

This checklist has been developed as a tool to assist Hospitals participating in regional activities to close the gap in Indigenous eye health.

It identifies key service elements and features that may assist Hospitals deliver culturally responsive eye health services to Indigenous patients. The checklist is also a reference for regional Indigenous eye health stakeholder groups working to Close the Gap for Vision.

Element	Hospitals	Complete
Clinical Services	1.1 Waiting lists for eye outpatient assessments and surgery are reviewed and Indigenous patients are identified and monitored.	<input type="checkbox"/>
	1.2 Facility provides Ophthalmology clinical services at no direct cost to Indigenous patients...please specify days/times.	<input type="checkbox"/>
	1.3 Facility provides Ophthalmology surgery at no direct cost to Indigenous patients...please specify days/times.	<input type="checkbox"/>
	1.4 Appointment reminder and re-scheduling systems in place. (Respond to missed appointment and ensure that Indigenous patients do not go to bottom of waiting list)	<input type="checkbox"/>
	1.5 Referring practitioners or clinics are alerted if patient misses appointments	<input type="checkbox"/>
	1.6 Continuous quality improvement processes include eye health indicators and Indigenous patient support.	<input type="checkbox"/>
	1.7 Formal agreements with eye care providers through: VOS <input type="checkbox"/> RHOF <input type="checkbox"/> Other <input type="checkbox"/>	<input type="checkbox"/>
Patient Support	2.1 Patient pathway diagrams about diabetes eye care, glasses and cataract surgery are available and, in remote areas, are translated into Aboriginal languages/formats.	<input type="checkbox"/>
	2.2 Processes in place for the Aboriginal hospital liaison officer, and/or patient care co-ordinator to be informed when Indigenous patients are admitted.	<input type="checkbox"/>
	2.3 The patient care co-ordinator appointed to work with Indigenous patients has clear responsibilities that include linking community support and referral processes with hospital, outpatients, clinics, surgery or aftercare processes.	<input type="checkbox"/>
	2.4 Patient support elements for Indigenous patients are recorded in a written care plan. E.g. interpreting, transport, accommodation, family/ kinship and cultural responsibilities, medication and treatment information.	<input type="checkbox"/>
	2.5 Patient eye health treatment plan made between the Indigenous patient and treating staff and placed on patient file. This is tracked and regularly reviewed.	<input type="checkbox"/>
	2.6 Patient and their family are provided with written contact details of the clinical staff and care co-ordinator or key support staff with responsibilities for their eye care.	<input type="checkbox"/>
	2.7 Patient and their family offered information about eye examination procedure and purpose in a range of formats-pamphlet, audio, DVD, translated.	<input type="checkbox"/>
	2.8 Discharge plan recorded on patient file and shared appropriately with referral agencies including Aboriginal health services.	<input type="checkbox"/>
	2.9 Quantification of patient care co-ordination activities, time and resources (hospital reporting package).	<input type="checkbox"/>

Element	Hospitals	Complete
Cultural Safety	3.1 Culturally welcoming signs and symbols are visible in facility. E.g. plaque acknowledging traditional owners, flags, local artwork. 3.2 Cultural safety training is provided to hospital staff on a regular basis. 3.3 Visiting specialists are required to demonstrate that they have completed cultural safety training. 3.4 Referral pathway developed and shared with Aboriginal Medical Services, other local Indigenous organisations and Primary Health Networks. 3.5 Statement of Intent to Close the Gap in Indigenous health or similar signed by Hospital. 3.6 Inclusive governance and consultation processes, such as a hospital Aboriginal advisory committee or similar, are in place. 3.7 Hospital has, or is working towards, an active Aboriginal health plan or strategy, an Aboriginal employment plan, and a reconciliation action plan.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Regional Eye Health Activities	4.1 Hospital representative participates on the regional Indigenous eye health stakeholder group to contribute to the regional eye health plan. 4.2 Hospital representative will assist to identify hospital needs such as clinical equipment, clinician time, and patient support resources. 4.3 Hospital willing to share health planning and monitoring data with the regional Indigenous eye health stakeholder group. E.g. information about clinical services, care co-ordination, referral processes and CQI. 4.4 Hospital will take action, and provide advice on, how to address issues identified in the gap and needs analysis that is related to hospital systems.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

*Please refer to the 'Regional Implementation How-to-guide' document for further information about this, and other regional implementation tools.