Survey Of Affiliations Between The Schools And Colleges Of Optometry And Community Health Centers Within The United States And Its Territories

Sandra S. Block, OD, M Ed*[1], Daniel Desrivieres, OD *, Lillian Thorp Kalaczinski, OD *, Susan Primo, OD, MPH *, Roger Wilson, OD *[2], Renee Mika, OD**[3], Karen Chester, OD *, John Whitener, OD (American Optometric Association (AOA))

*Member of the AOA Community Health Centers Committee, **Member of the AOA Faculty Relations Committee, [1]Illinois College of Optometry, [2]New England College of Optometry, [3]Michigan College of Optometry

INTRODUCTION

Community Health Centers (CHCs) are outpatient comprehensive health care facilities, created over 40 years ago as part of President Johnson's 'War on Poverty'. Designated as Federally Qualified Health Centers (FQHCs) through the Public Health Service Act, CHCs strive to minimize or eliminate health disparities by opening their doors to the nation's most vulnerable populations. Unfortunately, only 18% of the nation's CHC provide in-house vision care, notwithstanding the 14 million people (over the age of 12) affected by vision impairment and the disproportionate level of ethnic minorities suffering from ocular disease and vision loss. It would stand to reason that schools and colleges of optometry are uniquely positioned to work with CHC to confront this challenge. The AOA Community Health Center Committee, created soon after the American Optometric Association (AOA) signed a memorandum of understanding with the National Association of Community Health Centers (NACHC) in 2004, conducted this study to describe the extent to which schools and colleges of optometry are affiliated with CHC across the nation.

STUDY DESIGN/ METHODOLOGY

The American Optometric Association (AOA) Community Health Center Committee (CHC) developed a survey that to evaluate how often optometry schools and colleges within the United States (including Puerto Rico) utilize collaborations with local community health centers (CHC) in an effort to provide optometry students and residents an opportunity to obtain clinical expertise in working within an eye service serving persons who access health care services within a CHC.

The survey was channeled through the AOA Faculty Relations Committee. Each school and college within the US is represented on this committee and it was felt that utilizing this resource would ensure that the survey was completed within a reasonable time frame. All surveys were completed and returned within a timely manner.

A review of the survey results suggested confusion about what qualifies a program as a federally qualified health center or look alike. Each school was subsequently contacted by one of the authors to verify the accuracy of the results and modify the survey results if needed.

The survey was divided into 2 primary sections. The first section elicited general experience as follows:

Form 1 – General Information

- Name of school or college of optometry
- Name and identifying information of respondent
- Request to indicate if the institution was associated with a CHC either as a externship site or clinical rotation site.
- If the school or college was associated with CHC, they were requested to document the number of affiliations with different CHC.

If the school indicated that they did not currently have a relationship with a CHC, they were finished with the survey and just needed to return Form 1 to AOA.

Form 2 of the survey was designed to permit the school or college of optometry to describe in detail their relationship with each CHC they are affiliated with: There were a total of 24 questions which focused on the following aspects of the relationship:

- CHC name
- Description of student and resident participation
- Review of professional staffing
- Description of the eye service
- Explanation of the financial side of the CHC

PRINCIPAL FINDINGS

FORM 1 – GENERAL INFORMATION

The following schools reported that they do not have any CHC affiliations:

- Pennsylvania College of Optometry
- Southern California College of Optometry
- Southern College of Optometry
- Northeastern State University, College of Optometry
- NOVA Southeastern University, College of Optometry
- State University of New York, State College of Optometry

The remaining 11 schools were affiliated with CHC.

School or College of Optometry	# of CHC Affiliations
Illinois College of Optometry	1
Inter American University of Puerto Rico	2
New England College of Optometry	14
The Ohio State University, College of Optometry	1
Michigan College of Optometry at Ferris State University	1
Indiana University, School of Optometry	4
University of Missouri-St. Louis, School of Optometry	3
University of California at Berkeley, School of Optometry	3
University of Houston, College of Optometry	3
University of Alabama at Birmingham, School of Optometry	3
Pacific University, College of Optometry	2

FORM 2 – DESCRIPTION OF EACH CHC

Student / Residents Assigned to CH

The schools varied in their utilization of students and residents:

School	CHC Name	# Students/yr		# Residents/yr
Illinois College of Optometry	Lawndale Christian Health Ctr	24	4th Yr Only	0
Inter American University of Puerto Rico	Ciudadela Rafael Hospital	30	4th Yr Only	0
	J.J Arton Community Hospital	5	4th Yr Only	1
New England College of Optometry	Codman Square Health Center	16	3rd & 4th Yr	0
	Dimock Community Health Center	48	3rd & 4th Yr	1
	Dorchester House Multi-Service Center	25	3rd & 4th Yr	1
	East Boston Community Health Center	35	3rd & 4th Yr	0
	Geiger-Gibson Community Health Center	12	3rd Yr only	0
	Martha Eliot Health Center	10	3rd & 4th Yr	0
	North End Community Health Center	10	4th Yr Only	0
	South Boston Community Health Center	60	3rd & 4th Yr	0
	South End Community Health Center	12	3rd & 4th Yr	0
	Upham's Corner Health Center	8	3rd & 4th Yr	0
	Whittier Street Health Center	12	3rd & 4th Yr	0
	Boston Health Care for the Homeless Program	14	3rd Yr only	0
	Greater Rockdale Medical and Dental Center	28	3rd Yr only	0
	Joseph M. Smith Community Health Center	20	3rd Yr only	0
The Ohio State University, College of Optometry	Columbus Neighborhood Health Centers Inc.	4	4th Yr Only	0
Michigan College of Optometry at Ferris State University	Cherry Street Health Services	17	3rd & 4th Yr	0
Indiana University, School of Optometry	Martinsville Brightwood Health Center	2	4th Yr Only	0
	People's Health Center/Dental Center	2	4th Yr Only	0
	Southeast Health Center	2	4th Yr Only	0
	Southwest Health Center	2	4th Yr Only	0
University of Missouri-St. Louis, School of Optometry	Grace Hill Neighborhood Health Center	18	3rd & 4th Yr	0
	Family Care Center of Carondelet	12	3rd & 4th Yr	0
	Myrtle Hilliard Davis Comprehensive Health C	12	4th Yr Only	0
University of California at Berkeley, School of Optometry	La Clinica de la Raza	8	4th Yr Only	0
	Castle Family Health Centers	15	4th Yr Only	0
	Davis Community Care	1	4th Yr Only	0
University of Houston, College of Optometry	San Jose Clinic	4	3rd & 4th Yr	1
	La Nueva Casa de Amigos	4	3rd & 4th Yr	1
	Good Neighbor Clinic	12	4th Yr Only	1
University of Alabama at Birmingham, School of Optometry	Bessemer Health Center	24	3rd Yr only	0
	Northern Health Center	36	3rd & 4th Yr	0
	Survey Western	24	3rd Yr only	0
Pacific University, College of Optometry	South East Eye Center	60	4th Yr Only	0
	Virginia Garcia	45	3rd & 4th Yr	0

STAFFING OF THE EYE CLINIC AT THE CHC

Optometrists staff all of the CHC affiliated with the schools. There are anywhere from 1 - 5 optometrists at the CHC. In 24 of the 37 (or 64.9%) sites full time faculty from the schools were appointed to the eye service. The remaining manpower is composed of: optometrists with staff appointments in 15 of the 37 sites or 40.5%, part time faculty at 7/37 or 18.9% of the CHC, or adjunct faculty members in 19 CHC. Please note that this tallies to more than 100% because many sites are staffed with more than one OD. Some may have more than one affiliation.

Ophthalmology was present at the CHC in 15 out of 37 sites (68.2%).

Ophthalmologist time commitment to CHC:

Time	Frequency
<1 day/month	2
3-8 hours /month	9
1 hrs/wk	2
Unknown	1
1 day/week	1
Total	15

Number of administrative/clerical staff for eye service:

Staff	Frequency
.0	4
0.5	1
1.0	14
1.5	1
2.0	12
2.5	1
3.0	3
5.0	1
Total	37

Number of clinical support staff for eye service:

Staff	Frequency
.0	13
1.0	8
2.0	4
3.0	1
Total	16

Data missing on 11 sites.

DESCRIPTION OF EYE SERVICE

Hours / Week
Range: 4- 61
Mean (standard deviation) - 30.9 (±18.5)

Days / Week
1 day – 6 days
Mean (std. dev.) – 3.96 (±1.87)

Number of Rooms Dedicated to Eye Care
Range 1 – 7 Rooms
Mean (std dev.) – 3.03 (±1.49)

Location of Eye Service

location	Number of Respondents
Complete Eye Care Center (exam room, office, optical, special testing)	23
Exam Room Only	23
Mobile Unit	3

- Nine respondents marked both complete eye care center and exam room only suggesting inflated number for eye room only.

Services Provided Within the CHC Eye Service:

Type of Service	# of CHC Eye Services
Comprehensive Eye Exams	37
Contact Lenses	19
Optical	33
Visual Field Testing	29
Fundus Photography	18
Low Vision	10
Binocular Vision / Vision Therapy	13
Ophthalmology	13

How Many CHC Provide In-House Optical Services:

Type of Optical Services provided:

Dispensing Only	15 (40.5%)
Complete Optical Services	15 (40.5%)
No Optical Service	7 (18.9%)

Financial / Billing Services:

This section requested information on the fiscal responsibilities and billing for each of the CHC

Who is responsible for the following:	CHC	School / College of Optometry	Both	Other
Maintenance of Equipment	20	13	2	2
Build out / Equipment Purchase	16	17	1	3
Optometrist Salary	5	22	10	
Ophthalmologist Salary	9			3
Outside Ophthalmology Services	0			
In-House Optical Overhead	15	9		1
Billing For Eye Services	24	12		0

LIMITATIONS / NOTATIONS PERTAINING TO SURVEY*

In collecting the information from the individual schools and colleges of optometry several challenges and discrepancies were encountered:

- The questions as written on the survey yielded some confusion about how to answer some quesitons
- The individuals who completed the original survey may not have been aware of all of the affiliations. Some of the respondents included affiliations which are not considered community health centers.
- The authors were made aware of at least three schools which have affiliations with community health centers that were not reported on the original survey
- IT appeared that many respondents were not completely certain of the definition of FQHC's or FQHC look alikes.
- Due to the potential or inaccurate date, it was necessary to modify the original methodology to include follow up by one of the authors with each school or college of optometry.

CONCLUSIONS / IMPLICATIONS

The results of the survey reveal significant variation in utilization of CHCs among the schools and college of optometry. Community health centers exist to increase access to health services and reduce health care disparities in vulnerable populations. Community-based clinical training programs provide diverse clinical experiences and may serve to alter attitudes toward certain populations. Student exposure CHCs may lead to work force development. The cost effectiveness and educational value of providing this type of experience should be evaluated as schools consider strengthening clinical curriculum components.

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