RECOMMENDATIONS

SEPTEMBER 2016 • MAKING EYE HEALTH A POPULATION HEALTH IMPERATIVE: VISION FOR TOMORROW

Establishing conditions and policies that promote population eye and vision health and that minimize preventable and correctable vision impairment is an essential, timely, and achievable objective—one that is necessary to improve the overall quality of life, functioning, and productivity of individuals. Achieving the twin goals of improving eye and vision health and increasing health equity will require actions that reinforce each other. The committee's recommendations are broadly framed but are critical to establish conditions that will support a sustainable population health initiative that will effectuate a long-term reduction in vision impairment and its ramifications. These recommendations provide the foundational support for other, more specific actions by stakeholder groups, as described throughout the report.

Facilitate Public Awareness through Timely Access to Accurate and Locally Relevant Information

RECOMMENDATION 1

The Secretary of the U.S. Department of Health and Human Services should issue a call to action to motivate nationwide action toward achieving a reduction in the burden of vision impairment across the lifespan of people in the United States. Specifically, this call to action should establish goals to:

- Eliminate correctable and avoidable vision impairment by 2030,
- Delay the onset and progression of unavoidable chronic eye diseases and conditions,
- Minimize the impact of chronic vision impairment, and
- Achieve eye and vision health equity by improving care in underserved populations.

RECOMMENDATION 2

The Secretary of the U.S. Department of Health and Human Services, in collaboration with other federal agencies and departments, nonprofit and for-profit organizations, professional organizations, employers, state and local public health agencies, and the media, should launch a coordinated public awareness campaign to promote policies and practices that encourage eye and vision health across the lifespan, reduce vision impairment, and promote health equity. This campaign should target various stakeholders including the general population, care providers and caretakers, public health practitioners, policymakers, employers, and community and patient liaisons and representatives.

Generate Evidence to Guide Policy Decisions and Evidence-Based Actions

RECOMMENDATION 3

The Centers for Disease Control and Prevention (CDC) should develop a coordinated surveillance system for eye and vision health in the United States. To advise and assist with the design of the system, the CDC should convene a task force comprising government, nonprofit and for-profit organizations, professional organizations, academic researchers, and the health care and public health sectors. The design of this system should include, but not be limited to:

- Developing and standardizing definitions for population-based studies, particularly definitions of clinical vision loss and functional vision impairment;
- Identifying and validating surveillance and quality-of-care measures to characterize vision-related outcomes, resources, and capacities within different communities and populations;
- Integrating eye-health outcomes, objective clinical measures, and risk/protective factors into existing clinical-health and population-health data collection forms and systems (e.g., chronic disease questionnaires, community health assessments, electronic health records, national and state health surveys, Medicare's health risk assessment, and databases); and
- Analyzing, interpreting, and disseminating information to the public in a timely and transparent manner.

RECOMMENDATION 4

The U.S. Department of Health and Human Services should create an interagency workgroup, including a wide range of public, private, and community stakeholders, to develop a common research agenda and coordinated eye and vision health research and demonstration grant programs that target the leading causes, consequences, and unmet needs of vision impairment. This research agenda should include, but not be limited to:

- Population-based epidemiologic and clinical research on the major causes and risks and protective factors for vision impairment, with a special emphasis on longitudinal studies of the major causes of vision impairment;
- Health services research, focused on patient-centered care processes, comparative-effectiveness and economic evaluation of clinical interventions, and innovative models of care delivery to improve access to appropriate diagnostics, follow-up treatment, and rehabilitation services, particularly among high-risk populations;
- Population health services research to reduce eye and vision health disparities, focusing on effective interventions that promote eye healthy environments and conditions, especially for under-served populations;
- Research and development on emerging preventive, diagnostic, therapeutic, and treatment strategies and technologies, including efforts to improve the design and sensitivity of different screening protocols.

RECOMMENDATION 5

The U.S. Department of Health and Human Services should convene one or more panels— comprising members of professional organizations, researchers, public health practitioners, patients, and other stakeholders—to develop a single set of evidence-based clinical and rehabilitation practice guidelines and measures that can be used by eye care professionals, other care providers, and public health professionals to prevent, screen for, detect, monitor, diagnose, and treat eye and vision problems. These guidelines and supporting evidence should be used to drive payment policies, including coverage determinations for corrective lenses and visual assistive devices following a diagnosed medical condition (e.g., refractive error).

RECOMMENDATION 6

To enable the health care and public health workforce to meet the eye care needs of a changing population and to coordinate responses to vision-related health threats, professional education programs should proactively recruit and educate a diverse workforce and incorporate prevention and detection of visual impairments, population health, and team care coordination as part of core competencies in applicable medical and professional education and training curricula. Individual curricula should emphasize proficiency in culturally competent care for all populations.

Enhance Public Health Capacities to Support Vision-Related Activities

RECOMMENDATION 7

State and local public health departments should partner with health care systems to align public health and clinical practice objectives, programs, and strategies about eye and vision health to:

- Enhance community health needs assessments, surveys, health impact assessments, and quality improvement metrics;
- Identify and eliminate barriers within health care and public health systems to eye care, especially comprehensive eye exams, appropriate screenings, and follow-up services, and items and services intended to improve the functioning of individuals with vision impairment;
- Include public health and clinical expertise related to eye and vision health on oversight committees, advisory boards, expert panels, and staff, as appropriate;
- Encourage physicians and health professionals to ask and engage in discussions about eye and vision health as part of patients' regular office visits; and
- Incorporate eye health and chronic vision impairment into existing quality improvement, injury and infection control, and behavioral change programs related to comorbid chronic conditions, community health, and the elimination of health disparities.

RECOMMENDATION 8

To build state and local public health capacity, the Centers for Disease Control and Prevention should prioritize and expand its vision grant program, in partnership with state-based chronic disease programs and other clinical and non-clinical stakeholders, to:

- Design, implement, and evaluate programs for the primary prevention of conditions leading to visual impairment, including policies to reduce eye injuries;
- Develop and evaluate policies and systems that facilitate access to, and utilization of, patient-centered vision care and rehabilitation services, including integration and coordination among care providers; and
- Develop and evaluate initiatives to improve environments and socioeconomic conditions that underpin good eye and vision health and reduce eye injuries in communities.

Promote Community Actions that Encourage Eye- and Vision-Healthy Environments

RECOMMENDATION 9

Communities should work with state and local health departments to translate a broad national agenda to promote eye and vision health into well-defined actions. These actions should encourage policies and conditions that improve eye and vision health and foster environments to minimize the impact of vision impairment, considering the community's needs, resources, and cultural identity. These actions should:

- Improve eye and vision health awareness among different social groups within communities;
- Engage community organizations and groups to promote eye and vision health awareness in daily activities;
- Establish and enforce laws and policies intended to promote eye safety and the functioning of people with vision impairment;
- · Identify the need for, and community-level barriers to, vision-related services and resources in their communities; and
- Adopt policies and create community networks that support the design of built environments and the establishment of social environments that promote eye and vision health and independent functioning.

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