may be possible).
 5. Suggest the school propose a date for next year's screening.
 6. Thank the school for the opportunity to serve their community and for the refreshments (if served).

Post-Test Phase

Upon completion of a screening project, the project coordinator should provide the screening statistics to the D50 Vision Screening Sub-Chair in charge of Screening Data for entry into the [D50 Lions Vision Screenings Data Summary and Manpower Sheet](#)

References

Acknowledgements

Since the inception of the D50 Vision Screening Program, there have been many key Lions and Lions Clubs who have contributed to the success of the Program. Too numerous to list and in an effort to avoid offending anyone who may be forgotten, an appreciation is extended to all who have made those contributions and continue to make contributions to the success of the vision screening of pre-school and elementary school children in the State of Hawaii. Thank you all for your contribution to the success of the many students you have screened!

D50 Vision Screening Steering Committee

- ◇ Berta Jenkins, Chair, D50 Vision Screening Committee
- ◇ Gavin Hall, Sub-committee Chairman, Vision Manpower and Data Coordinator
- ◇ Brian Akimoto, Sub-Chair, Amblyopia
- ◇ Dr. Roger Ede, Sub-Chair Research
- ◇ DG Lori Yamashita 2024-2025
- ◇ Gail Kono
- ◇ Frank Nakamoto

D50 Vision Screening Coordinators 2024 - 2025

A list of vision coordinators can be viewed [here](#) .

Links to Other Related Documents

Links of several groups of Hawaii eye care providers are listed below:

- [HMSA Routine Vision Providers](#) (optometrists and ophthalmologists)
- [HMSA Quest Vision Providers](#) (optometrists and ophthalmologists)
- [VSP Providers](#)
- [Lenscrafters Optometrists](#)
- [Walmart Optometrists](#)