

SENATE BILL REPORT

SB 5958

As Reported by Senate Committee On:
Early Learning & K-12 Education, February 25, 2009

Title: An act relating to vision screening of school children.

Brief Description: Regarding vision screening for public school students.

Sponsors: Senator Oemig.

Brief History:

Committee Activity: Early Learning & K-12 Education: 2/18/09, 2/25/09 [DPS].

SENATE COMMITTEE ON EARLY LEARNING & K-12 EDUCATION

Majority Report: That Substitute Senate Bill No. 5958 be substituted therefor, and the substitute bill do pass.

Signed by Senators McAuliffe, Chair; Kauffman, Vice Chair, Early Learning; Oemig, Vice Chair, K-12; King, Ranking Minority Member; Brandland, Hobbs, Holmquist, Jarrett, McDermott, Roach and Tom.

Staff: Juliana Roe (786-7438)

Background: Under current law, every board of school directors is required to provide for and require visual and auditory acuity screening for all children attending schools in their districts. The screening must be made in accordance with the procedures and standards adopted by rule or regulation of the State Board of Health (SBH) in consultation with the Superintendent of Public Schools. Under the rules adopted by SBH, personnel conducting the visual acuity screening must use either the Snellen E chart or the standard Snellen distance acuity chart that screen for distance central vision acuity.

Summary of Bill (Recommended Substitute): Students who from one semester to the next exhibit striking behavior, discipline changes, or a sudden drop in academic performance may be subject to screening in addition to that required by SBH to determine whether the change in behavior, discipline, or performance is due to visual impairment. Personnel conducting the additional visual screening must use near vision, distance vision, and stereo vision screenings. Personnel may include ophthalmologists, optometrists, or opticians who donate their professional services to schools or school districts.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

EFFECT OF CHANGES MADE BY EARLY LEARNING & K-12 EDUCATION COMMITTEE (Recommended Substitute): Includes near, distance, and stereo vision screenings in the types of additional screenings that must be used if a student is subject to additional visual screening.

Includes ophthalmologists, optometrists, and opticians as "personnel" who may donate their professional services to schools or school districts.

Appropriation: None.

Fiscal Note: Requested on February 13, 2009.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: PRO: This is an important bill. Children can do better in school if they can see well. Most schools only test far vision and not near vision. However, because computers are more frequently used in schools today, near vision analysis should be conducted of students. There is a growing body of scientific research indicating that undetected vision problems may be at least partially responsible for behavioral problems as well as academic challenges. In 2005 at the King County Juvenile Detention Facility, a pilot project was started for which incarcerated youths were screened for vision problems. The screenings found that 80 percent of the children had vision problems. Seventy-three percent needed glasses and others needed additional vision evaluations. The current state vision screening standards require only basic vision screening that often cannot detect more complex visual function problems. The expense of implementing some additional vision tests is not very large.

The term "functional vision test" should be better identified. As part of a 2006 Senate work group, two specific recommendations were found with regard to functional testing: near vision and stereovision testing should be conducted in schools. Most school districts have the infrastructure for near vision testing and to add the stereovision testing would cost about \$30,000 statewide. Stereovision testing machines cost about \$175 per school.

Snellen tests required by SBH are outdated and the board has been working on updating the rules requiring these tests. There is concern that having school personnel conducting the testing may not be the right persons to conduct additional tests.

Persons Testifying: PRO: Kathy Lambert, King County Council Member; Dr. Edward L. Jones, Optometrist, Hearing Aid Specialist; Brad Tower, Optometric Physicians of Washington; David Epley, Washington Academy of Eye Physicians and Surgeons; Craig McLaughlin, State Board of Health.