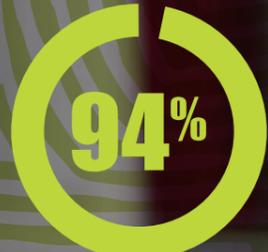




VISION FOR EVERY AUSTRALIAN, EVERYWHERE:
Eye care for Indigenous Australia

NEED FOR EQUITY:
WHAT MOTIVATED US TO DO THIS?



94% of vision loss in Aboriginal communities is preventable or treatable¹



These alarming statistics motivated action over the last five years 2010-2015, instigating collaborative work through a program funded by the Vision Cooperative Research Centre (Vision CRC). Brien Holden Vision Institute worked with Aboriginal Community Controlled Health Services and a national network of people from the Indigenous eye and health care sector, to review eye care service delivery patterns at locations in the Northern Territory and New South Wales, aiming to strengthen eye care services and outcomes.

Diabetes related blindness in Aboriginal Australians is 14 times higher than in non-Indigenous populations¹

BUILDING ON RECOMMENDATIONS:
WHAT DID WE SET OUT TO ACHIEVE?

Building on current evidence and guidelines for Indigenous eye care for Aboriginal Australians, the team worked collaboratively with Aboriginal Community Controlled Health Services to identify the most practical and workable solutions to improve access and uptake of eye care in 'real-life' settings.^{2,3}

Research processes were both rigorous and grounded, focusing on identifying practical solutions for improving eye care to integrate with primary health care and existing systems for health care delivery.

This enabled the team to disseminate the practical solutions developed across the other states of Australia, through further opportunities and collaboration, to enable greater and wider scale sustainable change for all Aboriginal Australians needing eye care.

KEY METHODS ENABLING ACHIEVEMENTS:

- **Identifying key opportunities** for eye care improvements through extensive research
- **Directly translating policy** relating to Aboriginal eye care improvements into action²
- **Enabling improvements** in eye care services, in 'real-life' community/patient-centered settings
- **Providing practical solutions** to enable dissemination of knowledge across related health services

CREATING SUSTAINABLE CHANGE: WHAT IMPACT CAN WE MEASURE THROUGH THE ACHIEVEMENTS MADE?

The Vision CRC program work specifically focused on the following approaches to **build capacity** in a comprehensive way:

- Researching the gaps and opportunities for improving eye care services and systems
- Exploring and recording 'real-life' patient and community experiences in eye care; to guide change by making services more accessible and culturally appropriate
- Collaborating with the regional network to determine and work toward common goals instigating change
- Partnering with Aboriginal Community Controlled Health Services to support integration of eye care within primary health care
- Implementing the developed practical solutions and processes to support stronger eye care systems and better outcomes regionally, with scope to national impact through further collaboration

ACHIEVEMENT HIGHLIGHTS:

1 IMPROVED SERVICE DELIVERY AND EYE HEALTH OUTCOMES FOR ABORIGINAL AUSTRALIANS



INCREASED ACCESS TO EYE CARE

Annual retinal exams for adult patients with diabetes increased from

33% → 48%

National average is 20%



STRONGER EYE CARE SYSTEMS*

Increased stakeholder-rated performance of the regional eye care system from

42% → 67%



BETTER REFERRAL PATHWAYS

PRIMARY CARE – MORE TIMELY REFERRALS

Referrals in place for adult patients with diabetes for an optometry exam increased from

35% → 77%



SERVICE DELIVERY CHANGES TO MEET EYE CARE NEED*

Optometry examinations for the region increased from

51% → 97%

of the projected population needs

DIABETIC RETINOPATHY – MORE TIMELY CARE

Proportion referred who saw an ophthalmologist increased from

25% → 54%

Ophthalmology service days for the region increased from

28% → 93%

of the projected population needs

CATARACT – MORE TIMELY TREATMENT

Proportion referred who received surgery increased from

3% → 32%

* studied in the NT region only





2 INCREASED CAPACITY OF EYE CARE WORKFORCE AND SUPPORTING SYSTEMS

NATIONAL CAPACITY

- New Skill Set developed for Aboriginal and Torres Strait Islander Eye Health Coordinators
- **44** coordinators trained
- **232** primary health care workers trained
- **77** participants at national coordination and consultation forums

REGIONAL CAPACITY

- Collaborative eye care networks established in two regions, involving **36** organisations
- Enduring resources developed to support regional improvements after program life

LOCAL CAPACITY

- Improved eye care in **19** primary health care clinics affecting **9** Aboriginal Community Controlled Health Services across **2** regions: servicing a combined Aboriginal population of **20,459**
- Proportion of primary health care staff confidently performing primary eye care checks increased from **50%** to **92%** following the training



3 PRACTICAL AND PROVEN SOLUTIONS (TOOLS) TO ENSURE SUSTAINABLE CHANGE

DEVELOPED USEFUL, PRACTICAL TOOLS TO:

-  Improve eye care outcomes through continuous quality improvement of services provided
 - Clinical audit tools
 - Eye care systems assessment tool
-  Build local and regional workforce through tailored education and training
 - Aboriginal and Torres Strait Islander Eye Health Coordinator Skill Set
 - Training packages for primary health care teams
-  Meet community service needs through planning
 - Service needs calculator
 - Implementation checklist
 - Service directory template
 - Referral pathways template
-  Provide patient-centered care
 - Guidelines for understanding community perspectives and needs



4 NATIONAL POLICY CHANGE INFLUENCING BETTER OUTCOMES

CHANGE TO POLICY SUPPORTING FAIRER ACCESS TO VISION CORRECTION FOR INDIGENOUS AUSTRALIANS

- Research showed **80%** of optometrists surveyed supported the concept of a spectacle scheme for Indigenous patients, and **88%** indicated they would use such a scheme
- Cost modelling showed that access to subsidised spectacle schemes for Indigenous Australians would be exceptionally cost-effective in terms of cost per quality adjusted life year (QALY), between lower and upper limits of **\$945** to **\$2864** per QALY.⁴
- ‘Principles for a subsidised spectacle scheme for Aboriginal and Torres Strait Islander Australians’ developed, and subsequently **endorsed by the sector**
- Advocacy with both State and Commonwealth Governments regarding **improving access** to subsidised spectacles for Aboriginal and Torres Strait Islander Australians

NATIONAL RECOMMENDATIONS REGARDING INDIGENOUS EYE CARE

- **Influenced key policy** recommendations, at both the 2013 and 2015 National Rural Health Conference, regarding eye care for Aboriginal and Torres Strait Islander Australians
- National Aboriginal and Torres Strait Islander Eye Health Coordination Forum held in 2014: key contribution of eye health coordinators to Indigenous **eye health outcomes highlighted**
- Coordination emphasised in sector budget recommendations for **improved** Aboriginal and Torres Strait Islander eye health, submitted to Australian Government in 2015



5 EXISTING PARTNERSHIPS STRENGTHENED AND NEW COLLABORATIONS DEVELOPED

- New and strengthened partnerships developed with Aboriginal Community Controlled Health Services, their communities, the broader Aboriginal and Torres Strait Islander primary health care, research, eye care, policy and community development sectors, as well as State, Territory and Commonwealth Departments of Health
- **Importantly**, these collaborative ways of working to **find practical solutions for Indigenous eye care** will continue **well** beyond the life of the Vision CRC program



MAXIMIZING THE IMPACT: WHERE TO FROM HERE?

The solutions and approaches developed during the program have shown in working demonstration that they are practical, translatable and scalable. Here is what could be possible, with ongoing and further implementation of this program's achievements:



Implement policy advice regarding subsidised spectacle schemes

POTENTIAL IMPACT

Addresses half of the vision loss affecting Aboriginal Australians



Develop a national peer-support network to mentor the existing eye health coordination workforce

POTENTIAL IMPACT

Continued improvement of eye care services for 222 communities



State-wide roll-out: implementation of the practical solutions outlined in all regions across NSW and the NT

POTENTIAL IMPACT

Eye care improvements for an Indigenous population of 229,403



Build a primary eye care training program into the Visiting Optometrists Scheme, across all regions

POTENTIAL IMPACT

Increased rates of primary eye care assessments and improved referral pathways



Implement regional planning with each of the Visiting Optometrist Scheme and Rural Health Outreach Fund holders

POTENTIAL IMPACT

Conducted needs analysis and service planning for Indigenous communities at 402 locations



National delivery of the Skill Set developed for Aboriginal and Torres Strait Islander Eye Health Coordinators

POTENTIAL IMPACT

Significantly increase the eye health coordination workforce across Australia



National roll-out: implement the set of practical solutions in all remaining states (SA, VIC, WA, QLD, ACT)

POTENTIAL IMPACT

Increase the rates of annual diabetes eye examinations from the current national average of 20% to 48% resulting in additional 12,284 Aboriginal Australians receiving eye care each year

With sustained improvements similar this project achievements, across all States and Territories, there is potential to significantly improve national eye care outcomes and reduce rates of avoidable blindness and vision loss for Aboriginal Australians

Photography by: Dean Saffron

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DEDICATION AND COMMITMENT: WHO DO WE HAVE TO THANK?

We would like to acknowledge the dedication, commitment and passion of hundreds of community members, health workers, partners, participants, funders, supporters, and volunteers whose partnership has been integral to the success of this program.

Guided by our program participants



Supported by our implementing partners



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