KEY ACTION AREA TWO: INCREASING EARLY DETECTION

Objective: Treatable eye conditions are detected early, so that interventions can be applied to preserve vision and prevent any further vision loss.

As the Framework states, since there are cost-effective treatments for many eye conditions that prevent further vision loss and blindness, early detection of eye disease is imperative. Early diagnosis is also important for those people with sight-threatening eye conditions for which no treatments currently exist, to enable important career, financial and lifestyle decisions to be made.

Australian Government

As outlined under Key Action Area One, the Department of Health and Ageing has funded a range of activities to raise public awareness of the importance of regular eye checks. Other initiatives to improve early detection of eye disease include measures to increase the capacity of the primary care workforce to detect eye disease and make appropriate referrals, particularly in regard to groups at particular risk of eye.

Development of telemedicine technology

The University of Western Australia has been allocated funding of $197,800 to develop affordable and intelligent telemedicine technology to increase the early detection of eye disease. The pilot project aims to build capacity amongst primary providers to identify vision loss, detect eye disease and refer appropriately.

Increasing early detection of glaucoma

Funding of $130,128 is being provided to the Royal Hobart Hospital under the Eye Health Demonstration Grants Program for the “Telemedicine Model to Prevent Blindness from Familial Glaucoma” project. The project aims to reduce glaucoma blindness by the early detection of undiagnosed glaucoma cases in high risk individuals. The project will identify all known people with glaucoma in Southern Tasmania and conduct clinical examinations of all first degree relatives who agree to participate in the study.

Glaucoma awareness

Funding of $75,300 is being provided to Glaucoma Australia under the Eye Health Demonstration Program for a Glaucoma Outreach Program in Northern Queensland and
Northern Territory. The Program seeks to reduce the incidence of avoidable blindness and vision loss through early detection and improved management of glaucoma.

Information sessions for the public promoting the importance of early detection in the management of glaucoma will be held in fourteen locations across rural and remote Northern Queensland and Northern Territory.

Increasing early detection of cataracts and diabetic retinopathy

Funding of $95,982 is being provided to the Western Australian Country Health Services Goldfields under the Eye Health Demonstration Program to pilot and evaluate a project aimed at increasing early detection of cataracts and retinopathy amongst people in rural and remote areas of the Goldfields, Western Australia.

The review and update of the Clinical Evidence Based Guidelines for the Management of Diabetic Retinopathy will assist practitioners in making decisions about the appropriate health care of patients with diabetes. Detecting diabetic eye disease is critically important, since there are well-developed and proven strategies to prevent visual loss. The review of the guidelines is expected to be finalised in June 2008.

Increasing early detection of eye disease amongst Aboriginal and Torres Strait Islander people

As mentioned in Key Action Area 1, increased screening is one component of the services that the states deliver through the trachoma control programs. Under Key Action Area 3, eye health screening is delivered through Aboriginal Community Controlled Health Services as part of comprehensive primary health care. Service Activity Reporting data shows 64 per cent of services provided eye disease screening in 2005-06 (latest available data).

Childhood Vision Screening

On 1 November 2005 a new optometry item was introduced onto the Medicare Benefits Schedule providing Medicare rebates for children’s vision assessments providing for additional detailed assessment and testing of children aged three to fourteen years inclusive, with one or more of the following conditions: amblyopia (lazy eye), strabismus (crossed eyes), and dysfunctions relating to vergences (the inward or outward turning of one or both eyes when focusing on an object).

Prior to this, optometrists were performing detailed tests on children with specific conditions as part of a normal comprehensive consultation. These conditions, if not properly addressed, can lead to poor vision and associated learning difficulties.
The new item was introduced to cover the additional expertise and clinical work involved in testing and will aid in the early detection of a number of eye conditions.

*Healthy Kids Check*

As part of its early childhood agenda, the Australian Government is introducing an MBS health assessment item for four year old children. The objective of the Healthy Kids Check, which will be introduced on 1 July 2008, will be to ensure that every four year old child in Australia has a basic health check to see if they are healthy, fit and ready to learn when they start school.

The Government will also provide funding to enable the Healthy Kids Check to be delivered through State/Territory government service provision arrangements. Negotiations are underway with all jurisdictions and implementation is anticipated early in 2008-09.

The Healthy Kids Check will include a basic physical assessment of the patient’s eyes and a discussion with the child’s parents or carer of any concerns they may have regarding their child’s eyesight. The tests that are offered will be of the kind that can be provided in a general practice setting by suitably qualified medical and health professionals (general practitioners and practice nurses).

Should any medical issues or conditions affecting the child’s vision be identified, the medical practitioners will make a referral to an optometrist or ophthalmologist, as appropriate.

*Northern Territory Emergency Response Child Health Checks (2007-08)*

The Northern Territory Emergency Response Child Health Checks (2007-08) included a vision test, and children identified with a vision abnormality were referred to an optometrist/ophthalmologist for follow-up care.

*Children’s Vision Demonstration Grant*

Funding of $150,000 is being provided to the Riverina Division of General Practice under the Eye Health Demonstration Grants to pilot, implement and evaluate a practice-led children’s vision screening program across the Division through professional development training and embedding screening into practice culture. General practitioners, practice nurses and community nurses will be trained in visual acuity screening. Screening will be implemented opportunistically within the practice setting. A practice change management framework will be implemented to engage and support visual screening opportunities in general practice and new referral processes will be trialled and evaluated.
**Vision Screening**

A weekly clinic for the Diabetic screening program is conducted for Outpatients at the Canberra Hospital.

In the childhood screening area, ACT Health Orthoptists provide a vision screening service for children from birth to six years if issues are raised following an initial Maternal and Child Health vision screen. Children to six years of age who have been referred by a Maternal and Child Health Nurse, school screening or a Child Health Medical Officer can attend the two clinics held each month. All Kindergarten students are offered School screening, with around 80% uptake and some 3,000 children screened annually.

Screening for people from an Aboriginal and Torres Strait Islander background is offered by the Winnunga Nimmityjah Aboriginal Health Services.

The Private group practice provides a well attended occasional series of lectures to optometrists on relevant topics such as early signs of glaucoma at the Canberra Eye Hospital.

**New South Wales**

**Personal Health Record**

The emphasis placed on eye health as part of the Personal Health Record (PHR) is one of the activities undertaken in NSW to increase early detection of eye disease.

The NSW child PHR is distributed to all families who give birth in NSW. Vision surveillance and vision screening is an important component of the PHR and will increase the early detection of childhood vision problems. Vision surveillance commences with the newborn health check and is recommended at health checks taking place at 1-4 weeks, 6-8 weeks, 6-8 months, 12 months, 18 months, 2 years and 3 years. Vision screening is recommended at the four year health check and will increase the detection of childhood vision problems not identified through vision surveillance.

**Statewide Eyesight Preschooler Screening (StEPS) Program**

The StEPS program is a new initiative by NSW Department of Health and will be implemented in the second half of 2008. The StEPS program is a population-based vision screening program for four-year-old children. By identifying and targeting all four-year-old children in NSW, the StEPS program will increase the detection of eye disease and vision problems. Detection and treatment of childhood vision problems in the preschool years significantly improves visual prognosis and children will have a much greater chance of normal vision being restored.

An outreach vision screening program has been introduced, in some local and rural areas addressing the non-English speaking members of the community.
Activities to increase early detection of eye disease include the collaboration of the Broken Hill Health Service with a local optician to perform field tests. The optician has a field test machine that is currently on trial. The Health Service and the optician are working together with a view to reducing the demand on the Health Service as well as reducing the waiting time for patients to have this procedure performed, which will promote early detection of eye disease.

In line with StEPS, the Dareton Primary Health Care Service carries out annual screenings of all four-year-old children, and school age (year 5/6) when requested by the school with parental permission, making referrals as required. In this Area Health Service, the Dubbo Community Health Centre conducts child health checks encompassing vision checks by child and family health nurses in line with the NSW Health Child Personal Health Record on infants and children at ages 1, 2, 3 and 4 years, including Aboriginal children.

**Northern Territory**

**NT Trachoma Program Coordinator**

With the assistance of Commonwealth funding for the ‘Trachoma Training and Implementation Program’ over 2006/2007 and 2007/2008, the NT has employed a Trachoma Program Coordinator for the NT, one of the aims of which is to improve trachoma detection throughout the NT.

Trachoma training sessions have been conducted in both the Top End and Central Australian over the last year, increasing the number of staff proficient at diagnosing and managing trachoma.

Co-ordination of trachoma screening throughout the NT is working to increase the number of communities (and children) identified with trachoma, allowing appropriate and early treatment, reducing the risk of progression of the disease in these individuals, and reducing the risk of transmission of trachoma to others in the communities.

**Queensland**

**School based vision screening**

School Health Programs and introduction of School Health Nurses have coordinated detection programs in Primary and Secondary schools. In Year One, all primary school students are screened for sight and hearing with any finding outside the “normal” range referred to the child’s GP for further investigation. This program is also extended on an ad
hoc basis to any teacher / parent or child that has concerns with the sight of a child from Prep to Year 12.

**South Australia**

A pilot in the southern suburbs brought together a group of inter-related health disciplines in an attempt to find an effective collaborative model of care for known or at-risk diabetes sufferers. The aim was to provide more effective screening and ongoing monitoring in the community and in so doing, detect diabetes in the early stages. The model included GPs, optometrists, nurses and podiatrists.

Central Northern Adelaide Health Service increased their systematic multi-disciplinary assessment and treatment of Aboriginal clients with diabetes including referrals to eye specialists. Packages of care provided for Aboriginal clients with diabetes has included funding for vision / eye assessment as well as pathways created for culturally appropriate referral.

**Children’s Vision Project**

CanDo4Kids and associated stakeholders (including OAA SA) have secured a National Eye Health Demonstration Grant to pilot a vision issue detection and treatment model in a new Children’s Centre. Much work has been done before on when children should be screened and what the screening should include. What this pilot aims to do is to take it one step further and identify what is preventing parents of children from seeking the necessary screening and following up after a screen identifies an issue.

**Optometrists Association Children’s Vision Campaign**

The Optometrists Association implemented its Children’s Vision Campaign across all schools in SA. For several years, this has included all primary schools, but in 2007 it was extended to include secondary schools. Each school is sent a pack of educational information for teachers and parents on the impact of poor vision on learning, the likelihood of poor vision and what are tell tale signs of poor vision. Editorial is also provided for school newsletters and an offer is made for an optometrist to visit the school and present a talk to parents and teachers.

**Orthoptic Awareness Week**

Orthoptic Awareness Week is held yearly in March. Campaigns aim to raise awareness of the profession and eye conditions. The theme for 2008 was Children's Eye Health and posters were displayed in hospital eye clinic waiting areas.

**Orthoptic Outreach Clinics**
There is involvement by the Women’s and Child Health orthoptists in Orthoptic Outreach Clinics. During these clinics, the Orthoptists screen children with suspected visual problems. Referral is by Child and Youth Health nurses, Medical Officers, Child Development Unit, school teachers and self referrals from parents.

**Referral pathways**

In 2006-2007 state-wide discussions were held between Children, Youth and Women’s Health Service Ophthalmology and Orthoptic services, the Optometrist Association and the Royal Australian College of General Practitioners to review vision assessment, screening and referral pathways. This provided collaboration between eye health services. As a result of improved triage processes optometrists, orthoptists and ophthalmologists receive appropriate and timely referrals.

The outcomes from these state-wide discussions recommended improvement of vision screening by the introduction of the corneal light reflex and cover test to the existing 4 – 5 year health check (which currently consists of distance vision acuity only). Training has been conducted and a pilot is planned for 2008.

In addition, the ‘Blue Book’ issued to new mothers now includes up-to-date advice and information on their baby’s eyes and children’s vision.

A variety of eye health issues in the older generation can be managed effectively if detected early enough e.g. glaucoma, resulting in better vision for longer. In SA, Guide Dogs SA / NT and other partners secured a national Eye Health Demonstration Grant to pilot a model for effectively getting the target group to an optometrist regularly.

‘Peelies Bus’

The Riverland Regional Health Service operate the Peelies bus (Peelies is the Ngurrindjerri word for eyes). The program provides health checks in the region originally centred around eye health.

**Tasmania**

As mentioned under the Australian Government Initiatives the Royal Hobart Hospital is housing the Eye Health Demonstration Grants Program for the “Telemedicine Model to Prevent Blindness from Familial Glaucoma” project.

This project builds on 15 years of work with the Glaucoma Inheritance Study in Tasmania, where families have been alerted to the heritable nature of glaucoma and DNA testing for myocilin mutations has been conducted on 1500 glaucoma cases and several thousand family members examined for glaucoma. This is helping to increasing early detection of glaucoma.
Victoria

The Vision Initiative

One of the objectives of the Vision Initiative (TVI) is to “Communicate the importance of regular eye tests to prevent and treat eye disease and vision loss, particularly to those over 40 and in other at-risk groups”. ‘Save Your Sight’ is the key communication campaign of TVI, promoting the importance of regular eye health checks to prevent vision loss.

World Sight Day 2007, held on 11 October 2007 was an initiative of TVI. The theme What’s your vision for children? focussed on the importance of parental action and early vision screening for children. Nine of Vision 2020 Australia’s members participated in Victoria, generating 44 media mentions. Activities included conducting a general eye health clinic, book launch and the launch of site-specific changes designed to make the hospital experience less daunting for children.

Diabetes Self-Management Program

The Diabetes Self-Management Program is funded by Primary Health. This initiative supports the role of the General Practitioner in encouraging their clients with type 2 diabetes to have regular comprehensive eye health examinations and an eye examination for retinopathy by an eye specialist/ophthalmologist or experienced optometrist, as part of the ongoing client monitoring in an integrated approach to client management.

Western Australia

WA Draft Eye Health Services Development Plan

The Draft WA Eye Health Services Development Plan includes a range of recommendations to enhance coordination of services. Key priorities are to engage general practitioners and to seek to include assessments by optometrists in detecting emergent eye conditions have been outlined. These priorities are being included in the development of the WA Primary Care Strategy and are included in the current e-Health implementation framework.

Model of Care for Diabetes

Developed by the Endocrine Health Network the model of care emphases early and regular assessment of complications of diabetes in the community based model. Care pathways are being developed as part of the implementation of models of care starting currently.

Remotely acquired retinal imaging for early detection.
A research project funded in 2007 sought to provide clear evidence base for outreach of retinal image detection and review by other health providers. A report is expected shortly on the clinical and health economic evaluation of this important tool identified as a priority in the WA Eye Health Services Development Plan. If effective this approach to assessment of retinal disease will help in the early identification and intervention in emerging eye health problems in rural and remote communities and will underpin extension of remote and telehealth assessment of eye conditions.

Kalgoorlie Broadband project

WA Health is supporting the ongoing development of the integrated broadband linked network in Kalgoorlie. Management of retinal images and accelerated sharing of reviews and assessment of eye health in patients with chronic diseases has been included in the project.

Rural health initiatives sustained

Management of Trachoma Control programs is being passed to the State from the Commonwealth. Full implementation plan has been developed and addresses early assessment, workforce training and development and enhanced data management. Work is progressing well. Partnerships with Aboriginal Controlled Community Health providers have been targeted key health promotion campaigns directed and improved personal hygiene. Associated planning with the Department of Housing and Works and WA Country Health Services to improve the provision of appropriate housing and hygiene education are also being progressed. These initiatives are both about early detection and improving key health promotion against this eminently treatable cause of blindness.