Launch of Annual Update on the Implementation of the Roadmap to Close the Gap for Vision

On Melbourne Cup day in Hobart at the 45th RANZCO Congress, the 2013 Annual Update on the Implementation of the Roadmap to Close the Gap for Vision was launched by Lisa Briggs, CEO of NACCHO and Dr Stephen Best, President of RANZCO. Hugh Taylor emphasised that we are collectively making progress to close the gap for vision. RANZCO was also an opportunity for leaders in Indigenous eye care to come together to present a national perspective. Presenters at the symposium later that day spoke about key challenges in Indigenous eye health in the urban and rural context and how they are being overcome with different models.

Once again it was highlighted that vision loss accounts for 11% of the gap in health and most importantly this gap is amenable to treatment. A pair of glasses can improve a person’s quality of life and cataract surgery can restore sight overnight. Timely access to laser treatment for those who have diabetic retinopathy can prevent 98% of the vision loss from diabetes. With improved hygiene, antibiotics and surgery, blindness from trachoma can be eliminated.

Twitter was abuzz with tweets and images to support the launch and the RANZCO Congress.

Trachoma Rates

The findings of the 2012 Australian Trachoma Surveillance Report were released in August this year. The figures are terrific. In screened communities, trachoma in five to nine year olds has dropped from 14% in 2009 to 4% in 2012. However, hot spots still remain. Only 58% of screened communities met the clean face target in children aged 5-9 years. It is crucial for everyone to keep up the good work to ensure we can eliminate trachoma from Australia.

Australia’s progress to eliminate trachoma is reported through annual surveillance reports prepared by the Kirby Institute, University of New South Wales, with data provided by state and territory governments.


Trachoma Story Kits and Additional Resources

The new Trachoma Story Kits will have reached the National Mailing Centre in Canberra by mid December 2013. 500 Trachoma Story Kits, a limited number of Trachoma Resource DVD’s, Milpa the Trachoma Goanna Temporary Tattoos, A2 Community Flipcharts and A4/A3 sized Footy Posters can be ordered online at www.iehu.unimelb.edu.au/the_trachoma_story_kit/ordering

With the support of the Department of Health, the resources and freight are now free of charge which is most welcome for programs in very remote settings.

The new DVD included with the Kit demonstrates just how widespread the reach and uptake of the Trachoma Story Kit resources has been in three years. The 2013 DVD includes the clinical education tools and the interactive Trachoma Grading Tool as well as school and community health promotion materials.

There are 40 additional items with TV commercials and jingles for kids, women’s radio and dozens of community songs and initiatives for schools and family centres. Finally there about 20 examples of community initiatives and adaptations of the Kit content to enable local programs to use the materials for local use in local language with local people.
Hygiene Football Clinics with the Demons

Three football clinics were held in July with Melbourne Football Club (MFC) at Santa Teresa, Tennant Creek and before the game at TIO stadium in Darwin. Wild Geese Construction Company recently built a new childcare centre at Santa Teresa community and wanted to celebrate their partnership with MFC with a footy clinic. Support from the Alice Springs trachoma and holistic hygiene programs helped to make the Santa Teresa event a success.

The Tennant Creek Trachoma Elimination Footy Clinic had an eventful start with an emergency landing of the eight seat plane in Alice Springs. The emergency landing with the Melbourne Footy players on board created media coverage of the trachoma elimination campaign.


Mr Peter Jackson the new CEO of Melbourne Football Club is supportive of the on-going relationship between MFC and the elimination of trachoma and has offered the 2014 fixture as an opportunity to host trachoma elimination footy clinics. In 2014 MFC will play a pre-season match in Alice Springs against Geelong. During Indigenous Round 11 MFC will play against Port Adelaide and the contest will be against Fremantle in Round 16 at TIO Stadium, which will see the Club play in Darwin for the fifth consecutive season.

The Indigenous Eye Health Unit and MFC have co-signed a formal Memorandum of Understanding and the IEHU now enjoys an official presence on MFC website community link page.

Newly appointed MFC Trachoma Elimination Ambassador Dom Barry will feature in new health promotion and social marketing resources such as posters and Radio CSA’s in 2014. We congratulate Dom and Aaron on being selected to represent the Indigenous All-Stars in the recent trip to Ireland.
The Ngumbin Reference Group, Katherine West Health Board, Northern Territory

Fiona Lange recently reported back to the Ngumbin Reference Group who had spent over a year carefully guiding the development of the Trachoma Story Kits in 2009-2010.

Eight current and past Aboriginal Health Workers representing communities in over 260,000 sq km south-west of Katherine were very pleased their work resulted in a resource made ‘good way’ that is now endorsed by the Department of Health.

The group was especially delighted about the widespread reach and community adaptations of the Trachoma Story Kits.

Australian Medicare Local Alliance Conference

Mitchell Anjou attended the Australian Medicare Locals conference on the Gold Coast in November. Medicare Locals are at a key stage in development and engagement with them is important to ensure eye health is on their agenda. The regional delivery approach of the Roadmap to Close the Gap for Vision fits well with the way Medicare Locals operate. The “Eye Care Services Calculator” was a point of interest as a simple way to assess the eye care needs and workforce required for any community. This is now available on the IEHU website www.iehu.unimelb.edu.au

Queen Elizabeth Diamond Jubilee Trust

Professor Taylor has been appointed to the Global Expert Advisory Committee Panel. One of the objectives of the Diamond Jubilee Trust is a Commonwealth wide commitment to eliminate trachoma with support to be provided to Australia for health promotion and social marketing activities.

Diabetic Retinopathy Grading Online Tool

An online diabetic retinopathy grading course has been developed by Robyn Tapp. The course provides detailed information on the clinical grading, diagnosis and referral for diabetic retinopathy, to encourage timely treatment. The course provides practice grading sessions in identifying the pathology that makes up diabetic retinopathy, the stages of diabetic retinopathy and referrals. There is a competency-based assessment at the end of the course. The online diabetic retinopathy grading course is free of charge and available online at http://drgrading.iehu.unimelb.edu.au/cera/index.asp
National Aboriginal and Torres Strait Islander Environmental Health Conference, Adelaide.

The National Aboriginal and Torres Strait Islander Environmental Health Conference is held every two years and where the F and E of the SAFE strategy get on the agenda.

Fiona Lange attended again this year with about 20 trachoma program staff from around Australia. Down to earth practical presentations and discussions were held and best-practice showcased to improve environmental health and living conditions for Indigenous remote, regional and urban communities.

Reference to trachoma increased from three to ten times since the last conference and face washing is included in many more holistic health and hygiene programs. Collaborations across programs and disciplines are growing and there was real excitement as many creative and engaging ideas were shared.

More Local Trachoma Initiatives

Local community initiatives based on the Trachoma Story Kits have come to life in dozens of communities in the NT. The personal hygiene talking poster combines nose blowing, hand washing, face washing and not sharing towels. This will be rolled out in ten communities and in five languages. The Trachoma Story in Eastern Arrente language by Hazel Presley of Ti Tree was the work of 27 individuals and six organisations.

Mapping ICTC International of Collation of trachoma control

A fascinating project in Africa is the mass trachoma screening in a number of countries undertaken in remote areas that are difficult to access. Using smartphones, data is collected and uploaded daily to ensure speedy transmission of data compared with the old fashioned paper collection and delayed data entry. This mapping exercise is providing a real time picture of the rates of trachoma. Funded by the UK Department for International Development, it is an excellent use of technology to aid the world push for the elimination of trachoma by 2020.

Melbourne Award – Professor Hugh R Taylor AC

Hugh Taylor has recently been recognised in the 2013 Melbourne Awards for his more than 30 year service to eye care and the community. The award was for Contribution to the Community by an Individual.

Regional Implementation

Through our collaboration and support from the Commonwealth Department of Health, there is progress on the regional implementation of the Roadmap in nine regions across the country. In Victoria, the regions are Barwon South-West, Loddon Mallee and South East Melbourne. These regions are currently planning for their health needs as part of the’ Koolin Balit (Victorian Government strategic directions for Aboriginal health 2012-2022) and so this is an important time to be working together to ensure eye health is part of regional health planning.
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New Requirements for Primary Health Care Eye Checks

From 1 May 2013, Medicare Benefits Schedule Item 715 Aboriginal and Torres Strait Islander Adult Health Assessment guidelines were amended to include requirements for vision and eye checks for adults and older persons. The children's health assessments also include vision and eye checks. More information can be found on the MBS online website www.mbsonline.gov.au/

In Aboriginal Health Services eye checks can be performed by practice staff including nurses and Aboriginal health workers. Implementation of these guidelines will increase the identification of people with vision and eye problems in primary health care settings. These changes will improve access to eye care, prevent unnecessary vision loss and blindness and will contribute to Close the Gap for Vision.

Basic eye checks should include asking the patient about history of vision and eye problems; conducting a basic check of vision or visual acuity for both near and distance vision; conducting an eye check including ensuring all patients with diabetes have a retinal exam each year, and referral for any vision or eye problems identified. This basic eye check approach has been developed in consultation with the eye care sector, the Aboriginal community controlled health sector and primary health care services.

What to Check

...Vision and eye examinations in MBS Aboriginal and Torres Strait Islander health assessments...

1. Problem with vision or eye?
2. Visual acuity (near and distant)
3. People with diabetes require annual retinal exam
4. Trichiasis

Diabetes Pathway

Out of the 42 recommendations to government and the health sectors that are outlined in the Roadmap to Close the Gap for Vision, 37 recommendations have relevance to the pathway of care for people with diabetes. Recent work has identified that 75% of people who need eye exams each year have diabetes.

Donors

The Indigenous Eye Health Unit would like to thank and acknowledge our generous donors; The Harold Mitchell Foundation, The Ian Potter Foundation, Mr Greg Poche AO, The University of Melbourne, A/Prof David Middleton, Mr Peter Anastasiou, Mr Rob Bowen, Dr Vera Bowen, Mr Noel Andresen, Dr Mark & Alla Medownick, Gandel Philanthropy, CBM Australia, The Cybec Foundation, The Aspen Foundation and “K” Line Logistics. Your support is very much appreciated. Funding for work on the Implementation of the Roadmap to Close the Gap for Vision has been provided by the Department of Health from 2013 – 2014.

IEHU Advisory Board

Thank you to our Advisory Board led by Professor Terry Nolan as Chair, Professor Kerry Arabena, Professor Glenn Bowes, Mr Trevor Buzzacott, Ms Stephanie Copus-Campbell, Mr Vedran Drakulic, Professor John Funder AO, Mrs Janet Hirst, Hon Dr Barry Jones AO, Ms Jilpia Jones, Professor Hugh Taylor AC, Ms Jan Thomas, Mr James van Smeerdijk and Professor Michael Wooldridge.

We are extremely grateful for the contribution and support from Associate Professor David Middleton and Mr Peter Anastasiou who retired from the Advisory Board in October but still remain key supporters.

Thank You

We would also like to thank our stakeholders and partners. Our work would not be possible without your active engagement. We wish you a happy and safe festive season and we look forward to working with you in 2014.