

USING THIS CHECKLIST

This checklist is a useful assessment tool for teachers who identify students with suspected vision problems. A key indicator can be those children who do well in the first few grades, and then suffer an inexplicable decline in academic performance at higher levels. Many of these signs develop and increase as the year progresses.

Once completed, the checklist should be kept on the child's school file for reference by everyone involved in the child's progress. It will provide a benchmark for future observations by teachers and parents, to help track any improvement or further decline.

If any of the problems listed on the Checklist are noted, the child should be assessed by a Behavioural Optometrist. You can find your nearest Behavioural Optometrist on the ACBO website at www.acbo.org.au

CHECKLIST

Student's Name:

Date:

Keep a copy of the completed checklist on the student's school file to track improvement or deterioration

Appearance Of Eyes

- ☐ One eye turns in or out
- ☐ Reddened eyes or lids
- ☐ Eyes tear often
- ☐ Encrusted eyelids
- ☐ Frequent styes on eyelids

Complaints When Using Eyes

- ☐ Headaches
- ☐ Burning or itching eyes
- ☐ Nausea after reading
- ☐ Print blurs or double vision
- ☐ Words move or "swim" on the page

When Student Reads

- ☐ Head movement
- ☐ Loses place often or needs finger to keep place
- ☐ Omits words frequently
- ☐ Re-reads or skips lines
- ☐ Short attention span
- ☐ Fails to recognize some words

- ☐ Confuses similar words
- ☐ Whispers to self when reading
- ☐ Quickly loses interest when reading
- ☐ Holds book too close to face

When Student Writes

- ☐ Writes uphill or downhill
- ☐ Repeats letters within words
- ☐ Omits letters, numbers or phrases
- ☐ Misaligns digits
- ☐ Squints, closes or covers one eye
- ☐ Tilts head
- ☐ Fails to recognize same word when repeated in text
- ☐ Reverses letters & words when writing
- ☐ Fails to visualize
- ☐ Makes mistakes when copying from chalkboard
- ☐ Writing poorly spaced or crooked
- ☐ Unable to stay on ruled lines
- ☐ Poor placement of words on page
- ☐ Odd working posture at desk activities
- ☐ Uses hand as "spacer"
- ☐ Holds face too close to desk

Other Problems

- ☐ Must feel things to understand
- ☐ Repeatedly confuses right and left sides
- ☐ Difficulty with similarities and differences
- ☐ Avoids desk work
- ☐ Blinks, squints, rubs eyes frequently
- ☐ Fatigues easily

TEACHER'S VISION CHECKLIST




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PRACTICE STAMP



This information has been prepared to help teachers and other professionals identify children's visual problems, which may interfere with learning and classroom performance.

Visual problems that prevent children from doing well in the classroom will NOT be uncovered by measuring eyesight alone, nor by most stereoscopic devices. The value of such school-screening methods is to identify those children who do not have normal eyesight.

VISION IS MORE THAN EYESIGHT

It is the ability to visualize, understand and apply the information that comes through the eyes. When using this guide and checklist we need to understand the difference between the terms SIGHT and VISION.

SIGHT is merely what results from the eyes' responses to light shining into them and is measured by determining how well we can see different sized letters on a chart in the distance. **VISION** results from the child actively interpreting and understanding the information made available through the eyes.

Children with normal (20/20) **EYESIGHT** may not have these abilities. Therefore, learning problems are often related to vision problems

Teachers are the best screeners for vision problems. They observe the child functioning in the classroom. The appearance of irritated eyes, squinting and frequent blinking are **PHYSICAL** signs of visual problems.

A child's **PERFORMANCE** may be affected by problems with eye movements, eye teaming, eye-hand coordination, and visual processing.

Following are some commonly found problems. If the cause is lack of readiness, the problem should diminish over time. If the cause is deemed to be clinical, you should refer the child to a Behavioural Optometrist for assessment.

EYE MOVEMENT PROBLEMS

The information obtained by the child will be reduced if eye movements are slow or clumsy, if the eyes jump, "stutter" or lose their place on instructional materials.

Is This A Readiness Problem?

If so, improvement should be evident in a week or two as the child develops action skills. Visual and developmental experience provided by classroom programs can help.

Is This A Clinical Problem?

If so, you will see the child struggle to work with paper tasks, avoid visually demanding materials, do more head turning when reading, decreasing attention span, fatigue and restlessness during desk activities.

EYE TEAMING PROBLEMS

While our eyes are supposed to work as a team in order to perform as one, this teaming is not guaranteed by design. It must be acquired and developed through use during the preschool years and not all children adequately develop this skill.

Problems in this area of visual performance will manifest as general clumsiness in the classroom and in the playground. Squinting, blinking and poor posture may also be evident.

Is This A Readiness Problem?

If so, improvements should occur by the end of the first month in school. If the teacher sees improvement, some simple eye movement exercises can help.

Is This A Clinical Problem?

This will be indicated if there is decreasing competency on visually demanding near tasks. The child may lag behind the group, show a preference for (or even increased skill in) listening activities, or completely lose interest in classwork.

EYE-HAND COORDINATION PROBLEMS

Eye-hand coordination problems are noted as a lack of skill in drawing or writing. The child is unable to stay within the lines when colouring, and shows poor orientation of work on the page. Often they will continue to be dependent on their hand for inspection and exploration.

Is This A Readiness Problem?

If so, improvements often occur once the child understands what is expected. This child will complete basic tasks well, but may still struggle with more specialized tasks. Blackboard work is better in form, continuity and neatness than paperwork, and repetitions show improvement.

Is This A Clinical Problem?

If there is no perceptible evidence of improvement despite time, repetition & practice, the child should be referred to a Behavioural Optometrist.

VISUAL FORM PERCEPTION

Form perception problems are usually a result of difficulties in the discrimination of visible likenesses and differences. There is confusion with similarities, inattention to slight differences, reversals in reading and reversals of letter forms. This may produce difficulties in spelling and writing.

Visual imagery allows the child to relate primary experiences to the pictures and words on the printed page. Skill in comparison, imagery and visualization provides perceptual information which permits the translation of object size, shape, texture, location, distance and solidity into discernible pictures and words.

Is This A Readiness Problem?

If so, you should see rapid improvement as the child practices and gains experience. Their writing, copying and drawing should become neater with repetition.

Is This A Clinical Problem?

If improvement is not evident within a short space of time, then refer them to a Behavioural Optometrist.

LONG-SIGHTEDNESS

Refractive Status (hyperopia), astigmatism and focusing problems interfere with visual efficiency and, in turn, the child's comprehension processes and classroom participation. These problems can be present even though the child may have (20/20) eyesight. Obvious signs are avoidance of book & desk work.

Children demonstrating any of the above problems need prompt attention with a thorough vision assessment covering visual integrity, visual efficiency and visual processing. A Behavioural Optometrist assesses all these areas.

Regardless of the cause of this problem it requires prompt professional treatment, as any delay in vision care will dramatically reduce the child's achievement levels at school, and they may begin to adapt behaviours to compensate or overcome the issue.

