

Optional planning guidance

School-based vision clinics

School-based vision clinics are optional and may be used as one strategy to support follow-up care after a student does not pass vision screening. Clinics do not replace the required parent notification, referral, consent, documentation, or follow-up process.

School-based vision clinics may help students access timely eye care after they do not pass vision screening, especially when families have financial barriers. A professional eye exam can identify vision conditions that may need treatment. Earlier access to prescribed glasses or other care may also support a student's learning and access to instruction.

School-based vision clinics are optional and should follow LEA policy and procedures. A clinic does not replace the required referral and follow-up process. When a student does not pass vision screening, the LEA must provide parent or guardian notification and referral for further evaluation according to Utah vision screening requirements. Follow-up may include helping the family connect with a school-based clinic or another eye care provider.

Before planning a school-based vision clinic, LEAs and schools should consider the following:

- **LEA approval**
 - An LEA administrator should approve any vision clinic held on school property.
- **No endorsement of specific providers**
 - DHHS and the Utah School Nurses Association do not endorse any specific provider of professional vision care for school-based clinics. Schools may work with nonprofit organizations, local eye care professionals, businesses, or community partners based on local needs and LEA policy.
- **Screening and clinic roles**
 - Some organizations may be approved to provide school-based vision screenings after completing required state training and approval.
 - A school-based vision clinic is different from a screening event. A clinic may include a professional eye exam, prescription, glasses, or follow-up care.
- **Student eligibility and cost**
 - Schools should clarify who the clinic is intended to serve. Many clinics focus on students with financial need. Some providers may serve students with Medicaid, CHIP, private insurance, or no insurance. Some clinics may be free because of grants, donations, school foundation funds, or community partners.
- **Family communication, consent, and privacy**

- Schools should have a clear process for sending information to families and collecting required permission forms. Schools should get parent or guardian permission before sharing student information with a clinic provider or scheduling a student for clinic services. Schools should follow LEA procedures for privacy, student records, and sharing student information.

- **Payment expectations**

- Schools should discuss costs with the clinic provider before the event. This includes whether families will be asked to pay anything, whether insurance may be billed, and whether services will be free to families.

- **School support needed**

- Schools should ask the clinic provider what support is needed, such as space, tables, volunteers, interpreters, student flow, forms, or help returning glasses to students. LEA staff should follow local procedures when outside partners provide services on school property.

- **Timing after screening**

- Many districts schedule a vision clinic 1 to 2 months after vision screening. This allows time to send referrals, follow up with families, collect permission forms, and plan clinic logistics.