# InfantSEE $^{\text{TM}}$ : MEMBER DOCTORS' ANALYSIS OF THE EARLY STAGES OF THE PROGRAM

Ву

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This paper is submitted in partial fulfillment of the Requirements for the degree of

Doctor of Optometry

Ferris State University

Michigan College of Optometry

May, 2006

#### ABSTRACT

PURPOSE: To gauge the level of participation by the public as well as optometrists in the InfantSEE™ program in Michigan. METHODS: A survey was created by Erik Belcarz, 4<sup>th</sup> year optometry student at the Michigan College of Optometry, and Dr. Mark E. Swan, professor at Michigan College of Optometry. The survey was distributed to over 300 optometrists attending the 37th Annual Contact Lens & Primary Care Seminar held in Lansing, MI on October 5-6, 2005. The surveys were randomly distributed and all results were anonymous. RESULTS: Of the 300+ surveys handed out over the 2-day period, 26 surveys were returned completed. 53.85% of the doctors were already participating in the InfantSEE™ program. Of those participating doctors 92.86% revealed that they had done less than 6 InfantSEE™ exams to date, while 42.86% had not done any at all. CONCLUSIONS: As of October 2005, the InfantSEE™ program has not made an enormous impact in the public health of Michigan infants. Slightly more than half of surveyed Michigan doctors are participating in the program, and the vast majority have seen little to no interest from the public, in their practices.

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#### **Introduction:**

On June 8, 2005, the American Optometric Association (AOA), in partnership with The Vision Care Institute of Johnson and Johnson Vision Care, Inc, launched InfantSEE<sup>TM</sup>, a public health program developed to provide eye examinations for infants nationwide. Under this

program, supported by former President Jimmy Carter, who serves as honorary national chair and spokesman, participating optometrists will provide a one-time, comprehensive eye assessment to infants in their first year of life, offering early detection of potential eye and vision problems at no cost regardless of income<sup>1</sup>.

The decision for making the program available to children under 1 year of age was based on recommended vision exam frequency guidelines of the AOA Clinical Care Guide for Infants and Children, as well as input from other organizations and pediatric vision specialists. Children are recommended for eye exams at ages six months, three years, and before they enter elementary school, unless a more frequent visit schedule is recommended<sup>2</sup>.

Three to four million babies are born each year in the United States. A significant number of cases of treatable eye conditions such as amblyopia (2.5-4.5%), strabismus (4-5%), clinically significant hyperopia (3-6%), total refractive errors (12%) will develop prior to age 5. Many of these conditions may not be detected in time for optimal management or treatment. This program not only offers the year one assessment, but is also a prime opportunity to educate parents of the continuum of vision care their children need and deserve. The InfantSEE<sup>TM</sup> program allows optometry to change the entire mindset of the country as to when primary vision care for individual begins<sup>2</sup>.

The benefits of a program such as InfantSEE™ are exponential. Launching a program of this nature and scale, however, can be a difficult endeavor. The goal of this survey was to determine how far along the program has come, and to determine, if necessary, where more effort must be placed in order to allow this program to flourish.

#### Methods:

Each year, during the first week of October, the Michigan Optometric Association (MOA) holds its Contact Lens & Primary Care Seminar in Lansing, MI. Attended by hundreds of optometrists representing communities of different racial and economical characteristics, this event was an excellent place to get a random assortment of doctors to complete the survey. Four-hundred surveys were printed and placed on randomly chosen chairs in the main lecture hall at the seminar to ensure no bias as to which doctors completed the survey. A cover letter was attached explaining the purpose of the survey, who was conducting it, and that the doctors would be under no further obligation once it was completed and returned to the MOA booth in the exhibit hall. A total of 26 completed surveys were returned representing roughly 6-9% of those initially handed out.

#### Results / Discussion:

Getting upwards of a 90% response from a written survey is highly unlikely. 70-80% are equally difficult as well whether it is because of apathy towards filling out the survey, disdain for the topic, forgetfulness, or possibly being unaware of the survey altogether. It is impossible to accurately nail down why some surveys generate only a 30-50% response, either. This survey, however, only produced a 6-9% response. That

meager number leaves any and all conclusions to be drawn from a small sample size, and the author is well aware of this. This is obviously not ideal, for a small group is being used to represent the ideals and experiences of a much larger one. Keeping all of that in mind, the results of the survey do not speak highly of the penetrance of this program into the public mindset, or into the mindset of Michigan optometrists.

The initial question of the survey was, *I am participating in the the AOA's InfantSEE*<sup>TM</sup> *program.* 14 out of the 26 responses, or 53.85%, were that Yes indeed the doctor was a member of the program. This number while just slightly over one half, is not completely disheartening knowing that the AOA had established a goal of 30% enrollment to get the program started. One must entertain the idea, however, that this number may be slightly inflated, as those doctors who are not members may have declined answering the survey because of a lack of interest in the program. Alternatively, they may have felt that they would not be speaking from a position of experience, and therefore disregarded the survey. Of those who reported to not be participating in the program, there were several who explained there reasoning for not doing so. One O.D. stated that a partner was involved, while others explained that there practice setting did not allow for infant examinations.

Next on the survey was, *I have had patients ask me questions about the*InfantSEE<sup>TM</sup> program. 16 out of 26, or 61.54%, responded that none of their patients had inquired about the program. The question herein lies, is this low response due to lack of effort in the media to promote the program, or lack of effort on the part of the member optometrists to recommend it to applicable patients? It seems that the problem is two-fold. When asked *I have recommended the program to applicable patients* 11 doctors, 42.3% or less than half, said that they had. If optometrists are not recommending the program to patients, then who will? Also, it appears that OD's are not advertising the program with pamphlets or posters, either, with only 34.62% of doctors doing so. Why the low response? Are the doctors slow to accept the program for fear of the cost of chair time? Do they feel ill-equipped to perform comprehensive examinations for this population? Could it be that these OD's do not feel that the program is valuable from a public health standpoint? Hopefully, these questions will be answered in the future.

Earlier, a statement was made that the promotional inadequacies are two-fold. It has been demonstrated that the optometrists are not necessarily doing there part, but how about the media. When asked *I have seen public promotions of the InfantSEE*<sup>TM</sup> *program in my local media* only 7 doctors, or 26.92% responded yes. As for the member OD's advertising in the local media, it appears that their efforts have been worse than the corporate sponsors. When asked *I have seen other doctor's promotion of the InfantSEE*<sup>TM</sup> *program in my local media*, a meager 15.38% responded that they had. Some comments about this problem include, "It may take more promotion to make the public aware of our services" and "Public awareness is still too low. People need an easier way to look up participating doctors."

What about those who are participating in the program? What are their viewpoints? When asked if it has been easy to integrate the program into their practice 11 out the 14, or 78.57% felt that it was. Several OD's further explained their position by stating, "I already did free infant exams," "We are in the process of integrating it into our practice. I cannot unequivocally say yes it has been easy, but let's say more yes than no." How many patients are they "integrating"? It seems as though that may have something to do with the ease of integration, because of the 14 who are member OD's, only 1 has had more than 5 (and less than 10) people utilize the program, 7 have had more than 1 but less than 5 patients, and 6 member OD's have yet to see their first InfantSEE<sup>TM</sup> patient.

Still, it appears that those who signed have not had their spirits broken by lack of public interest. When asked *I value being a part of the InfantSEE*<sup>TM</sup> *program*, 12 out of the 14 member OD's said yes, or 85.71%. Some even added, "I hope to see more patients through this program. I think this program has good promise," "Great program. Parent's education on proper eye care for whole family is a good practice builder as well."

#### Conclusion:

This survey failed to meet the expectations of the project designers and the low response prevents any meaningful interpretation. However, data from the InfantSEE<sup>TM</sup> State Leader database also indicate low participation among optometrists at the time of this survey: National 7.3% and Michigan 6.2% optometric program participation. It is

hoped that exposure to this survey may have helped promote the program at the state level and that a repeat of the survey in 2006 will provide improved statistical validity.

AOA's InfantSEE<sup>TM</sup> is a wonderful program that not only provides much needed eye care to the infant population, it also promotes awareness of optometry and can be an excellent practice builder. Increased public awareness as a result of the InfantSEE<sup>TM</sup> program will contribute to improved health and well being of infants and a greater public awareness of the importance of eye care throughout life. There appears to be two basic problems with the program, at least in its early stages. One, more effort needs to be given by optometrists to promote and carry-out this program. Applicable patients need to be made aware of the program's existence, and advertising outside of the office needs to be done to further advance public awareness. Also, the corporate sponsors need to be more proactive in the media, because if the majority of optometrists who are aware of the program have not seen any advertisements in the media, it can be safe to say that the public has not been made aware with the existing marketing schemes. InfantSEE<sup>TM</sup> is still in its "infancy," and the proper adjustments should still be able to be made to ensure that this program achieves much success in the future.



Dear Doctor,

My name is Erik Belcarz and I am conducting the following survey as part of my senior research project. I am studying the public awareness and attitude regarding children's health care and eye care during the launch of the InfantSEE program. I am also interested in knowing your impression of this program.

Please take a few minutes to complete the survey on the back of this page and return it to the MOA booth. If you would like to take more time, you can pick up a self-addressed, stamped envelope at the booth and mail the survey back to the College of Optometry, anonymously.

In order to respect your privacy during this research we ask that you do not write your name on this sheet. If you wish to receive more information about this program or have questions about the program, please stop by the MOA booth or speak with one of the MOA Board Members. Results of this survey will be shared with the MOA Children's Vision Care Task Force only as part of a summary of all responses.

The survey on the opposite side of this paper should take only a few minutes to complete. You indicate your voluntary agreement to participate by completing and returning this questionnaire. Once completed you have no further obligation.

If you have any questions regarding this study, contact – Dr. Mark Swan, Michigan College of Optometry at Ferris State University, (231) 591-2184, mswan@ferris.edu.

Thank you very much for your time and cooperation.

Sincerely,

Erik Belcarz

## Thank you for taking the time to complete this survey.

I am participating in the AOA's InfantSEE program	Yes	No
I have had patients ask me questions about the InfantSEE program	Yes	No
I have recommended the program to applicable patients	Yes	No
I have posters and/or pamphlets informing patients of the existence of the program in my office	Yes	No
Approximately how many patients have taken 0 1-5 advantage of this program so far	6-10 11-20	>20
I have found it easy to integrate the program into my practice	Yes	No
I have seen public promotions of the InfantSEE program in my local media.	Yes	No
I have seen other doctor's promotion of the InfantSEE program in my local media	Yes	No
I value being a part of the InfantSEE program	Yes	No
Additional comments regarding InfantSEE:		
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#### REFERENCES

- Former President Carter and American Optometric Association announce
   InfantSEE<sup>TM</sup> rogram to provide no-cost infant eye assessments. Available at
   www.InfantSEE<sup>TM</sup>.org/documents/InfantSEE<sup>TM</sup>Launchrelease.pdf. Accessed 2/1/05.
- 2. InfantSEE<sup>TMTM</sup> Facts and FAQs, available at <a href="https://www.poaeyes.org/InfantSEE<sup>TM"</sup> FAQs for Members.doc">www.poaeyes.org/InfantSEE<sup>TM</sup> FAQs for Members.doc</a> . Accessed 2/1/05.