

Teachers' Presentation Discussion
ADVISOR Workshop
14 March 2005

Moderator: Tom Miller

Some observations on how we can enhance the web site and the communication cycle:

- **There should be a general advocacy statement on the website.** While the individual states have differing requirements, advocacy is of prime importance to parents, teachers and doctors. The ADVISOR web site should be an advocate for things that ALL states should do.
- The workshop presentations, once they are made available on the ADVISOR site, should provide the opportunity for any of the teachers or doctors to use them as a starting point (or a quick reference guide) for presentations to other groups.

Discussion/Comments/Suggestions:

1. One of the teachers' goals is to raise the awareness of the pediatrician/pediatric ophthalmologist regarding their role in assessing and gaining services for young children with visual impairments or blindness. When the health care professional can identify specific, individual needs in their report, it helps the teachers get the necessary services for that child.
2. The majority of doctors (outside of Children's) don't have the desire to help out. Getting them to write a report or validate a visual condition is very difficult. We need stronger connections, and the aforementioned doctors need to realize that they are part of a team and community.
3. ADVISOR should do a presentation for AER (Association of Educators and Rehab Specialists) in Rhode Island.
4. How can we expand this to the medical community outside of Children's? ADVISOR is unique and needs to be expanded.
5. Concern raised that the TVI's many times get back handwritten notes that are almost impossible to read. If the TVI can't decipher that, the parents definitely can't understand it. **Clear succinct reports NEED to be given by ophthalmologists.**
6. It was suggested to start with a smaller group of key doctors (not every doctor) and hand out ADVISOR CD's to start off the process. CD's are something novel and catchy that may entice the medical community to actually take the time to check it out.
7. Can NAPVI distribute the ADVISOR Companion CD's to parents? And also, can they give a CD to parents to give to their ophthalmologist? (well-received idea).

8. Someone mentioned that their ophthalmologist friend didn't know about ADVISOR, and that ADVISOR should get in touch with other Pediatric Ophthalmology departments at other childrens' hospitals.
9. Idea: to collaborate with the American Foundation for the Blind and also investigate the possibility of having a link from the National Eye Institute.
10. Get ADVISOR for the 2006 big national conference.
11. Typically, doctors (not at Children's Boston) are not referring children or elderly to rehab services.
12. A point was raised that personal contacts are a good way to go. New York Lighthouse promoted via personal contacts and received a better return than by doing mailings. Mail often does not get read. Having that personal contact DOES make a difference; you can actually get people to do things.
13. Suggestion: At Children's Hospital Boston - having an exhibit of the different services available in their area, so that doctors can go in, grab their lunch sandwich, and then go about their business (addressing the issue of doctors being busy).
14. ADVISOR needs to get in the radar of these other groups. We need to become more popular and well-known nationally. There needs to be a national integrated network model for groups like ADVISOR.
15. Dixon spoke about the Experience Journal (<http://www.experiencejournal.com>) and how something like that can be included in ADVISOR. The Experience Journal provides information and interviews of patients and their families. This gets people's attention because it's on a more personal level, and you can watch real people speaking about their real-life experience.
16. **Idea: a form that the TVI can print from online and fill out, to be given to the parent, who then can take it to the doctor (based on the Open Care Record model).**
17. Additional ideas generated from the wrap-up session included hosting a panel which would be comprised of a doctor, teacher and parent.
18. Another area mentioned was rehabilitation services and the fact that having a personal contact can make a great deal of difference in terms of moving the process along.