BACKGROUNDER



L@@KOUTPROJECT

INTRODUCTION

This project relates to a trial of the provision of Ophthalmology outreach services at selected Aboriginal Community Controlled Organisations (ACCOs), specifically to facilitate greater access to Diabetic Retinopathy (DR) treatment for Aboriginal and Torres Strait Islander communities.

This initiative was developed following consultations with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO), ACCOs and referral pathway mapping. This work identified that many Aboriginal patients have to travel to Melbourne or other larger regional centres every four to six weeks for eye procedures associated with diabetes, macular degeneration and glaucoma. These eye conditions, if untreated, can lead to vision loss or blindness in patients.

BACKGROUND

There are 1.4 million people living in rural Victoria with some regions having limited access to eye services in particular to Ophthalmologists, Optometrists, and eye surgery.¹ In larger rural towns, the local GP and allied health services, such as Optometrists, provide most of the services necessary to identify clients at risk and, where possible, to provide local management of non-urgent cases. There are large pockets of Aboriginal and Torres Strait Islander communities living in rural and regional Victoria who have even less access to eye care services than the general population.

The complexities associated with eye healthcare for Aboriginal and Torres Strait Islanders arise from a myriad of issues across primary, secondary and tertiary settings. It is compounded by limited access to these services across the state with lengthy wait times for outpatient appointments and minimal bulk-billing DR treatment outside the tertiary setting.

Diabetes is one of the fastest growing chronic conditions in Australia, with rates eight times higher for Aboriginal and Torres Strait Islander people than other Australians.²

² Burrow S, Ride K (2016) Review of diabetes among Aboriginal and Torres Strait Islander people. Australian Indigenous HealthInfoNet.



Australian Bureau of Statistics (2019) Regional Population Growth, Australia, 2017-18, Canberra, retrieved on 12.04.2019 from www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/3218.0Main+Features12017-18?OpenDocument

Diabetes is the leading cause of preventable blindness in Australia, with Aboriginal and Torres Strait Islander people having significantly higher rates of diabetes-related eye disease, which can be caused by late diagnosis, poorly controlled and managed diabetes.³

RWAV is working with ACCOs, VACCHO and The Fred Hollows Foundation to strengthen outreach diabetic eye care services and is bringing a mobile treatment facility to Victoria, to increase access for Aboriginal and Torres Strait Islander communities most in need. RWAV's **Look Out** Project will utilise the Indigenous Diabetes Eye and Screening (IDEAS) Van to provide bulk billing screening and treatment for diabetic eye disease as part of this project.

RWAV's **Look Out** Project aims to raise much needed awareness about of the lack of available DR treatment across the state. It will work alongside current programs such as the DR Camera project by Brian Holden and the Australian College of Optometry and the Eye HealthPathways training, in partnership with the regional Primary Health Networks and the ACCOs. RWAV's **Look Out** project does not aim to replace any existing services but instead will enhance current service delivery and provide access to bulk billing ophthalmology services. RWAV's **Look Out** project will work with communities at a grassroots level to strengthen access at a local level whilst building sustainable pathways to Ophthalmology services.

SERVICE DELIVERY

RWAV's **Look Out** Project will service five Aboriginal and Torres Strait Islander communities at – Albury Wodonga Aboriginal Health Service, Albury, Moogji Aboriginal Cooperative, Orbost, IPC Health Wyndham Vale, Winda-Mara Aboriginal Cooperative, Heywood and Murray Valley Aboriginal Cooperative, Robinvale. The mobile treatment facility will stay at each site for one day with services delivered by a local Ophthalmologist, Orthoptist and an Optometrist. All medication and services are bulk-billed and free of charge for clients.

The project will be officially launched at each site on specific days in May 2019. The launch will give the community and local outreach service providers the opportunity to come together and learn how the mobile treatment facility will enhance and support local service delivery. The project launch days will include a formal opening with Welcome to Country, a lunch and eye checks for community members.

Service delivery will commence from July, with services at each location provided every two months by local Ophthalmologists, Orthoptists and an Optometrist. Clients identified as requiring cataract surgery will be referred into the Eye and Ear Surgical Support Service program for treatment.

The project will be evaluated by The Fred Hollows Foundation with the aim of garnering feedback from the community, identifying service delivery gaps and developing long-term sustainable models that will meet the community needs.

Razavi, H Burrow S, Trzesinski A. (2018) Review of eye health among Aboriginal and Torres Strait Islander people.

Australian Indigenous HealthBulletin 18(4).

