

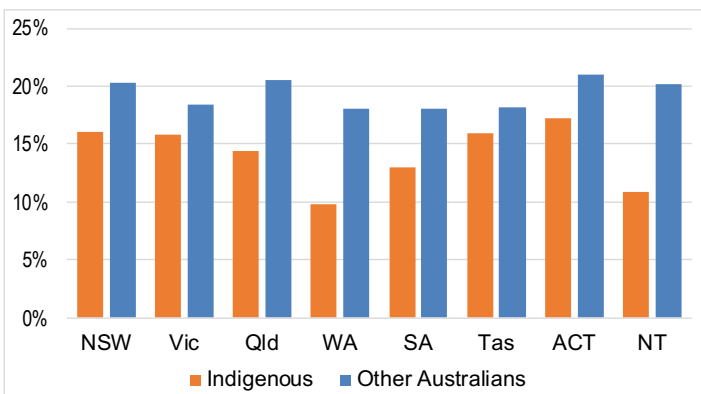
Indigenous Eye Health Measures - Jurisdictional Snapshot 2018

AUSTRALIAN CAPITAL TERRITORY

A range of measures relating to Indigenous eye health are available at jurisdictional and Primary Health Network level in the Australian Institute of Health and Welfare report, *Indigenous eye health measures 2017* (AIHW, 2018).¹

These measures cover the eye care pathway – from identification of problems to eye examinations and treatment – and provide a way to identify gaps and improvements along the pathway at National, State and regional levels.

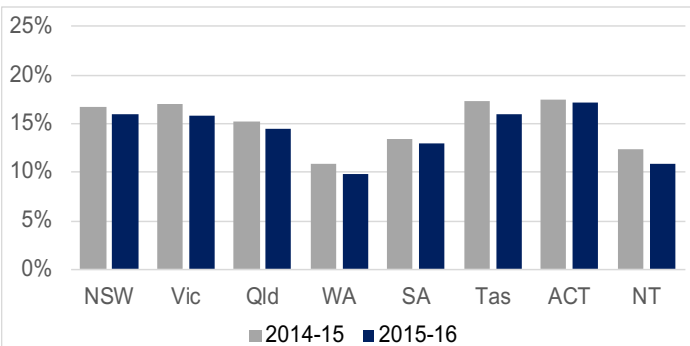
1. Eye Exams for Indigenous adults - % of Population by cohort



In 2015-16, **17.2%** of Indigenous adults in the ACT had an eye exam, compared to **21%** of non-Indigenous Australians in that jurisdiction (**3.8% gap**).

Access to regular eye exams should be supported to avoid preventable blindness and vision loss

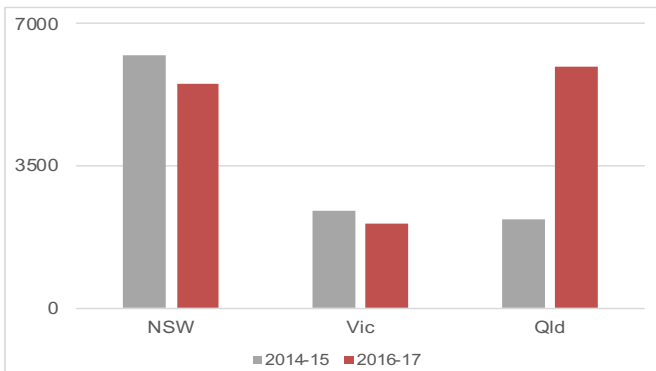
2. Eye Exams Over Time - % of Indigenous Population



There was a slight **decrease** in the % of the Indigenous population who had an eye exam in the ACT, compared to the previous year (17.5%)

Regular eye examinations help to identify issues early and support access to treatment if required

3. Glasses dispensed to Indigenous people under jurisdictional programs (number)

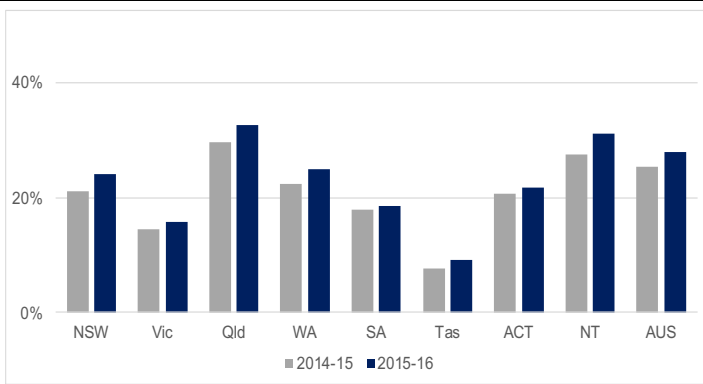


The **number of spectacles** dispensed to Indigenous people under the state program is **not available** for the ACT

Providing data on access to affordable glasses gives an indication of how well equity issues are being addressed for refractive error, which is a major cause of vision loss

¹ Online report available at <https://www.aihw.gov.au/reports/indigenous-australians/indigenous-eye-health-measures-2017/contents/summary>

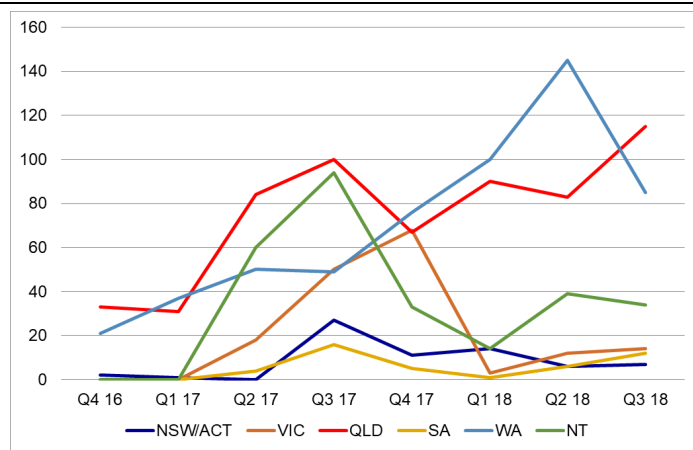
4. MBS 715 Aboriginal and Torres Strait Islander Health Assessments - % of Population



In 2015-16, **22%** of the Indigenous population received an MBS 715 Health Assessment in the ACT, below the national average of **28%**

Increased eye health screening in primary care, as part of a health check, supports earlier identification of issues and referral if required

5. MBS 12325 Non-Mydriatic Retinal Screening for Indigenous patients (number)²

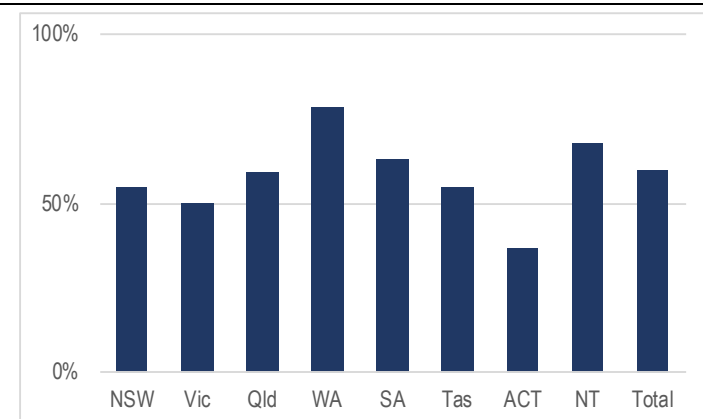


Between November 2016 and September 2018, the total number of claims made for MBS item 12325 in NSW and the ACT combined was **68 claims**

This represents a **small %** of the Indigenous population with diabetes

Use of retinal cameras in ACCHOs can support annual screening for Aboriginal people with diabetes

6. Proportion of Need Met for Cataract Surgery (%)



The number of cataract surgeries provided to Indigenous patients in the ACT met **36%** of the estimated population-based need in 2014-2016

This was the **lowest** of all jurisdictions.

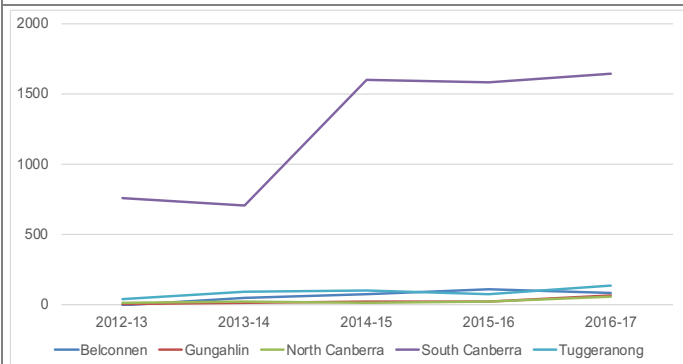
Despite having higher rates of blinding cataract nationally, Indigenous Australians have lower rates of surgery. Increased access to cataract surgery is required to address this gap.

² Data available via MBS statistics at http://medicarestatistics.humanservices.gov.au/statistics/mbs_item.jsp

Primary Health Network Snapshot

Limited data is available at PHN level for the ACT

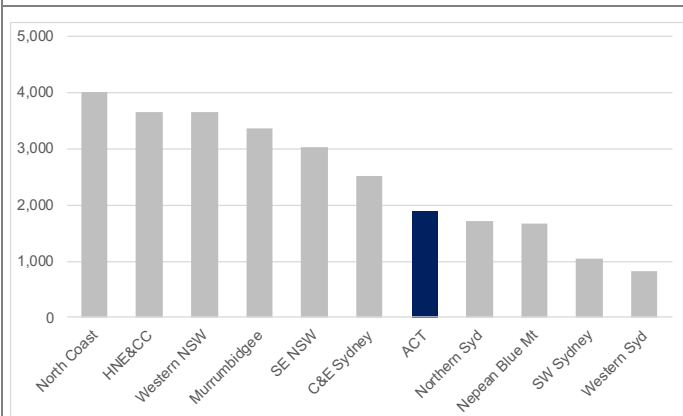
7. MBS 715 Aboriginal and Torres Strait Islander Health Assessments (number)³



The number of MBS 715 Health Check claims **increased** overall in ACT PHN region between 2012-13 to 2016-17. Most claims were in the South Canberra SA3.

Including eye exams and visual acuity should be encouraged as a key part of the Health Assessment

8. Hospitalisation Rates for Indigenous Australians for cataract surgery (per million)*



The cataract surgery hospitalisation rate for Indigenous patients was **1,883 per million** in the ACT PHN region in 2014-16.

Nationally, Western Qld PHN had the **highest rate** (5,900 per million) and Western Sydney PHN had the **lowest** (825 per million).

Increasing access to cataract surgery for Indigenous Australians can help reduce rates of avoidable blindness

*Data presented for NSW and ACT PHNs only

How PHNs can contribute to improving eye health outcomes for Indigenous Australians

Increase eye health awareness and skills in primary care and community settings

- Education and training for primary care providers (including Integrated Team Care program staff)
- Distribute resources/information, newsletters/social media (e.g. World Sight Day)
- HealthPathways content and implementation
- Health Promotion activities for community – e.g. Check Today, See Tomorrow resources

Include eye care as part of comprehensive diabetes care

- ITC support to ensure annual eye exam for all Indigenous patients with diabetes
- Quality improvement focus (data/diabetes)
- Education and training to include eye health
- Distribute resources/information, newsletters/social media (e.g. Diabetes Week/Days)
- HealthPathways content and implementation
- Health Promotion resources and messages - e.g. Check Today, See Tomorrow resources
- Encourage/support uptake and use of DRS cameras

Increase MBS 715 Aboriginal and Torres Strait Islander Health Assessment rates

- Objective of ITC program
- Promote visual acuity and eye exam elements of MBS 715 assessments

Improve cultural competency across health care services and improve identification of Indigenous status

- Core to ITC program
- Work with local stakeholder groups to improve cultural competency and identification of Indigenous status at all points in the eye care pathway

Support system-change and improve coordination between primary and tertiary (specialist) settings

- ITC program objective and core PHN role
- Participate in eye care stakeholder groups
- Contribute to population health data analysis
- Work with jurisdictional fund-holders to improve coordination and access to funded services

Snapshot report compiled by Indigenous Eye Health, The University of Melbourne, November 2018

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³³http://www.health.gov.au/internet/main/publishing.nsf/Content/MBS_Data_by_ABS_SA3 (MBS data by PHN at SA3 level)