



SPECIAL OLYMPICS LIONS CLUBS INTERNATIONAL OPENING EYES PROGRAM

CLINICAL DIRECTOR MANUAL



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History of Special Olympics and Opening Eyes

We are very excited to bring the Special Olympics Lions Clubs International Opening Eyes (SOLCIOE) Vision Program, part of the Healthy Athletes' Initiative for Special Olympics Athletes, to you and your area! Please accept our gratitude for volunteering to serve as our Local SOLCIOE Clinical Director.

This manual has been prepared to give you the information you'll need to successfully organize and complete your Special Olympics Opening Eyes event. Please read the information carefully, even if this is not your first time as a Local SOLCIOE Clinical Director. We have added quite a bit of new information for you regarding the SOLCIOE program!

Special Olympics Mission Statement

The mission of Special Olympics is to provide year round sports training and athletic competition in a variety of Olympic-type sports for all children and adults with intellectual disability (ID), giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy and participate in a sharing of gifts, skills and friendship with their families, other Special Olympics athletes and the community.

About Special Olympics

The concept of Special Olympics began in the early 1960's when Eunice Kennedy Shriver started a day camp for 100 local children with ID at her home in Rockville, Maryland. From that experience it was clear to Mrs. Shriver that people with ID were far more capable in sports and physical activities than many experts believed. In the summer of 1968 Mrs. Shriver and the Chicago Park District organized the first Special Olympics Games, which were held at Chicago's Soldier Field. One thousand athletes from the United States and Canada competed in that inaugural event.

The goal of Special Olympics is for persons with developmental disabilities including intellectual disability to have the opportunity to become useful and productive citizens who are accepted and respected in their communities. It is the intent of Special Olympics to focus upon abilities, not disabilities

What Is Opening Eyes?

Special Olympics Lions Clubs International Opening Eyes (SOLCIOE) is a program designed to provide quality eye care for all people with developmental disabilities, and particularly for those who are competing as Special Olympics athletes. Dr. Paul Berman as chair of the Sports Vision Section of the American Optometric Association (AOA) developed the original pilot program, which eventually became SOLCIOE. In 1997, SOLCIOE became an official program of Special Olympics (SO).

There are several ways that the SOLCIOE program helps to increase the athlete's access to care: (1) providing vision assessment, refractions, and dispensing of appropriate eyewear to Special Olympic athletes during Special Olympics Events. (2) Making permanent changes in the attitudes of the optometrists, ophthalmologist and other eye care professionals along with optometry students and ophthalmology residence who volunteer to participate in the SOLCIOE vision program. (3) Educating the athletes, their guardians, coaches and administrators about the importance of vision to the athletes' performance in sports, school and work. (4) Providing continuing education to our volunteer eye care providers in order to familiarize them with the new and accurate techniques for assessing the vision of this patient population.

Another important way SOLCIOE helps to increase access to care is by giving volunteer eye care providers and students an opportunity to work with a population to which they may not have had previous exposure. For many of our volunteers at past events, this wonderful experience has opened their eyes to the visual needs of people with ID. The apprehension that they may have previously felt about treating a patient with special needs disappears in this positive, non-threatening environment. This exposure may also have an impact on how an eye care providers will structure his/her practice. Therefore it is important to include students as well as those already in practice in your group of volunteers. The more eye care providers we can influence and encourage to include patients with special needs in their practices, the more we will help to eliminate one of the major "access to care" issues affecting people with intellectual disabilities.

Lions Clubs Partnership

The Lions Clubs International Foundation (LCIF) has been Special Olympics International partner since 2001 to help support existing SOLCIOE programs and to help establish new SOLCIOE programs worldwide through grants and volunteers. LCIF is the grant-making arm of the Lions Clubs International, the world's largest service club organization with more than 1.4 million members.

Lions are committed to providing humanitarian service around the globe, and for the past eight decades, have been at the forefront of blindness prevention and eye health initiatives. Through generous grant support from the Lions Clubs International Foundation, the Special Olympics Lions Clubs International Opening Eyes program is achieving constant growth and is reaching toward its goal of bringing proper eye care to Special Olympics athletes around the world.

For their generosity The Lions Clubs International Foundation is a Global Sponsor which is the highest level of Special Olympics' sponsorship. The partnership will be a working relationship between Lions Clubs members and eye care providers on a worldwide basis. Lions' members need to be invited to participate at SOLCIOE events, and SOLCIOE eye care providers will be encouraged to become Lions Clubs members.

Healthy Athletes sub award capacity grants for OE

All Special Olympics programs that have a SOLCIOE program are eligible to apply for money from the Lions Clubs International Grant through Healthy Athletes sub award capacity grants processed by Special Olympics International (SOI). The grant is structured to provide money for both new and sustaining programs. New programs may be eligible for costs incurred for one time set-up and equipment costs. Sustaining programs are eligible for lesser amounts of money and may therefore need to do some fundraising if the sustaining amounts are not sufficient. Completing the grant application has to be done collaboratively with the state's local Special Olympics Program – please contact your Healthy Athletes manager or Special Olympics program director.

Your Opening Eyes global management and advisory team

SOLCIOE Senior Manager

Bjoern Koehler
Email: bkoehler@specialolympics.org

SOLCIOE Senior Manager Logistics

Sally Stein
Email: sstein@specialolympics.org

SOLCIOE Global Clinical Advisor

Sandra Block OD, M Ed, MPH, FAAO, FCOVD
Email: sblock@ico.edu

SOLCIOE Global Clinical Advisor

Stefan Schwarz FAAO
Email: s.schwarz@optometrie-schwarz.de

Planning Schedule Check List

Twelve Months prior to the event:

Administrative

- Contact your state's local Special Olympics (SO) Program to let them know that you are coordinating the SOLCIOE screening for their state or country games. Get acquainted with people with whom you will be working. Find out about any planning meetings, site visits, coaches or delegate meetings that would be appropriate for you to attend...
- Organize your local SOLCIOE team
- Contact your local Lions Clubs District Governor to inform about the date and location of the event
- Contact your state or country association to check for restrictions or requirements when conducting a vision screening which includes refractions (visual analysis). If special information consent forms are necessary, have them included in your local SO mailings to parents and guardians as soon as possible. Prepare informed consent forms (in conjunction with your SO Program) Include permission for athletes to participate in the SOLCIOE program in their [informed consent form](#). The SO Program will need to send these out well in advance of the games.
- Get the athlete's competition schedule from your local SO contact. If possible make arrangements for certain teams to come to the SOLCIOE program at a prearranged time.

Six Months prior to the Event

Administrative

- Assemble your team and distribute assignments,
- Decide with your SO Director the days and hours of operation for the program. Introduce your site coordinator to the local SO Games coordinator.
- You and/or your site coordinator need to make a visual inspection of the screening site. Location is very important!! You want a site that is easily accessible to the athletes (preferably within walking distance of the competition areas or the eating area). You need to make sure that there is electricity available and that the lighting can be arranged to suit your needs. If you are in a building make sure you are accessible to wheelchairs. If you are in an outdoor site you will need to place the tent (with sides) on a flat area and be accessible to electricity.
- Write periodic announcements to be put into local SO mailings to coaches/parents informing them of the screening.
- Work with your SO program to fill out your budget and Healthy Athletes capacity Grant Application.
- Fill out program needs form (PNF) in Hyperoffice and submit (see Hyperoffice tutorial at page 25). Please ask Sally Stein for support if needed.
- Contact your state or country optometric/professional association's executive director and president to inform them of the program and to help get the needed volunteers from all over your state or country.

- Make contacts with potential sponsors for equipment.
- Arrange for ophthalmic equipment from a local source(s) schools, colleges, distributors etc.

Site

- Give local SO Games Coordinator the On Site List (see appendix)
- Make a floor plan for the screening space. If you are in a building you will need to find out about fire codes - you cannot block exit doors. See sample layout page 15
- If you are not part of the program where Essilor Vision Foundation is working to fabricate lenses arrange for 1-2 local optical laboratories to fabricate the glasses and sports goggles. The majority of the jobs will be single vision plastic, however there will be some bifocals and some polycarbonate sport specs.
- Make a protocol for dispensing the glasses by mail, with your SO program through the state or country Association or with the fabricating lab.

Volunteer/Education

- Begin advertising for volunteer optometrist, ophthalmologists and other eye care professionals as well as non clinical volunteers (Lions): you need at least 50 volunteers/day
- Advertise the vision screening in your state, local or country optometric/professional association's newsletter
- Contact all Optometry/Ophthalmology academic programs in your area. Let them know about the vision program in advance and to make arrangements for volunteers.
- Make a list of near-by hotels for out of town optometrists/eye care practitioners for housing. Housing should be limited to those who must travel 90 minutes or more. Optometrists/ eye care practitioners should room two per each room and students four per each room
- Start a list of "willing providers"-optometrists/ eye care practitioners and ophthalmologists for follow-up care.
- Translate the [Opening Eyes screening form \(HAS form\)](#), vision report card and screening protocols into your native language. Find all forms in the appendix.

Three Months prior to the event

Administrative

- Stay in contact with your local SO Program.
- Include SOLCIOE brochure in all mailings to volunteers, donors, coaches etc.
- Get your state, local or country optometric/professional association involved in setting up local publicity
- Confirm program needs items with Sally Stein

Site

- Check that your local SO coordinator understands your on site needs (see On Site list).
- Coordinate with your local SO contact for tables, chairs, pipe and drape, fans, electricity, etc. for screening site (see On Site list in appendix)
- Contact your state's or country's local Special Olympics Program contact person to find out about schedules, parking, and credentials

Volunteer/Education

- Continue to advertise screening in state, local or country association's newsletter for more exposure
- Make sure that you have local optometrists/ eye care providers for every day of the event.
- Contact Optometry/Ophthalmology schools to arrange for student and faculty volunteers
- For those needing overnight accommodations: Rooms are for double occupancy only and four to a room for students. Non-volunteers or spouses must pay for their part of the rooms
- Send out volunteer letters
- Order T-shirts –use proper logos (please see page 14. Logos might change so please ask for the latest ones)
- Make copies of the HAS form, protocols sheets.

One Month prior to the event

Administrative

- Request any other information you may want, such as Olympic Village maps, directions to the site for your volunteers, parking information, plans for inclement weather, credentials, etc. You may also want to find out if it would be appropriate to have volunteers from SOLCIOE participate in the Opening Ceremonies parade. As you get closer to your event date, you may wish to also talk to the local SO organizers about making public announcements about the vision program during the games. It is also nice to give people who have been helpful to you one of our t-shirts as a "thank you" for their work on our behalf. (security guard, local SO coordinator etc.)
- Check with your local SO Program about eye emergency referrals. If your state/country allows you to handle such emergencies you may need to have a slit lamp and BIO available at the medical station (not at the screening site). You will then need to designate "on call" optometrist/eye care practitioner for such emergencies. If you do not want to handle any emergencies then familiarize yourself with the SO protocol for such situations.

Site

- Confirm on site arrangements: tables, chairs, tent, electric etc. There should be overnight security every night for the site until the equipment is removed.
- Check when the tent or indoor site will be set up and ready for you to occupy
- Arrange for equipment to be delivered to screening site.

- Confirm delivery and pick-up times for your equipment. Plan on setting up equipment the day before the screening (it takes about 6-8 hours to set up and calibrate and charge all the equipment). You will need electric, tables and chairs in place on the day you do set-up. Check for bad weather site alternative. If there is an indoor site make sure you have adequate space and can control the lighting. (See On site list in the appendix).
- Finalize arrangements for equipment: Make sure you have everything on your Equipment Lists. If anything is missing please contact Sally Stein.
- Stay in contact with your local SO contact person
- You will need 4-6 people to help with set-up. (If you are having volunteer training the day before the event, plan to set up on that day either before or during volunteer training).
- Finalize any parking permits.
- Make up sponsor banner and signs. You can order sponsor banner and program banners for your first time event. Please submit your needs through the PNF form (see page 25)
- If you plan on faxing dispensing information to a local lab- make sure you have access to a fax machine. If the GOC (Games Operation Center) is going to be nearby to Olympic town that would be where you would find a fax and copier. If not, know where to find one close to your location.

Volunteer/Education

- After CE you will need 2-3 hours of hands on instructions on the equipment, protocol review and to assign volunteers to their stations. We suggest that you arrange a meeting with your volunteers (professional and lay people) prior to the screening to get them familiar with the tests and protocols. If you are unable to do that – make sure that you schedule adequate time to train your volunteers properly.
- Finalize hotel accommodations, make room assignments
- Finalize volunteers' schedule- send a letter to each volunteer with special instructions on parking, credentials, T-shirts, CE seminar, schedules, Hand instruments etc.

Two to one weeks prior to the event

Administrative

- Contact your local SOLCIOE team to make sure everyone has completed their assignments.
- Stay in contact with your local SO Program

Site

- Stay in contact with your local SO Program for last minute arrangements
- Contact SOLCIOE team to go over last minute arrangements.
- Confirm security!

Volunteer/Education

- Be sure all your volunteers know their schedules.
- Choose area monitors (see Volunteers section) and make sure they understand their jobs
- Prepare referral lists of people who have agreed to see people with ID to be handed out at the screening

Day before Screening

Administrative, Site and Volunteer

- Set up site
- Check on hotel arrangements for out of town volunteers and suppliers
- Meet with your out of town guests

During the Vision Screening

Administrative

- Check with local SO Program on food, water, and reception for your volunteers.
- Be available for interviews from local media
- Oversee screening operations, athlete flow, refraction/Rx , dispensing and fabrication of eyewear and screening data entry.

Site

- Oversee set up and break down of screening site
- Make sure that all equipment is packed up and shipped back
- Confirm pick up of large equipment
- Be in charge of sending out prescriptions to outside labs

Volunteer/Education

- Distribute nametags, volunteer assignments and T-shirts
- Go over screening protocols.
- If you are having volunteer training there should also be sufficient time to go over the protocols and hands on experience on the instruments. Going over screening protocols and equipment may take 1-2 hours
- Consider sufficient time for volunteers to eat.

Post Screening

Administrative

- Send out Thank you letters to all sponsors and donors
- Send out Thank you letters to local Special Olympics staff
- Fill in the online Event Summary report see the tutorial following
- Begin planning your next event with your local SO Program
- Finalize any bills with your local SO Program, so you can plan your budget for the following year

Site

- Make sure that all glasses are delivered to athletes
- Inventory all your supplies
- Send back any borrowed equipment and surplus frames

Volunteer/Education

- Send out Thank you letters to all volunteers
- Send out Volunteer Certificates and CE certificates see samples on disk

Screening data entry and event evaluation

All screening data collected at SOLCIOE events is the sole property of SO and SOLCIOE. No research or publication of this data is permitted without the consent of SO and SOLCIOE and without informed consent of the athlete. For information regarding use of data contact Dr. Sandra Block or send an email to healthdata@specialolympics.org.

Programs that received a grant for the event are required to enter the screening data into the Healthy Athletes software. A tutorial for tablet and post event screening data entry can be found here:

- [Opening Eyes data entry resources for US based programs](#)
- For non US programs please contact Bjoern Koehler at bkoehler@specialolympics.org

You must report your data to the OE team or through Hyperoffice (see tutorial on page 30) after you have finished your event. This report is required as part of your grant application. You will be required to report the number or athletes seen, number of prescription eyeglasses, number of prescription sport goggles, number of plano sport goggles, number of sun glasses, number of professional volunteers, number of student volunteers, number of Lions/Leo volunteers, number of non-professional volunteers, number of athletes needing a referral. We recommend that you have a volunteer take this data during your event.

Forms & Equipment

Screening Forms / Test Protocols

The [Opening Eyes screening form](#) and test protocols were developed and written by Dr. Sandra Block of the Illinois College of Optometry. These will be the only screening forms that can be used at SOLCIOE events. You will need to distribute copies of the test protocols to each volunteer. Non-English speaking programs should arrange to translate all appropriate forms and letters into their native languages. The forms are updated from time to time. For the most recent version of the screening forms are available on our [SOLCIOE website](#) or [Special Olympics resource page](#).

Informed Consent Forms

All SO athletes sign [informed consent forms](#) before being allowed to compete in Special Olympics Games. Recently local SO Programs have included wording in the local SO informed consent form which would allow the athletes to participate in Healthy Athletes Initiative Screening such as the SOLCIOE vision screening as part of the regular SO activities. All SO Programs will be asked to include this wording for your events. Please check with your SO Program Director to make sure this has been done.

Some states /countries may have specific requirements for what constitutes a vision screening. For example: Some state laws consider a screening to be a complete exam if a refraction is included. In this example since it is now a full exam the law stipulates that dilation is required. It is imperative that you check ahead of time to identify if your state or country has any restrictions on screenings or requires the parent or legal guardian to sign a disclaimer recognizing that the SOLCIOE screening is not a complete exam. It is strongly suggested that if your state or country requires such disclaimers a statement should be drafted by the state, local or country association's lawyer. These disclaimers should be included in the registration materials that your local Special Olympics Program mails to parents and guardians prior to the Games.

Other forms

Most of the forms can be downloaded through the [SOLCIOE website](#) or [Special Olympics resource page](#) otherwise please contact Bjoern Koehler at bkoehler@specialolympics.org

- Athlete Summary Report Card (front and back page: see appendix) - remember to put your own name in on the report card as the local contact.
- Congratulations on your new glasses
- Hold Harmless Agreement
- Screening Protocols
- Hold Harmless Agreement
- Essilor lab forms (to order lenses/glasses through an Essilor lab assign to your event)
- Essilor lens kit forms for events where onsite edging service is offered

Clinical Supplies

Please refer to the equipment lists in the appendix. There are 5 types of lists. Screening Equipment, Dispensing Equipment, Eye Health Equipment, Basic Supplies and Misc. Equipment. The local SO coordinator will be receiving an additional list called the On Site List (appendix)

Equipment

In most cases, the local Special Olympics organization will provide tables, chairs, electricity and tents for you, but in some cases you may need to pay to rent them. As Local SOLCIOE Clinical Director you must work with your local SO contact to rent or get free use of these items (See onsite list in appendix).

We are able to provide every program with regular frames, sunglasses, sport goggles, stereo tests, color tests, near and distance Lea Charts, pins, program and sponsor banners as well as cases for the glasses. Other equipment such as portable slit lamps, tonometers and auto-refractors may be available for loan. For US programs we are able to also provide branded volunteer working attire (t-shirts), phoropter stands and an onsite lens edging service that allows you to edge and mount lenses right at the event. It is recommended that you arrange locally for as much loaned equipment as possible. In some cases you may want to purchase smaller re-useable equipment such as occluders, pd rulers, dispensing tools etc.

Most Non-US programs must find local sponsors. If you are unable to locally arrange for equipment you must contact Sally Stein at least 12 weeks before your event to insure equipment availability. It is your responsibility as Local SOLCIOE Clinical Director to arrange for delivery and pick up of equipment from local sources. If you have difficulty please contact Sally Stein immediately.

Important time lines for ordering supplies, equipment and edging services:

For US programs: submit the PNF (program needs form) at **least 60 days** before the event. If you need onsite edging service please submit request in February of the respective calendar year.

For Non US programs: submit the PNF (program needs form) at **least 90 days** before the event

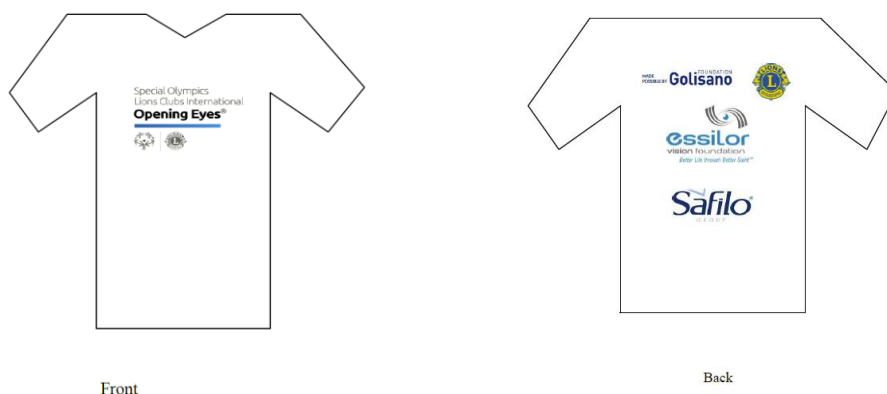
Branding: Logos, Business Cards, Volunteer attire, Banners

Each SO Program will receive the official SOLCIOE Logos. You will need to contact your SO Director in order to get the logo. **Letterhead and business cards may be used only with the permission of your local SO Program.** You may use the title of Clinical Director as follows:

Your Name, Clinical Director SOLCIOE Program

Special Olympics Your state or country program

You should also work with your local Special Olympics Program to order T-shirts. If you are receiving funds from the Lions Grant then your T-shirts must have the official SOLCIOE Logo. We require that the SOLCIOE Logo be on the front of the T- shirt and should be the only logo in the field. The Golisano, Lions, Essilor and Safilo logo will go on the back of the shirt. If you have other sponsor logos you should put them on the back or on the sleeves of the shirt. In order to minimize costs you can also use the logos in single color (e.g. white logos on dark t-shirt). For Logos please contact Bjoern Koehler at bkoehler@specialolympics.org



A SOLCIOE banner will be provided. Global Sponsor Banners will also be provided by Essilor and Safilo. Screening site banners will be given to every SO program. If your local SO program has not received these banners make sure to request one on your online PNF (see page 25).

Name Badges/Sashes

We recommend that the optometrists/eyecare practitioners name badges all be one color, student badges be another color, and non-optometric/professional volunteer badges a third color. Using different colors like this will make it easy to select the right people/skills if you need to shift volunteers around. We also suggest that you get some stickers (like gold stars, etc.) to identify volunteers who speak different languages or who are designated monitors. You can also use different color sashes or hats to identify designator monitors or coordinators.

Meals

At most Special Olympics events, a meal is provided for the volunteers. Arrangements should be handled through the local Special Olympics coordinator. If no meal is being provided for the volunteers, you should arrange to bring lunch in for your volunteers. This can be sandwiches, sodas, chips, etc. from a local deli or market.

If the weather is expected to be hot on the day of your event, make sure you can provide adequate cold water throughout the day. Find out if the local SO Program will provide water for you. If not bring cups, coolers with ice, and small individual bottles of water or rent portable water coolers (that use ice instead of electricity) to keep water cold.

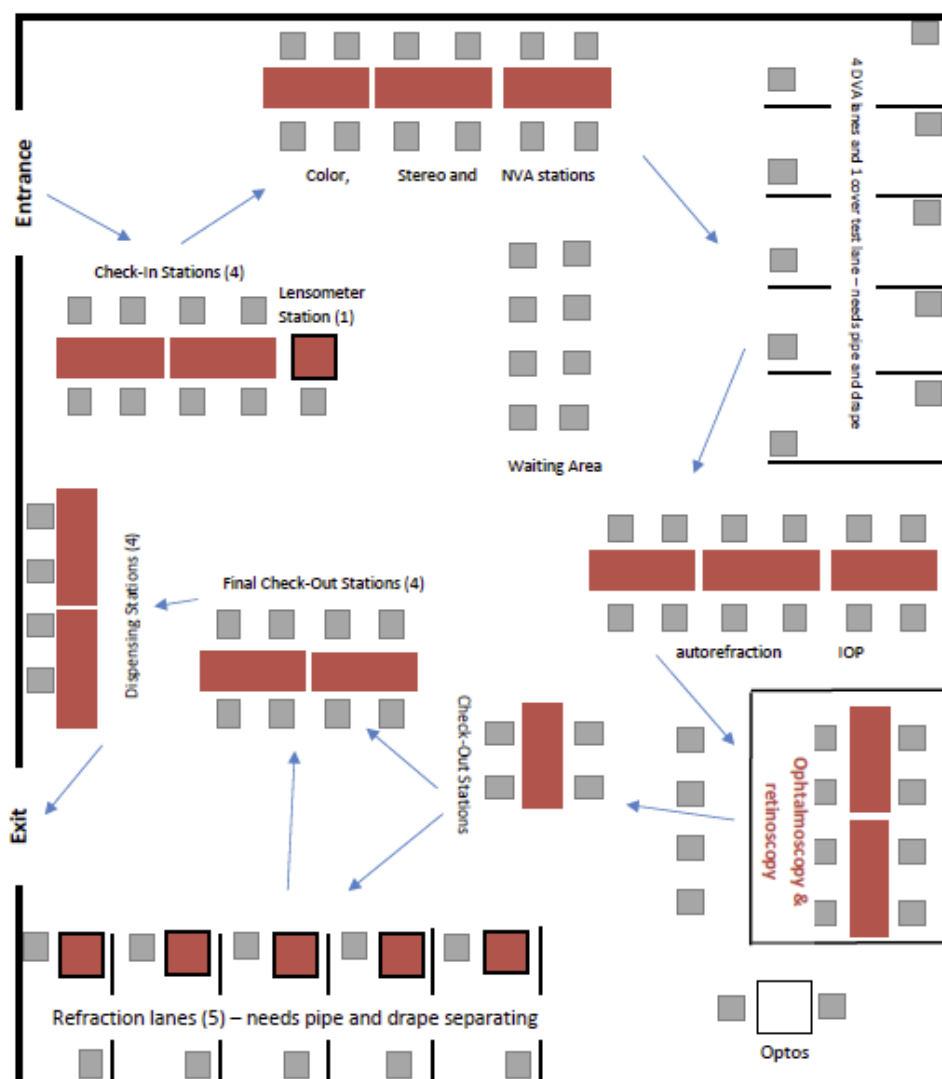
Screening Overview

Setting Up Your Site

The tent, tables and chairs should have been delivered to your site when you go to set up on the day of your event. Arrange the set-up time with the local Special Olympics coordinator based on when the site will be available to you, and when your event is scheduled to start. Allow at least 3-4 hours for set up with 4 or more people to help.

One of the most frequently used designs is to arrange the stations so that the flow is in a clockwise direction. This way, the electrical outlets can be put around the perimeter and the athletes can be directed in a continuous circle. (See sample Site Layout below).

Sample Opening Eyes screening site layout inclusive athlete flow
(example for 3 screening days, 1000 screenings)



If your screening is to be conducted indoors make sure that you have seen the site on a previous visit so that you can control the lighting in different areas. The ideal indoor set up is to have two adjoining rooms one for the tests that need brighter illumination (such as color vision, stereo, cover test, near acuity, tonometry and check out). The other room would be for tests requiring darker illumination (such as pupils, external, ophthalmoscopy and retinoscopy). You will still need to arrange the electrical outlets and partitions to suit your needs.

Registration (should be set up outside of the tent or room), where the athletes will check in and complete whatever paperwork is necessary (see the REGISTRATION section of this booklet for more details). Set up at least two tables with 3 chairs on each side of the table for registration. This should be on the side of the tent that the athletes will most likely walk by on their way to and from other venues.

SOLCIE signage should be on this side of the tent, so the athletes/coaches can read what is going on at this site. We recommend covering all the tables with tablecloths (or plastic) which makes the site neater and easier to keep clean. We have found that a marker system is helpful to direct the athletes from one station to the next.

Numbered and/or different colored signs standing tall on the tables (so they can be seen above the heads of people sitting there) or hung from the tent over the tables will probably work best. Then, the athletes can be instructed to move “to the blue sign” or to “the area marked #1”. This is an easy way to make it clear to an athlete where he/she should go next, and to avoid the congestion caused by athletes wandering around, not sure where they are supposed to be.

Registration Area/Check in

You will need a brief pre-event meeting with your registration volunteers so they understand the proper method of filling out the registration form. The athletes come to the registration table first. Your volunteers will fill out the top of the form. The registration volunteers must also get a brief case history. You'll need a supply of pens and clipboards to use if they have to go around to the front of their table to take information from an athlete in a wheelchair.

For complete information on informed consent and assent please refer to the “Guidelines for a Standardized Vision Evaluation” booklet.

PLEASE NOTE: Many times coaches, delegates, parents and other volunteers will ask to go through the screening. Our policy is that only athletes and Unified Partners (people without ID playing together with athletes) may participate in the vision programs but only athletes will receive refractions and any glasses (including sun glasses)

Vision Screening Area

For complete description of screening tests see “Guidelines for a Standardized Vision Evaluation manual”. These Tests were determined to be essential to the screening and cannot be eliminated.

TEST	# of Stations	#testers/recorders
Case History/check in	4	4 or more
Lensometry	1	1
Visual Acuity Distance	3-4	3-4*/3-4 recorders
Cover Test	2	2*/2 recorders
Stereopsis	3	3
Visual Acuity Near	2-3	2-3
Color Vision	2	2*
Ophthalmoscopy, pupils	2-3	2-3*
Slit lamp	2	2*
Tonometer	2	2*/2 recorders
Autorefractometer	2	2*/2 recorders
Retinoscopy/Refraction	4	4* recorders
Dispensing	2	2-4
(intermediate) Check out	1	1-2*
Screening Monitor**	1-2	1-2*

* Optometrists/eyecare practitioners
 ** This optometrist/eyecare practitioner is responsible for monitoring the screening stations and for quality control

Refraction & Rx Monitor

This station should be in close proximity to the refracting area. The eye care professionals at this area are responsible for:

- Making sure the athletes have completed all the stations and that the top part of the form is complete too.
- Reviewing the results of the screening tests,
- Deciding which athletes to refer for a refraction
- Reviewing all the data after the refraction to determine a final Rx.

The person doing check out must review the incoming data especially distance and near acuity. If there is a discrepancy (e.g. myopic refraction but 20/20 unaided acuity) the athlete should be returned to that screening station and be re-tested. For complete information on Check Out please refer to the “Guidelines for a Standardized Vision Evaluation” booklet.

Those athletes who have not passed the screening and need a refraction will be asked to sit in a designated waiting area until there is an open refracting lane.

We have found that many times other people who are not waiting for a refraction will sit in these waiting areas. Therefore, we recommend using a “post-it” or other “ticket” indicating that the athlete is waiting for a refraction.

An athlete who passes the screening with his/her current Rx may be allowed to get a replacement pair of glasses if the current pair of glasses is in poor condition. The checkout person may also determine if that athlete needs safety sport goggles (based on the Rx and the risk factor of the sport). An athlete may receive either plano or prescription sport goggles even if they do not require new corrective lenses or a new prescription (the current Rx can be used if the athlete passes the screening). The athlete would then be directed to the dispensing area.

For those who have successfully completed the screening, the optometrist/eye care practitioner will complete the bottom of the screening form and then will send the athlete to the checkout table for the athlete to receive the check out gift, referral list and a copy of the vision report card. Each exiting athlete should get a copy of the athlete's report card and, if additional care is needed, a referral list of participating eye care providers. The completed forms should be placed in folders and the HAS forms should be reviewed for completeness.

Often athletes must leave before completing the screening and return later. Their screening sheets should be kept at the Registration/Check out table and placed in a folder marked "Incomplete".

Checkout

When the athlete has completed his/her screening they should go to the checkout station. The optometrist/eye care practitioner at the checkout station should do a final review of the athlete's screening form especially if any pathology or suspected pathology was noted. If a referral for follow-up care is needed a list of willing providers should be given to the athlete/coach/parent. If there is a "gift" for the athlete that will be given along with the athlete's vision report card.

This is a good checklist to print out:

Checklist for Checkout Station

- Check for name, sex, date of birth and HAS NUMBER (if any) on the top of the screening form
- Make sure you have the athlete's city/state or country listed
- Check for completeness of the form:
 - o Make sure all stations are complete
 - o Check all boxes: (Please do this so that _____ doesn't have to finish them all! THANKS!!!)
- Review history before sending to refraction

Refraction:

Give athlete a "Refraction" slip

If it is not completely and immediately obvious why you are sending the athlete back to refraction, write a note on the slip. (ex: Check +/-0.50 over Rx, needs bifocal, etc.)

Recommendations:

Fill out this section of the form completely. **(Please check all the boxes! Thanks! Note that a college age intern will be inputting the data into the computer, so data needs to be clear.)**

Prescriptions:

Dr. _____ will write all prescriptions for athletes coming out of refraction.

If athlete does not need a new prescription, but needs a new pair of glasses or pair of sports goggles, write the prescription in the appropriate place under recommendations.

Don't forget that we have **plano sport goggles** and can make prescription **sport goggles**!

Make a copy of the dispensing form. Complete the form for each pair of glasses the athlete will receive.

Send the athlete with the **dispensing form and a "Dispensing" slip** to the dispensing table.

KEEP THE ORIGINAL FORM

If a phone call should be made to make sure the athlete receives needed follow up services (very high pressure, cataract evaluation needed, etc.), please put the form in the folder marked "Follow up."

Fill out the **Vision Report Card** and give it to the athlete.

Give the athlete a pin.

Give the athlete a "**Sunglasses**" slip if they will not be getting prescription glasses. (The athlete will not be able to get a pair of sunglasses without the slip. Sunglasses are NOT for coaches, family members, etc.)

Criteria for safety goggles:

Safety goggles should be dispensed to any amblyopic or monocular athlete and to any athlete who competes in a contact or high risk sport such as soccer, basketball, baseball. If the athlete currently wears regular glasses and/or if she/he participate in a contact sport (such as basketball, soccer, baseball) or any other sport in which eye injuries are likely (roller skating, ice skating, etc.) they should also be fitted for a pair of safety goggles. Athletes with high minus or plus Rx's may also need protective or swim goggles. Those in non-contact or low risk sports (track, baseball throw, etc.) may or may not get safety goggles.

Congratulations on your new glasses- this form should be given to the athlete so they understand how and when to use their new glasses.

Referral and Follow-up

An important part of Special Olympics Opening Eyes, is a referral list of local facilities/offices where patients with special needs can go for continued vision care. This list can include your volunteer doctors and the offices/institutions with which they are affiliated as well as surgical/medical personnel willing to see persons with ID. (Make sure you have contacted these referral sources prior to including them on your list.) Copies of this list should be given to each athlete.

The Referral list should also be explained to those athletes needing referrals for specific conditions such as strabismus, cataracts, dilated exams etc. Many athletes may already have their own eye care physicians (we are giving our list out as an alternative especially to those who do not have their own eye care provider).

Refraction Area

At all SOLCIOE screenings there must be at least two refracting lanes. One or two optometrists/eye care practitioners licensed in the Host State must be on hand to sign any Rx's written. Since we are using the Lea Charts for both incoming visual acuity and refraction proper lighting needs to be considered. If retinoscopy is done at the refracting lane than a light source will be needed to illuminate the Lea chart. There should also be near point Lea Charts at refraction for those presbyopic athletes or those needing a near point correction. After the refraction, the final Rx must be reviewed and approved by an optometrist/eye care practitioner at the check out Station. If a new Rx is to be prescribed the athlete is then taken to the dispensing area to select a new frame and/or safety goggles.

Dispensing and Fabrication

All SOLCIOE programs must provide glasses and/or safety sport goggles for the athletes. The dispensing station should be the last station. Set up at least 2 tables with 4 chairs on the outside where the athletes can sit. Display frame models of different sizes and colors where both the dispenser and the athlete can view them. The Dispensing volunteers must fill out the dispensing form –we recommend using the sample and printing it as 3 part no-carbon required see appendix (or use a dispensing form provided by your lab). **MAKE SURE ALL THE ATHLETE INFORMATION IS FILLED IN SUCH AS NAME, ADDRESS, CITY, STATE , COUNTRY, PD AND RX.**

- If glasses are to be sent to an outside lab and then sent to the athlete after the screening make sure that the form has the athlete's, coach's, or the guardian's complete name, address and phone number (see sample).
- If an edger is available on site and the glasses can be made that day write down what time the athlete should return to pick up the glasses.
- When the athlete picks up his/her glasses he/she should be given the Rx explanation sheet -explaining when and how to use the glasses e.g. for full time use, for reading, not for sports etc. (*see sample*)

Lens Kit Replacement form

New lens kits are for programs that using first time onsite edging. For those programs receiving an Essilor Stock Lens Kit a Lens Replacement form will be provided to you. You must fill out how many lenses are taken from the kit and mark it on the Lens Kit Replacement Form. The form needs to be send to the email address after your event. Replacement lenses will be sent to you. Make sure that the replacements are ordered following your event. Do not wait to replace until next years event. You will be keeping the Kit for use at your next event. We strongly recommend that you assign a volunteer at the Dispensing Station to fill out the Form as lenses are taken from the kit. Experience has shown us to be the most efficient way. Both lens kits forms can be found at the [SOLCIE website](#) under public documents and in the appendix.

Lens ordering system

US programs using [Essilor Vision Foundation's online charity ordering system "Changing Life through lenses"](#) be referred to page 32 to find the Tutorial.

Changing Life through Lenses™ allows eye doctors and charities to create an online account for no-cost prescription eyeglasses and access to resources on charitable engagement. Essilor Vision Foundation works with schools, nonprofits, charitable doctors and communities to provide vision exams and glasses to underserved individuals. Without charitable doctors and advocates for vision, millions of children across the United States would be unable to see the world clearly.

Non US programs will be provided with an Essilor lab form (also available on the [SOLCIE website](#)). The form is to be completed and send together with the selected frame or goggle to an Essilor lab which will be assigned to each of your events. The national/state program, together with the Clinical Director and the Essilor lab, is responsible for distributing the finished glasses to the athletes.

Closing Down

Allow at least 2-3 hours to completely close down. At the end of the screening, you should try to leave everything at your site, as much as possible, the way that you found it. That generally means tables and chairs folded and stacked, and everything (except garbage) that you brought in taken out. Make sure the garbage is in containers, and the containers in locations that are acceptable to the local SO Organizers.

Assign one or two people to be in charge of returning all equipment, banners, forms etc. Pick-up times of large equipment need to be verified and there should be security at the site until all equipment is returned.

Prior the event, discuss with your SO Program if they will be entering the HAS data or your team will. The HAS forms can also be shipped to Dr. Sandra Block.

Shipping

If you are returning loaned equipment back to SOLCIOE it is imperative that equipment is returned in the correctly marked box and is ready for pick up the next following business day following your event. A UPS driver with shipping labels will arrive at the location listed on the shipping portion of your PNF you have completed when ordering the supplies before the event. If the location needs to be changed a 48 hour notice to Sally Stein is required.

Budget

Import and Customs

If your program is going to receive frames/lenses/equipment/etc. from outside your country you must prepare your grant budget to include those costs.

Importing Equipment:

1. Get a list of all items that will be sent to you and the value and weight of each item. Find out what kind of documentation must accompany the shipments and find out who must prepare / approve those documents (e.g. your country's consulate)
2. The carrier (UPS, DHL, AIRBORNE) may ask you for VAT numbers, clearance codes, purpose of the import/export etc.
3. The purpose is non-sales donations to Special Olympics athletes participating in Special Olympics Games (give place and date). You must get a written statement from your SO program regarding its purpose, tax status, and its agreement to be the temporary importer of record. Find out if your SO chapter has a customs broker.
4. provide TAX ID number or charity number if applicable if required by customs clearance
5. When the equipment arrives in your country it will most likely to be inspected, X-Ray-ed and opened. (Make sure you check the itemized list and that everything is still there when you pick up your packages).
6. Be prompt receiving items from custom to avoid unnecessary custom issues.
8. There are maybe taxes that have to be paid until the item are shipped back to the original country.
9. Find out what is the procedure for shipping items back to their original country once you are done with them. There is usually a short time (a day-a week) before which you must ship the items back otherwise you may be charged the import taxes on them! So you must ship the items back right away. You must make sure that the equipment is correctly packed in its case and that all the pieces are included (batteries, cords, fuses etc). Please notify Sally Stein immediately if anything is broken or missing. The equipment should be double boxed with appropriate packing materials. If the original box is broken or unusable please replace it (this is reimbursable expense on your budget).
10. If you are sending the items to another country for their games, check with your carrier for the paperwork that will be needed.

Applicant Responsibilities

The Program applicant will:

1. Submit grant application to SOI 60 days prior to the screening event (SO program responsibility).
2. Commit to providing local Lions Clubs volunteers opportunities at your Opening Eyes event.
3. Commit to working with the trained Clinical Director in organizing a successful vision care screening consistent with the Opening Eyes standards that will be sustainable.
4. Submit accounts of disbursed funds to SOI within 30 days following the Opening Eyes event.
5. Maintain receipts and other documentation to substantiate claims and expenditures.
6. Submit the provided Standardized Data Collection Form and Evaluation of Events Summary following the Opening Eyes screening to SOI within 45 days of the event.
7. Acknowledge the Special Olympics, Inc. - Lions Clubs International Opening Eyes program partnership in all relevant public documents, press materials, opening ceremonies and public statements.

The following items are suggestions recommended by SOI as *BEST PRACTICES* to ensure a successful Opening Eyes event:

- Participation of Clinical Directors in coaches/delegate meetings,
- Allowing for scheduling athletes for participation in the screening whenever possible,
- Making the Opening Eyes Screening available to non-competing SO Athletes
- Including Clinical Directors in the planning and promotion of the Opening Eyes Screening

Budget Preparation

Your first step is to meet with your Local SO Executive Director and discuss what support (In kind and/or money) they will be able to give you. You will need to discuss your specific site needs with your Local SO Director and explain the program if he or she is not familiar with it.

You will need to estimate what costs you might incur for your particular SOLCIE event.

Hotel

- Accommodations should only be for those volunteers traveling more than 90 minutes from screening site. Double occupancy for optometrists/eye care practitioners and quadruple occupancy for students.
- Contact local hotels for rates. Ask for discount for Special Olympics.
- Determine if meals are provided or if you need to plan for meals
- Plan if you need a room for Volunteer training prior the event - get price for meeting room and services (projector, mic, etc).

Meals

- Will your SO program provide any meals
- Reception

T shirts

- Contact Local SO Program-will they provide T-shirts?
- Contact T-shirt vendor- get prices for printing logos.
- For US programs only: provide number of T-shirts you need in the PNF form

Equipment (shipping, customs, taxes etc.)

- Get an estimation of the shipping costs to and from your event.
- Get an estimation of the import taxes due (based on the value of the items). Ask if there are any preparation fees that you must pay to fill out the paperwork.
- Get an estimation of the cost to insure the items when you ship them (all equipment must be insured).
- Estimate the costs of re-packing the items.

Bank costs

- All Grant monies will be wire -transferred to your Local SO Program's bank account- they will need to check to see if there are any fees for this and if there are any fees for currency exchange.

Administrative costs

- The Grant will not pay for administrative costs such as computers, secretarial costs, rent etc.
- Ask for Local SO Program what administrative assistance they can provide for mailings, publicity, telephone, meetings, etc.

Disposable/Reusable Equipment

- See Equipment list and estimate costs of needed items

Printing

- Ask if your local SO Program can provide any assistance with this. If not estimate the costs of printing screening protocols and any other printed materials needed.

Travel

- Some travel expenses for the Clinical Director may be covered (travel expenses will need to be pre-approved)

Preparing the Program Needs Form (PNF)

Please contact Sally Stein at Sstein@specialolympics.org to receive instructions on how to order supplies through the PNF online form.

What's a PNF:

- The PNF form is used to identify what supplies are needed for an event, fulfill supplies and to track events on a master schedule.
- Even if you don't need supplies we ask you to complete a PNF with the date and location of your event so we can report on your activity as well.

Creating and adding a new PNF:

There are two ways to create a new PNF.

- A. Sally Stein creates a new PNF for a CD provided she has all the event information available. The CD will get an instruction email on how to edit or complete a PNF form in Hyperoffice.
- B. A new PNF can be added by the CD or SO Program in HyperOffice.

A)

- When we get event information (date, location, athlete number etc) from you, your program or from SOI we will create a new PNF (preferably at the beginning of the calendar year).
- We will fill in all the known event information however we look for the CD or RHAM to complete the rest of the PNF (Dates, Location, # Athletes etc.)
- You will be notified by email by Sally to "Complete your PNF" in time:



Subject: Complete your PNF

ID: 6190

Dear *Clinical Director*

Put this URL in your browser: solcioe.hyperoffice.com

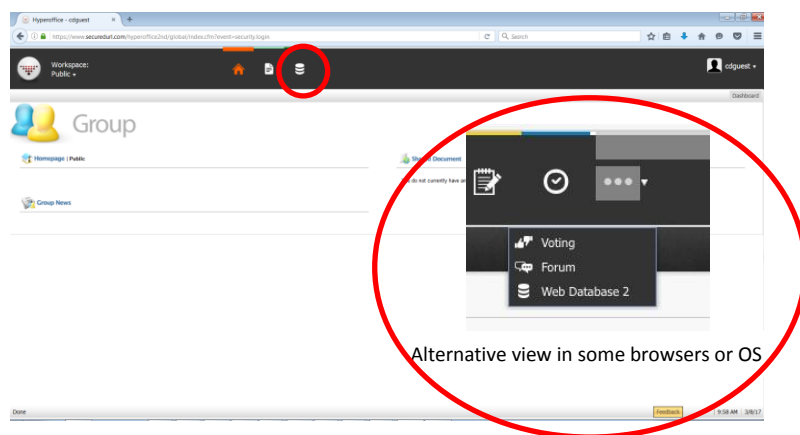
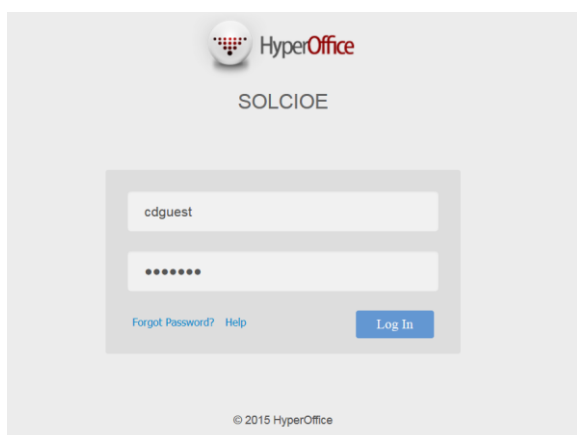
Your login name is **cdguest** and your password is **cdguest**.

Look on the top bar and click on the three dots.  Go to the Database icon  and then click on Program Needs Search and Add New Event View
Search for the ID number listed on this email ID: **6190**

Use the EDIT button to add in your supply requests and then hit SUBMIT when finished

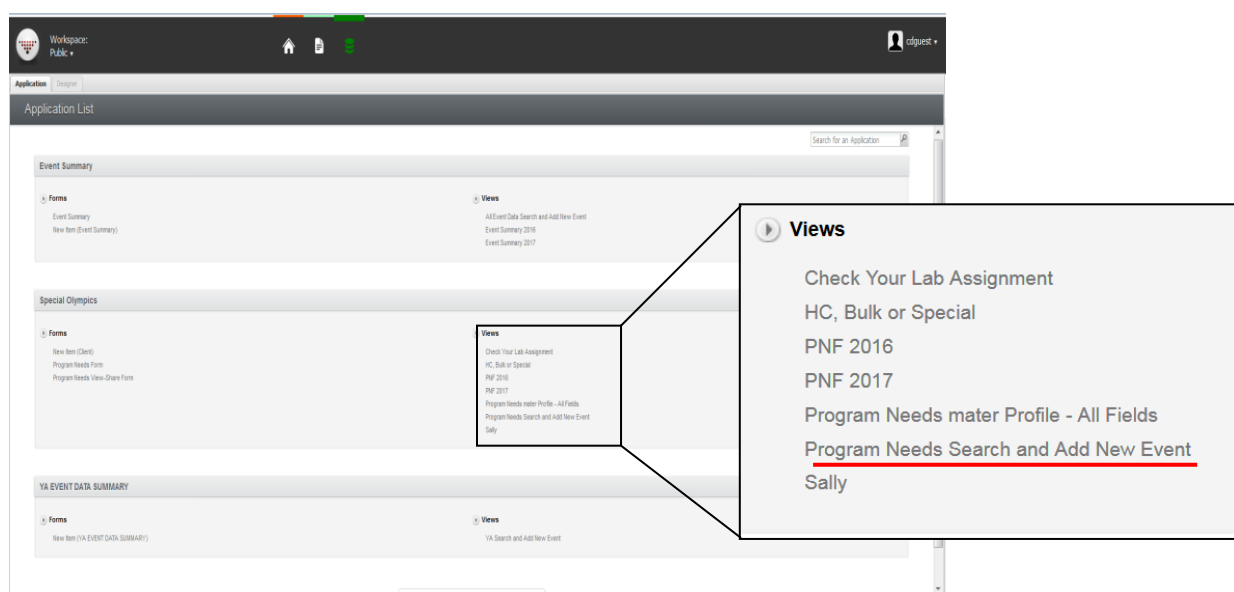
Send me an email letting me know that you have completed your PNF -sstein@specialolympics.org

Once you have launched solcioe.hyperoffice.com please follow the following steps to complete the PNF:

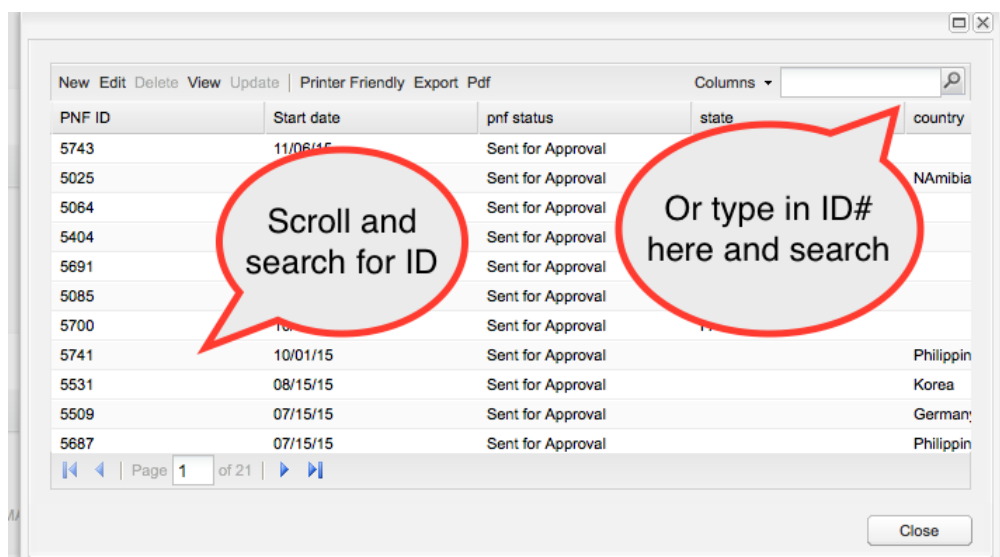


1. Enter your login credentials

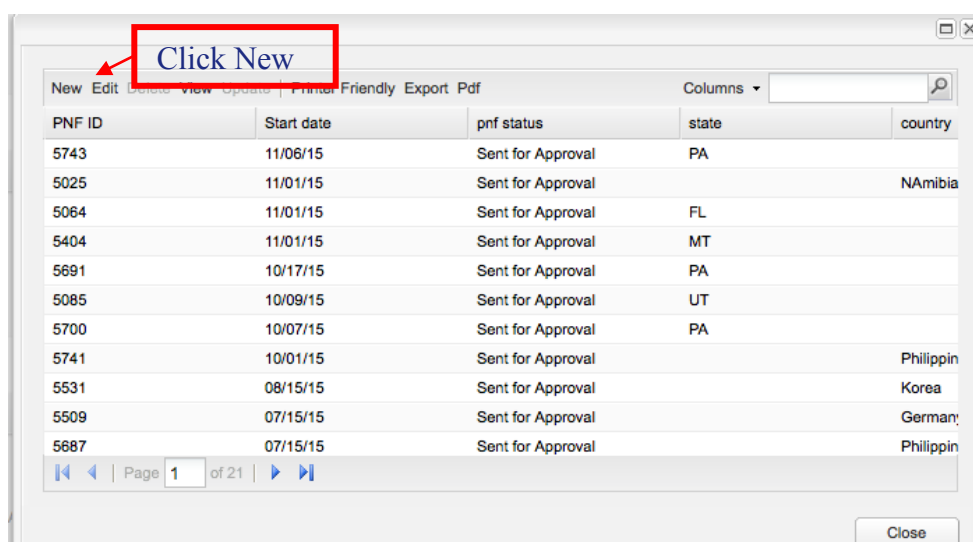
2. Entering the application by clicking on the three discs or dots and then discs (different with different browsers)



3. "Click on program needs search and add new event"



- your event is prepopulated in HyperOffice: Search for and Select your PNF ID# which was provided in the "complete your PNF" email



- Add a new PNF if your event is not prepopulated

There are three parts in the PNF to complete

Starting Date:	<input type="text"/>
Event type:	<input type="text"/>
How many days of screening:	<input type="text"/>
OE Director:	<input type="text"/>
CO-Director:	<input type="text"/>
City:	<input type="text"/>
State / Province:	<input type="text"/>
Country:	<input type="text"/>
REGION:	<input type="text"/>

5. If not prepopulated complete the event information

SHIPPING & CUSTOMS INFORMATION- PLEASE COMPLETE ALL SECTIONS

Shipping Attention To (NAME):	<input type="text"/>
Street Address:	<input type="text"/>
City:	<input type="text"/>
State or Province:	<input type="text"/>
Country:	<input type="text"/>
Zip or Postal Code:	<input type="text"/>
Shipping Address Phone:	<input type="text"/>
Emergency Contact Mobile #:	<input type="text"/>
Email:	<input type="text"/>
Alternate Email:	<input type="text"/>
<p>NON US Events- please add your Charity Tax ID number And Special Customs Instructions</p>	
Tax ID Number:	<input type="text"/>
Special Customs Shipping Instructions:	<input type="text"/>

6. You must complete the shipping information fully

Frames	
Adult Male:	
Special requests Male	
Frames:	
Frames	
Adult	
Female:	
Special request-female frames:	
Frames	
Children:	
Special requests children frames:	
Men's	
Sunglasses:	
Female	
Sunglasses:	
Plano Sport	
Goggles:	
Rxable Sport	
Goggles:	
Autorefractor:	
Slit Lamp:	
iCare	
Tonometer:	
iCare Probes	
boxes of 100:	
Cases:	
Distance	
Les:	
Stereo:	
Color Vision:	
Near Les:	
Pins:	
SOLC/OE	
Program	
Banner:	
Essilor-SAFILO	
BANNER:	

These items are For US Events only

Phoropter	
Stands:	
Edger Requested	
<input type="checkbox"/> yes	
<input type="checkbox"/>	
T-Shirt XXXL	
:	
T-Shirt XXL:	
T-Shirt XL :	
T-Shirt L:	
T-Shirt M:	
T-Shirt S:	
Essilor Lab	
Forms:	
Essilor Lens	
Kit US	
events only:	

Share Pdf Submit

- Order your supplies and click "submit" at the bottom of the form once you are finished. You'll be notified with shipping information and tracking numbers once the supplies are on the way to you

Pre-post event logistic instructions and event data reporting

Detailed instructions will be sent to you from Sally Stein. The letter will tell you what items are being sent, from whom they are being sent, the tracking number of the items and where they are being sent. To ensure that the items arrive in time for your event fill out the PNF at least two months before your event, (FOR NON-US EVENTS WE WILL NEED THIS INFORMATION AT LEAST 3 MONTHS IN ADVANCE)

You will also be instructed on where to return the items and how to ship and insure them.

When the items arrive inspect them for damage and make sure to charge all batteries.

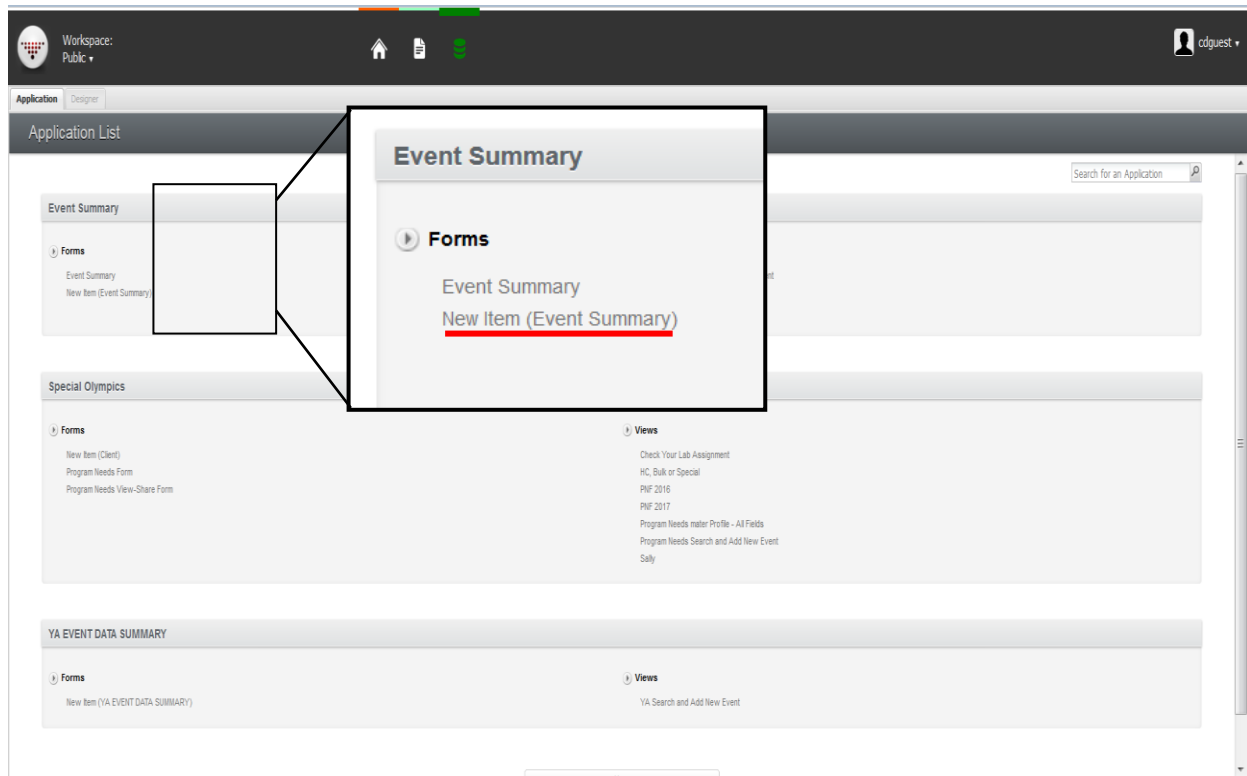
*****IF ANY ITEMS ARRIVE DAMAGED, NOT IN WORKING ORDER, OR MISSING PIECES YOU NEED TO CONTACT Sally Stein IMMEDIATELY*****

In many cases the equipment will be needed for an event only a few days after your event- therefore you must send the equipment on to its next destination as soon as you have finished your event.

Event Data Reporting

Reporting the data after the event is just as important. There is the Event Summary form that every CD must fill out either through the SOLCIOE website (see tutorial below) or through an event summary form sent by your SO Program or regional health manager. This data is used for our end of year report to the LCIF, Essilor and Safilo. Without this data we cannot fulfill the deliverable of our grant and sponsor requirements. Grant renewal is based on this data. The Event Summary Sheet should be filled out the day of the event when all details are fresh in one's mind and when all forms are available for calculation.

The fields that need to be reported are how many volunteers and what kind: professional, optician/technicians, student, Lions, others. How many athletes were seen, how many needed regular glasses, how many needed protective eyewear, how many needed referrals. See following tutorial on how to enter your Event Summary data online.



1. After login to the SOLCIOE website and after clicking the three discs open an new event summary form

The screenshot shows the 'Event Summary' form. It contains numerous input fields organized into sections. The left column includes fields for 'SO Program', 'Clinical Director', 'Event Start Date', 'Event End Date', 'Event Location', 'Region', '# of Athletes', 'Sunglasses', '# Unified Partners', '# Eyeglasses', '# Sport Goggles (with Ray)', 'Piano Sport Goggles', 'Athletes Referred', '# Optometrists', '# Ophthalmologists', '# Optometry students', '# Residents', '# opticians', '# optical technicians', 'Lions and less', and 'non eyecare volunteers'. The right column has a large empty space. At the bottom right, there are 'Share', 'Print', and 'Submit' buttons. A callout box points to the 'Submit' button.

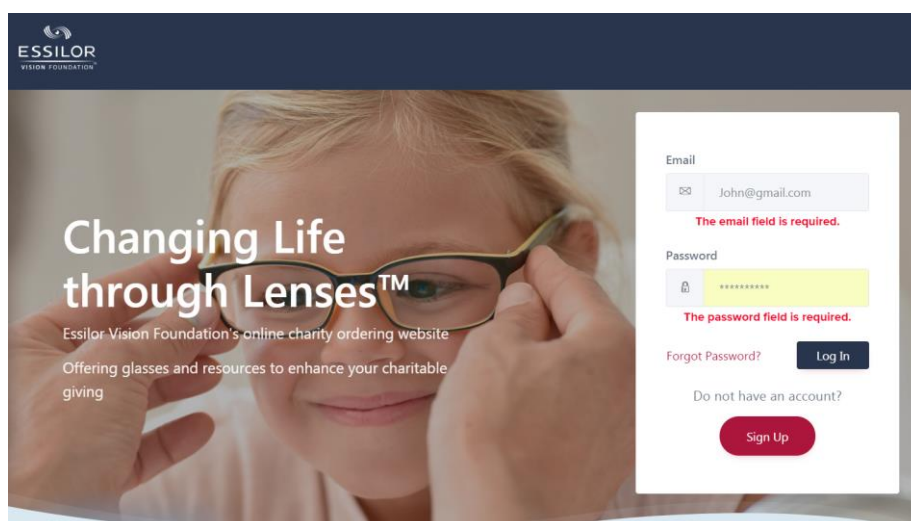
2. Complete the entire form and click "submit" at the right bottom corner of the form

Order your lenses: The Essilor Vision Foundation's lens ordering system (US programs only)

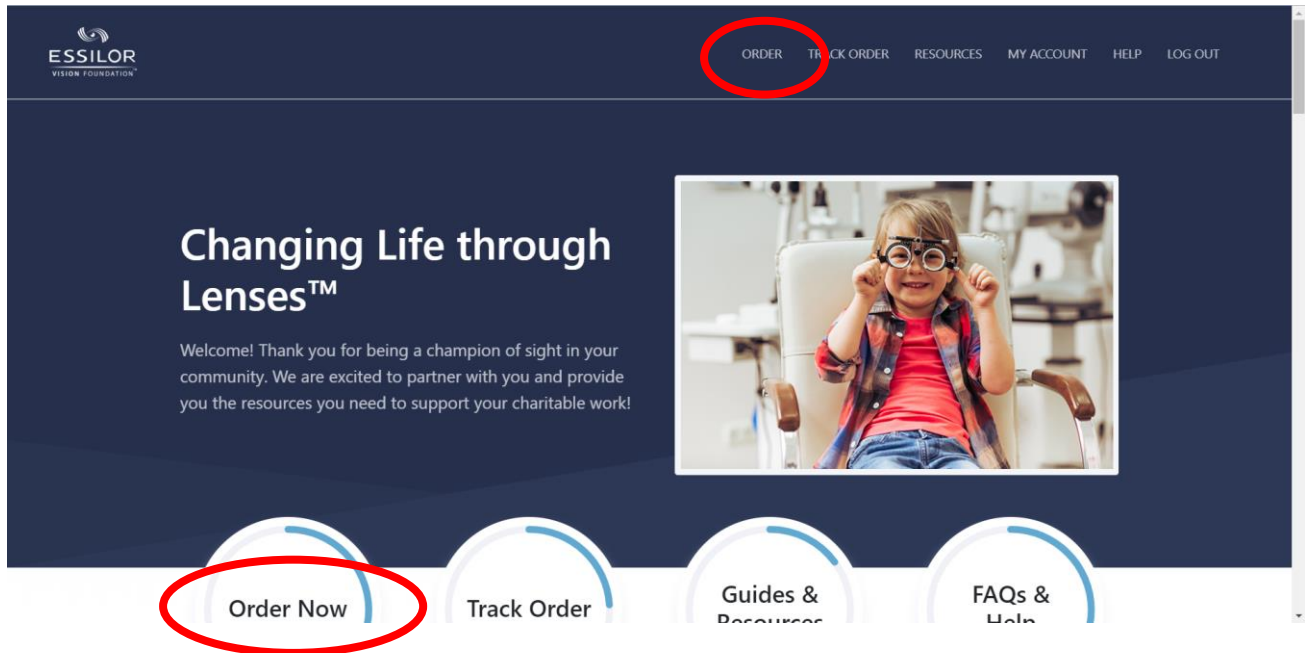
Changing Life through Lenses™ allows eye doctors and charities to create an online account for no-cost prescription eyeglasses and access to resources on charitable engagement. Essilor Vision Foundation works with schools, nonprofits, charitable doctors and communities to provide vision exams and glasses to underserved individuals. Without charitable doctors and advocates for vision, millions of children across the United States would be unable to see the world clearly. **In order to use the system at your event you need laptops, stable internet connection and printers**

Essilor lens ordering system

US programs using [Essilor Vision Foundation's online charity ordering system "Changing Life through lenses"](https://changinglifethroughlenses.org/referral/openingeyes) (<https://changinglifethroughlenses.org/referral/openingeyes>)



- Create an account by signing up with your email and a password
- Once you click "Sign Up" you'll be asked to select an Account Type – please select **"Non-Profit"**
- The first question on the registration form is whether you are considered a covered entity, Opening Eyes programs are not considered covered entities so please enter **"no"**
- On the second question, select **"Non-Profit places orders for glasses"**
- For "Legal Organization Name" please enter **"Opening Eyes – City/State of your local chapter"** (e.g. Opening Eyes – Dallas, TX)
- For Organization Type, select **"Local Chapter"**
- **Do not check** the "Multi-Location Organization" checkbox!
- In the address field, **enter the address that you would like your orders to be shipped** to when completed.



1. Getting started: place your order

General Information

Prescribing Doctor*

Jim Halpert, OD

If your doctor is not listed, click this to add them. You can choose to save the doctor for future orders or only use one time for this order.

Patient First Name*

Clark

For Opening Eyes orders, this field is not necessary. You can always select "Not Applicable"

Patient Last Name*

Kent

One way to help identify athletes may be to include a prefix before the last name. For instance, you may enter "DAL-Kent" to indicate that this athlete is from Dallas

Referral Organization*

If this patient was referred, please select the primary referral organization. If there was no referral organization involved, please select "Not Applicable".

Not Applicable

By selecting or indicating a Referral Organization for this order, you hereby consent to the disclosure to such Referral Organization of the prescribing doctor's information including, without limitation, to name and number of orders placed and warrant that you are authorized to provide such consent.

2. Enter general information

Patient Demographic

Please enter as much of the following information as possible.

Patient DOB **Age***

MM/DD/YYYY

Patient Gender **Patient Ethnicity**

First Time Glasses Wearer **First Time Eye Exam**

☐ Yes ☐ No ☐ Unsure ☐ Yes ☐ No ☐ Unsure

Age is the only required field in this section. If you only have the date of birth you can enter it in the previous field and the age will be calculated for you.

3. Patient demographic: While most of this information is not required, please provide as much as possible. This information will be used to help Essilor Vision Foundation and its partners improve our programs and serve more families with much needed vision correction.

Order Information

If the lens options do not meet the needs of the patient, please complete as much of the order form as possible and check the box below to include additional information in the section for special requests.

Please select the lens type from the icons below.*

Single Vision **Bifocal**

Sphere* **Cylinder** **Axis** **Addition** **Seg. Height**

Right Eye (RE or OD) **+20.00** **+19.75** **+19.50** **+19.25**

Left Eye (LE or OS) **D*** **Near PD**

RE/OD **LE/OS** **RE/OD** **LE/OS**

Lens Design **Lens Material***

Lens Treatment

☐ The lens options above do not meet the medical needs of this patient. ?

IMPORTANT: Check this checkbox to add prism or request a special lens treatment, material, or power.

4. Place your order: This is one of the most important sections of the order form. Be very careful to accurately copy the doctor's prescription. If you used the Opening Eyes paper order forms the fields should be in the same order. If not, very carefully read the prescription before entering.

Unless otherwise specified on the order form/RX, select Polycarbonate Clear on all orders.

Tip: The RX fields are searchable dropdowns. To speed up the order entry process, type in the prescription (including the plus (+) or minus (-) signs, and hit "Enter" to select, then "Tab" to move to the next field.

Unless otherwise specified on the order form/RX, select Single Vision for Single Vision orders and Flat Top 28 for Bifocals.

Frame Information

Please select the order type from the icons below.*

Frame to Come



Most orders for the Opening Eyes program will be Frame to Come

Uncut



Please enter as much information as possible to assist the lab in correctly identifying the frame.

Manufacturer

i.e. FGX

Brand

i.e. Lantis

Model

i.e. Sidekick, L00015, or Strike/L00132

Frame Type*

Color*

i.e. Tortoise, Red

Eye Size

i.e. 50

Temple Length

i.e. 140

5. Enter frame information.

Additional Information

Shipping Address: ⓘ

Eye See You
Testing Again 234556
DALLAS, TX 75234

Orders will ship to the address on your account by default. You can change the shipping address for an order by checking this box. Or go to the My Account page to change the address on your account.

☐ Use a different shipping address for this order

Patient/Order Notes (not sent to lab)

This information is for your internal use only and will not be shared with the laboratory.

This field can be used for additional patient notes that you may want to document. Please note, this is **not** shared with the lab so this field cannot be used for special instructions on the order.

6. Place an order. Additional information.

Print the order summary. Keep one copy and send the lab copy along with the respective frame to the Essilor lab.

Print Order Summary
Remake/Redo Order
Place New Order

Lab Information

If this is a Frame to Come order, please send your frame along with the lab copy of the order summary to this lab:

Dallas DC Lab
501 E Corporate Dr.
Lewisville, TX 75057
Phone:


Customer and Order Information

Customer Name: Eye See You

Email: cttlbusiness@essilorvisionfoundation.org

Phone: 2222222222

Shipping Address: Eye See You
Testing Again 234556
DALLAS, TX 75234



Patient: Test Please Cancel Test Please Cancel

E-Order #: SP2JEBPM

Lab Job ID: TEST73821

Submitted: 06/15/2018 11:04:24AM

7. Once your order is submitted print out the order summary form and send the frame along with the lab copy of the summary order form to the Essilor lab. Keep the other copy for reference!

All **NON US Programs** will be assigned to an Essilor lab in their country or region. Please order your lenses using the Essilor order form in the Appendix.

Appendix

EQUIPMENT LIST

If necessary SOLCIOE will assist you in arranging for equipment, however, the goal of the Train the Trainer program is to make each state chapter of SOLCIOE self-sufficient. The other categories are the responsibility of the local arrangements committee. Many of the items can be used at subsequent games and should be stored away for that use after the games are completed.

Screening Equipment

1. ☐ _____ Distance Lea Charts for distance VA and refracting lanes _____ *Provided By SOLCIOE*
2. ☐ _____ Polaroid Glasses *Provided By SOLCIOE*
3. ☐ _____ Preschool Stereo-test *Provided By SOLCIOE*
4. ☐ _____ Color Vision Made Easy *Provided By SOLCIOE*
5. ☐ _____ Near Lea Charts *Provided By SOLCIOE*
6. ☐ _____ Non-mydratic Camera & Film(optional)
7. ☐ _____ Auto-refractor / Auto Keratometer
8. ☐ _____ Phoropter, chairs, and stands
9. ☐ _____ Instrument Tables
10. ☐ _____ Slit Lamp
11. ☐ _____ Tonometer
12. ☐ _____ Extra batteries for all equipment
13. ☐ _____ Lensometer
14. ☐ _____ Trial frame /(3) trial lens set
15. ☐ _____ ALL /eyecare practitioner should bring Skiascopy bars
16. ☐ _____ Occluders
17. ☐ _____ ALL eyecare practitioner bring own ophthalmoscopes
18. ☐ _____ ALL eyecare practitioner bring own retinoscopes
19. ☐ _____ Targets - distance & Near (cover test)
20. ☐ _____ Prism bars or loose prisms
21. ☐ _____ Stickers for fixation / tongue depressors
22. ☐ _____ Wells for recharging handles
23. ☐ _____ Laser pointers (optional)
24. ☐ _____ clip on occluders (optional)
25. ☐ _____ occluder glasses (optional)

Dispensing Equipment

26. ☐ _____ Pupillometer/pd ruler
27. ☐ _____ Frame display
28. ☐ _____ Frame warmer
29. ☐ _____ Dispensing tools, screws, etc.
30. ☐ _____ (2)Dispensing Mirrors
31. ☐ _____ Protective eye wear frames *Provided By SOLCIOE*
32. ☐ _____ Frames (all sizes)
33. ☐ _____ Cases/Lens cleaner
34. ☐ _____ Lens blanks limited powers
35. ☐ _____ Frame trays
36. ☐ _____ Edgers or lab
37. ☐ _____ Lab forms for dispensing
38. ☐ _____ Internet connection, 2 laptops and 2 printers for Essilor lens ordering system (US programs only)

Eye/Health Equipment

- 39. ☐ _____ boxes of alcohol pads or Bottled alcohol
- 40. ☐ _____ Emergency Eye Kit - patch, gauze, Saline
- 41. ☐ _____ Irrigating Solutions, antibiotics, fox shields, fluorescein,
- 42. ☐ _____ Topical Anesthetic, FB remover, etc.
- 43. ☐ _____ Surgical Gloves
- 44. ☐ _____ Rx pads
- 45. ☐ _____ Q-tips
- 46. ☐ _____ Waterless disinfectant soap

Basic Supplies

- 47. ☐ _____ Extensions cords various lengths
- 48. ☐ _____ Large garbage bags
- 49. ☐ _____ Facial Tissue
- 50. ☐ _____ Clip Boards
- 51. ☐ _____ Tape measure
- 52. ☐ _____ Post it notes
- 53. ☐ _____ Pens
- 54. ☐ _____ Rubber bands
- 55. ☐ _____ Staplers /staples
- 56. ☐ _____ Power Strips/Bars
- 57. ☐ _____ Duct tape
- 58. ☐ _____ Paper Clips
- 59. ☐ _____ Plastic tablecloths or large roll of plastic
- 60. ☐ _____ Plastic files container with hanging files (legal size)
- 61. ☐ _____ Packing tape
- 62. ☐ _____ Scissors / box cutter
- 63. ☐ _____ Tool Set (screw driver, Phillips screw driver, hammer, pliers, wire cutters & stripper, etc.
- 64. ☐ _____ Portable desk lamps

Misc. Supplies

- 65. ☐ _____ C L Solutions and cases, artificial tears, ocular decongestants
- 66. ☐ _____ HAS forms/Report card (see appendix)
- 67. ☐ _____ SOLCIOE Banner
- 68. ☐ _____ Referral list of participating optometrists/eyecare practitioners
- 69. ☐ _____ Station Labels
- 70. ☐ _____ Give a ways - stickers, pins etc.
- 71. ☐ _____ Electric fans for ventilation (2 or more) or air conditioning
- 72. ☐ _____ Name Tags and holders
- 73. ☐ _____ Screening Protocol sheets
- 74. ☐ _____ Coolers for ice/drinks
- 75. ☐ _____ Hooks or plastic rings for hanging the banner
- 76. ☐ _____ Thank You sign for donators
- 77. ☐ _____ Screening Sign "Services are for athletes only"
- 78. ☐ _____ Paper Towels

ON SITE LIST

Local SOLCIOE Clinical Director: Send this list to your Special Olympics' liaison. You are responsible for following up and making sure these items are arranged.

- ☐ Location in Olympic Village
- ☐ **OUTDOOR LOCATION:** Opaque Tent (we need the inside of the tent to be fairly dark) 40' X 40' square or 50' x 50' **'with sides'** (150 to 230 square meters)
- ☐ **INDOOR LOCATION:** Minimum 1600 square feet minimum (150 square meters) if possible 2 separate but adjoining rooms so that lighting can be controlled.
- ☐ Standing Fans (or air conditioning if possible)
- ☐ Lighting: standing lamps or lamps on clamps
- ☐ Partitions (8 foot or 2.5 meters lengths) for inside the tent: approx. 20 top pieces and 30 upright pieces and bases (minimum)
- ☐ Stakes for securing pipe and drape bases
- ☐ Rope for securing pipe and drape
- ☐ Tables (approx. 1 meter x 2.5 meter)
- ☐ Chairs
- ☐ Electricity and Extension cords and multiple plug outlets
- ☐ Security: from first night until all equipment has been picked up
- ☐ Parking Permits if needed for equipment delivery and pick up
- ☐ Food and water
- ☐ Credentials for volunteers (if any)
- ☐ Volunteer consent forms (if any)
- ☐ laptops, printers and internet connection for HAS data entry and Essilor online lens ordering system

First Name	Last Name	HAS ID _____
-------------------	------------------	---------------------

Date	O Male O Female	DoB	Age (years) O Not sure
Event	Location	O Athlete O Unified partner	Sport
Delegation	SO Program		
Cell phone # (optional)	Number is O Athlete's O Parent's / Guardian's		

History

When was your last eye exam?

- ☐ Less than 1 year
☐ 1-3 years
☐ More than 3 years
☐ Never
☐ Unknown

Do you experience any of the following

- ☐ Difficulty seeing: ☐ Far ☐ Near
☐ Headaches
☐ Sensitivity to light
☐ Double vision: ☐ Far ☐ Near

Special Olympics
Lions Clubs International
Opening Eyes®



Do you wear corrective lenses (glasses or contacts)?

☐ Standard Rx

☐ Full time ☐ Near only ☐ Far only

☐ No ☐ Yes

☐ Sports Rx

☐ Contact lenses

☐ Soft ☐ Hard

Please check what is worn during screening:

☐ Without Glasses ☐ With Glasses ☐ With contact lenses

Current prescription

Right Eye

Left Eye

Sphere	Cylinder	Axis	Add

Visual Acuity

FAR

Right Eye 20 / _____

☐ Unable to test

Left Eye 20 / _____

☐ Unable to test

<input type="radio"/> Lea	<input type="radio"/> Walk up	<input type="radio"/> Light projection/Light perception	<input type="radio"/> Walk up	<input type="radio"/> Light projection/Light perception
		<input type="radio"/> No light perception		<input type="radio"/> No light perception
Other:		Other:		

NEAR

Both Eyes 20 / _____

☐ Unable to test

<input type="radio"/> Lea	<input type="radio"/> Light projection/Light perception	<input type="radio"/> No light perception	Other:
---------------------------	---	---	--------

Cover Test

FAR

☐ Unable to test

☐ orthophoria

☐ PHORIA

range 02-99 _____

☐ TROPE

range 02-99 _____

☐ eso ☐ exo ☐ hyper

☐ eso ☐ exo ☐ hyper

☐ hyper/eso ☐ hyper/exo

☐ Constant ☐ Intermittent

O Latent Nystagmus

NEAR

☐ Unable to test

☐ orthophoria

☐ PHORIA

range 02-99 _____

☐ TROPE

range 02-99 _____

☐ eso ☐ exo ☐ hyper

☐ eso ☐ exo ☐ hyper

☐ hyper/eso ☐ hyper/exo

☐ Constant ☐ Intermittent

Color Vision

☐ Unable to test

CVME: Trial 1_ /9

If less than 8/9 Trial 2_ /9

Stereopsis

☐ Unable to test

____ / 6

☐ RDE ☐ PASS

ColorV: ____/14 symbols (does not include demonstration card)

Autorefractometer

☐ Unable to test

Right Eye

Sphere

Cylinder

Axis

☐ Unable to test

Left Eye

Eye Health External

Right Eye

☐ Unable to test

☐ Normal

☐ Lid anomaly

☐ Pterigium/pinguecula

☐ Blepharitis

☐ Corneal anomaly

☐ Conjunctivitis

☐ Iris anomaly

☐ Ptosis

Left Eye

☐ Unable to test

☐ Normal

☐ Lid anomaly

☐ Pterigium/pinguecula

☐ Blepharitis

☐ Corneal anomaly

☐ Conjunctivitis

☐ Iris anomaly

☐ Ptosis

O Nystagmus

Abnormality:

Internal

Right Eye

☐ Unable to test

☐ Normal

☐ Cataracts

☐ Retinal anomaly

☐ Coloboma

☐ Optic Nerve anomaly

☐ Glaucoma suspect

Left Eye

☐ Unable to test

☐ Normal

☐ Cataracts

☐ Retinal anomaly

☐ Coloboma

☐ Optic Nerve anomaly

☐ Glaucoma suspect

Abnormality:

IOP

Right Eye _____

Left Eye _____

Pupils

☐ Normal ☐ Abnormal: _____

☐ Unable to test

☐ Icare

☐ Noncontact

☐ Unable to test

Right Eye

Left Eye

OU

Add

Retinoscopy	20 / _____	20 / _____	20 / _____	
Refraction	20 / _____	20 / _____	20 / _____	20 / _____

Recommendations:

☐ No new Rx

☐ No glasses recommended

☐ No change in glasses recommended

☐ Sunglasses (plano)

☐ New Rx

☐ Full time Rx

☐ Distance only

☐ Close work only

PD ____/____

Sphere

Cylinder

Axis

VA Distance

Distance OU

VA Near (OU)

ADD

Right eye

Left eye

			20 / _____	20 / _____	20 / _____	
			20 / _____			

☐ Sports goggles:

☐ Plano

☐ Rx

Right eye

Left eye

		20 / _____
		20 / _____

Referral to:

☐ Optometrist

☐ Ophthalmologist

☐ Primary care physician

☐ Neurologist

☐ Other: _____

Urgent Referral

☐ Yes ☐ No

Additional comments:

Visual Acuity (VA)- The measurement of sight sharpness. The ability to discern detail at distance.

Cover Test - Measures eye alignment to insure both eyes are used together. Eye teaming skills.

Color Vision - The ability to discriminate colors which may lead to confusion in recognizing teammates by uniform color in group sports.

Stereopsis - The ability to use both eyes together to make relative depth judgments.

Refraction - An estimate of the need for spectacle prescription. A person can be nearsighted, farsighted or have astigmatism. Either glasses or contact lenses can correct this condition.

Eye Health - Detects the presence of eye diseases, which may cause discomfort or threaten sight.

The information presented on the reverse side will explain the results of your performance in the various areas tested. Your primary eyecare professional can address any vision problem noted. For additional information about the program or if you have questions regarding the results, stop by our area during the competition or contact Special Olympics Lions Clubs International Opening Eyes, Local Clinical Director **(Please add Local Clinical Director name, address, mail and phone number prior printing)**



Vision Report Card

Enjoy the Games!

Sandra Block, OD MED MPH FAAO FCOVD
Stefan Schwarz FAAO
Global Clinical Advisor

Special Olympics
Lions Clubs International
Opening Eyes®



Vision Report Card

Name: _____

Date: _____

Special Olympics Lions Clubs International Opening Eyes sponsored the screening that the Special Olympic athlete listed above participated in. The testing performed was designed only to detect possible vision problems. The results of the testing do not reflect a complete exam of the health and function of your visual system. It is recommended that the athlete have complete eye examination at regular intervals.

Based on our testing:

_____ The athlete has **passed** the vision screening.
However, please remember that passing the screening in no way guarantees that further eye or health care is not required.

_____ The athlete had difficulty in the area(s) checked below that the:

	Visual Acuity		Cover Test
	Eye Health		Stereopsis
	Refraction		Color Vision
	Other:		

Please refer to the back of this form for explanation of the areas listed above.

_____ A new pair of glasses is being provided to the athlete free of charge. The glasses may be delivered during the games or mailed to them after the event. The glasses are to be used as follows:

	Full time wear (all day long)	Distance Viewing (TV, movies)
	Sports Activities	Close work (reading, school work)

_____ The athlete has been referred for additional care to:

_____.

Thank you for participating in the screening. If you have any questions, please call **(fill in clinical director's name, phone and email)** for any additional information.

_____ Reviewer's Signature

Special Olympics
Lions Clubs International
Opening Eyes®



CONGRATULATIONS ON YOUR NEW PAIR OF GLASSES

It is important that you understand when to use your glasses and what they should be used for.

How often should I wear my new glasses?

You received regular glasses:

- ☐ You should wear them all day long.
- ☐ You should wear your glasses when you are looking at things that are far away such as TV, movies, driving. The glasses are to be removed for viewing things up close.
- ☐ You should wear your glasses for looking at close objects such as computer screens, books, papers while writing, or other activities within 1 meter or arm's length.

You received sports glasses:

- ☐ You need to wear them during sports training and competition for protection as well as helping you see better.

Special Considerations:

- ☐ You need to wear your glasses all the time for protection because you use only one eye for seeing.

If you received two pair of glasses,

- ☐ You should wear the regular glasses for any time you are not involved in sports activities and wear the sports goggles while participating in sports.

You have a large prescription.

- ☐ To make you comfortable with your new glasses the power of the glasses was reduced. You may not be seeing 20/20. When you are comfortable wearing your glasses (possibly after several months) you should see your eye care professional to find out if the prescription should be changed.

Thank you for participating in the vision screening. If you have any questions, please call

Fill in with clinical director information for additional information.

Special Olympics Lens Kit Replacement Form



ESSILOR

VISION FOUNDATION

Name:	
Address:	
City:	
State:	
Phone:	
Account #:	1103888000
PO:	
Zip Code:	
Email:	

Email all orders to operations@evfusa.org AND samplelensorders@essilorusa.com

Gentex® FSV PDQ®

+Sph.										70mm X 1.5									
		F163		<input type="checkbox"/>		PL -		F165		<input type="checkbox"/>		+on-		F166					
Power	SPH	-0.25	-0.50	-0.75	-1.00	-1.25	-1.50	-1.75	-2.00	Power	SPH	-0.25	-0.50	-0.75	-1.00	-1.25	-1.50	-1.75	-2.00
Plano	4	4	4	4	4	4	4	4	4	-0.25	4	4	4	4	4	4	4	4	4
+0.25	4	4	4	4	4	4	4	4	4	-0.50	4	4	4	4	4	4	4	4	4
+0.50	4	4	4	4	4	4	4	4	4	-0.75	4	4	4	4	4	4	4	4	4
+0.75	4	4	4	4	4	4	4	4	4	-1.00	4	4	4	4	4	4	4	4	4
+1.00	4	4	4	4	4	4	4	4	4	-1.25	4	4	4	4	4	4	4	4	4
+1.25	4	4	4	4	4	4	4	4	4	-1.50	4	4	4	4	4	4	4	4	4
+1.50	4	4	4	4	4	4	4	4	4	-1.75	4	4	4	4	4	4	4	4	4
+1.75	4	4	4	4	4	4	4	4	4	-2.00	4	4	4	4	4	4	4	4	4
+2.00	4	4	4	4	4	4	4	4	4	-2.25	4	4	4	4	4	4	4	4	4
+2.25	4	4	4	4	4	4	4	4	4	-2.50	4	4	4	4	4	4	4	4	4
+2.50	4	4	4	4	4	4	4	4	4	-2.75	4	4	4	4	4	4	4	4	4
+2.75	4	4	4	4	4	4	4	4	4	-3.00	4	4	4	4	4	4	4	4	4
+3.00	4	4	4	4	4	4	4	4	4	-3.25	4	4	4	4	4	4	4	4	4
+3.25	4	4	4	4	4	4	4	4	4	-3.50	4	4	4	4	4	4	4	4	4
+3.50	4	4	4	4	4	4	4	4	4	-3.75	4	4	4	4	4	4	4	4	4
+3.75	4	4	4	4	4	4	4	4	4	-4.00	4	4	4	4	4	4	4	4	4
+4.00	4	4	4	4	4	4	4	4	4	-4.25	4	4	4	4	4	4	4	4	4

Gentex is a registered trademark of Gentex Optics, Inc.
Essilor is a registered trademark of Essilor International, S.A.
PDQ is a registered trademark of Gentex Optics, Inc.

Special Olympics Lens Kit Replacement Form



ESSILOR

VISION FOUNDATION

Name:			
Address:			
City:		PO:	
State:		Zip Code:	
Phone:		Email:	
Account #:	1103888000		

Email all orders to operations@evfusa.org AND samplelensorders@essilorusa.com

Gentex® FSV PDQ®

		+Sph.		F163		<input type="checkbox"/>		PL -		F165		<input type="checkbox"/>		+on-		F166		70mm X 1.5		<input type="checkbox"/>		- sph		F164		<input type="checkbox"/>		- on-		F167					
Power	SPH	-0.25	-0.50	-0.75	-1.00	-1.25	-1.50	-1.75	-2.00											Power	SPH	-0.25	-0.50	-0.75	-1.00	-1.25	-1.50	-1.75	-2.00						
Plano																				-0.25															
+0.25																				-0.50															
+0.50																				-0.75															
+0.75																				-1.00															
+1.00																				-1.25															
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+1.50																				-1.75															
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+4.00																				-4.25															

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PDQ is a registered trademark of Gentex Optics, Inc.

General Information					
Prescribing Doctor: *					
Patient Name: *					
State/Country:		Sport:		HAS #:	
Patient Demographic					
Age/DOB: *	<input type="checkbox"/> First Glasses	<input type="checkbox"/> First Exam	Gender: <input type="checkbox"/> M <input type="checkbox"/> F		
Patient Ethnicity:	<input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> American Indian/Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hawaiian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or More Races				
Order Information					
Lens Type: *		<input type="checkbox"/> Single Vision		<input type="checkbox"/> Bifocal	
	Sphere *	Cylinder	Axis	Addition	Seg Height
RE/OD					
LE/OS					
Distance PD: *		Near PD:			
RE/OD:	LE/OS:	RE/OD:	LE/OS:		
Lens Design: * <input type="checkbox"/> Single Vision <input type="checkbox"/> Single Vision Aspheric <input type="checkbox"/> Flat Top 28 Lens Treatments: <input type="checkbox"/> Balance Left <input type="checkbox"/> Balance Right Special Instructions (requires approval):					
Frame Information					
Manufacturer:		Brand:			
Model:		Type:			
Color:	Eye Size	Temple Length:			
Additional Information					
Shipping Address:					

General Information					
Prescribing Doctor: *					
Patient Name: *					
State/Country:		Sport:		HAS #:	
Patient Demographic					
Age/DOB: *	<input type="checkbox"/> First Glasses	<input type="checkbox"/> First Exam	Gender: <input type="checkbox"/> M <input type="checkbox"/> F		
Patient Ethnicity:	<input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> American Indian/Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hawaiian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or More Races				
Order Information					
Lens Type: *		<input type="checkbox"/> Single Vision		<input type="checkbox"/> Bifocal	
	Sphere *	Cylinder	Axis	Addition	Seg Height
RE/OD					
LE/OS					
Distance PD: *		Near PD:			
RE/OD:	LE/OS:	RE/OD:	LE/OS:		
Lens Design: * <input type="checkbox"/> Single Vision <input type="checkbox"/> Single Vision Aspheric <input type="checkbox"/> Flat Top 28 Lens Treatments: <input type="checkbox"/> Balance Left <input type="checkbox"/> Balance Right Special Instructions (requires approval):					
Frame Information					
Manufacturer:		Brand:			
Model:		Type:			
Color:	Eye Size	Temple Length:			
Additional Information					
Shipping Address:					



Opening Eyes

The Special Olympics Lions Clubs International Opening Eyes program is changing lives in communities across the globe, **providing free eye assessments, prescription eyewear, sunglasses and sports goggles to people with intellectual disabilities.** At the end of the 12-step visual exam, a decision is made if new glasses may be helpful. Through the generosity of our corporate sponsors Essilor (lenses) and Safilo (frames), athletes choose from a selection of free eye wear. Athletes who do not need any corrective lenses receive plano sunglasses provided by Safilo.

The Facts:

23% have never had an eye exam
16% have an eye disease
38% need new prescription glasses

The Results:

410.000 screenings
215.000 free eye glasses provided
500 trained Clinical Directors
1.2 Million Volunteer hours

Importance and Impact:

There are several ways that the Opening Eyes program helps to increase the athlete's access to care:

1. Providing vision assessment, refractions, and dispensing of appropriate eyewear to athletes during Special Olympics events.
2. Making permanent changes in the attitudes of the optometrists/eye care practitioners and optometry students who volunteer to participate in the Opening Eyes vision exams.
3. Educating the athletes, their guardians, coaches and administrators about the importance of vision to the performance of athletes in sports, school and work.
4. Providing continuing education to our volunteer optometrists/eye care practitioners in order to familiarize them with the best techniques for testing this patient population.
5. Collecting and analyzing screening data in order to raise awareness and to advocate for improved eye care for people with intellectual disabilities.

Special Olympics is a movement dedicated to empowering the global population of people with intellectual disabilities through sport, health and related social services. The mission of Special Olympics is to provide year-round sports training and athletic competition in a variety of Olympic-type sports for children and adults with intellectual disabilities, giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy and participate in the sharing of gifts, skills and friendship with their families, other Special Olympics athletes, and the larger community. Founded in 1968 by Mrs. Eunice Kennedy Shriver, Special Olympics has grown to become the largest global organization dedicated to sports and health for the population of individuals with intellectual disabilities, with national programming in over 170 nations, and engaging over 5,000,000 participating athletes annually.

Special Olympics Opening Eyes Key Partners



Lions Clubs International

Since 2001 the Lions Clubs International Foundation has been committed financial support to the program and provided thousands of volunteers around the world. Together both organizations work to bring proper eye care to Special Olympics athletes around the world through Opening Eyes. Lions Clubs are champions in thriving social inclusion and human rights.



Essilor and Essilor Vision Foundation

Since 2002 Essilor, the world leader in ophthalmic and optical products, has been the official global supplier of ophthalmic lenses to the Special Olympics Opening Eyes Program. Through local Essilor labs and local Opening Eyes programs both organizations have been able to provide over 215,000 prescription glasses to Special Olympics athletes around the world.



Safilo

Safilo supports the Opening Eyes program by providing free optical frames and sunglasses. The partnership between Safilo group and Special Olympics dates back to 2003 which has led to over 1 Million optical frames and sun glasses provided to Special Olympics athletes. In addition, Safilo personnel takes an active part in the implementation of the screening events as volunteers.

