

EMBEDDING EYE HEALTH PREVENTATIVE CARE INTO PRIMARY CARE PILOT PROJECT SUMMARY OF RESULTS



Between March and October 2023, 46 general practices from five Victorian PHN regions (Eastern Melbourne PHN, Gippsland PHN, Murray PHN, North Western Melbourne PHN and Western Victoria PHN) participated in a pilot quality improvement project to embed eye health into their patient care systems and practices. A long-term aim of the project was to increase rates of eye screening and early detection of eye disease for at-risk groups in Victoria, to reduce the prevalence of avoidable blindness and vision loss.











Key results

Referrals

A total of 3599 referrals were made to eyecare providers by the 46 participating practices.

Figure 1. Total referrals made to eyecare providers by practices in each PHN region

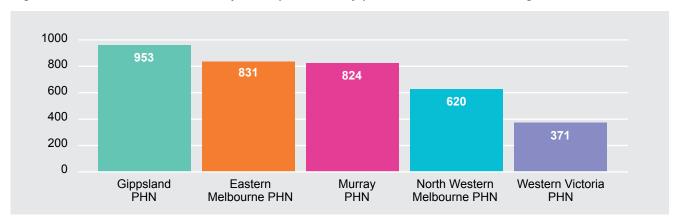
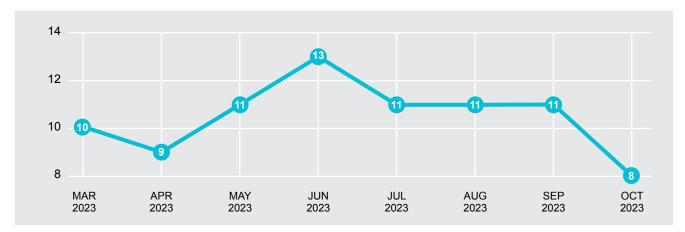


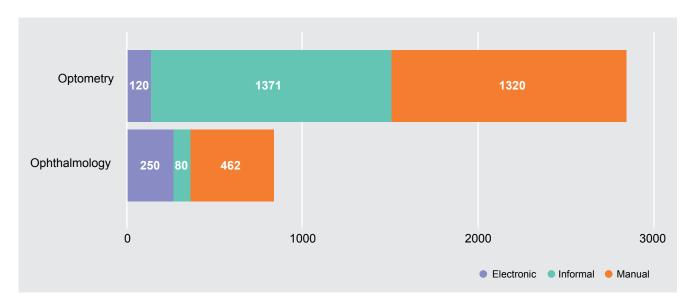
Figure 2. Average number of referrals made per practice each month



Seventy-eight per cent of the total referrals made were to optometry services, 22 per cent to ophthalmology (three referrals were made to both optometry and ophthalmology).

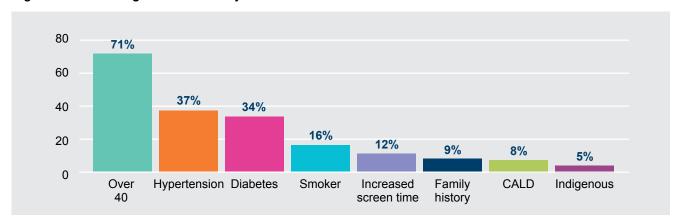
Informal methods of referral included verbal and written referrals that were handed to the patient, with manual referrals including fax or email to the provider. Referral to optometry was most likely to be completed via informal methods and electronic referral (i.e. via secure messaging) was more likely to be used for ophthalmology.

Figure 3. Method and recipient of referrals



The most common risk factors for patients being referred to an eye care provider were being over 40, having hypertension or diabetes.

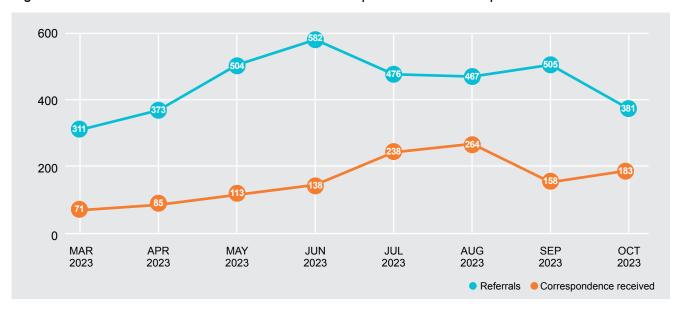
Figure 4: Percentage of referrals by risk factor



Referral outcomes

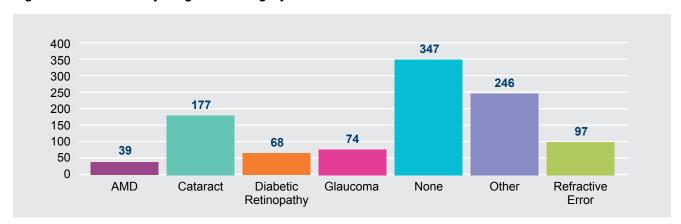
Correspondence was received from the eye care provider for 1255 of the referrals (35%).

Figure 5: Number of referrals versus number of correspondence received per month



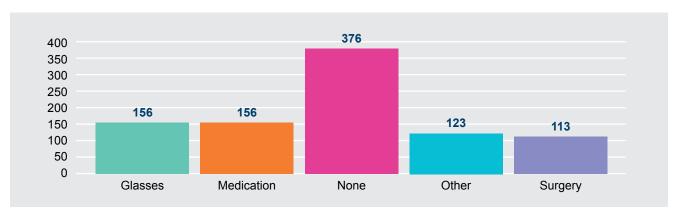
The most commonly reported referral outcome was "none" (i.e. no significant finding). The "other" category included diagnoses such as dry eye disease, eye infection and allergic eye disease.

Figure 6: Outcomes by diagnosis category



Where a treatment was started or recommended by the eye care provider, medication and glasses were most commonly prescribed, followed by the category "Other" which included the treatment of underlying systemic condition, visual aid other than glasses or lifestyle changes.

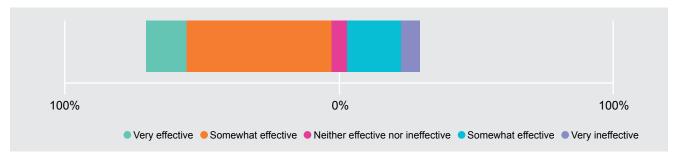
Figure 7. Outcomes by treatment category



Feedback from practices

Practices were asked to rate the effectiveness of the project in embedding eye care into their practice systems. Sixty-seven per cent of practices rated the project as very or somewhat effective.

Figure 8. Practice rating of project effectiveness



The barriers to implementing the project were noted as manual data collection, time constraints, receiving correspondence back from optometry and software limitations for tracking eye health.

The top three most effective tools/ resources rated by practices to support them throughout the project were:

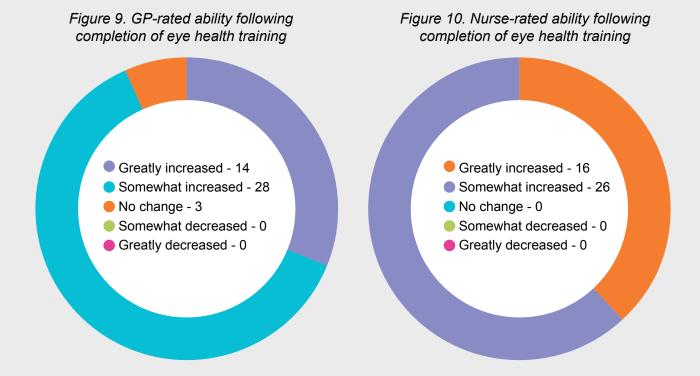
- 1. Support provided by the PHN project staff
- 2. Vision 2020 Australia training modules
- 3. Orientation and activities package.

Vision 2020 Australia eye health training

- Vision 2020 Australia developed a range of learning activities to support the project including four online modules and six webinars
- 114 health professionals and practice staff from participating practices completed at least one of the online training modules.

Key project outcomes

- 45 of the 46 participating practices had at least one GP and 42 had a least one practice nurse included in their project team
- 93 per cent of GPs and 100 per cent of practice nurses rated their ability to identify, assess, manage and refer patients with or at-risk of eye disease as somewhat or greatly increased as a result of their participation in the online training and webinars.



- 89 per cent of practices reported that they implemented a new system and/or made changes to their current systems or workflows that supported the identification and/or referral of patients at-risk of eye disease
- 80 per cent routinely ask new patients when their last eye check was completed (compared to 26 per cent at the start of the project)
- 72 per cent of practices now include eye screening as part of all health assessment templates and the remaining 28 per cent for some health assessment templates (in particular the over 75, 45-49, 40-49 at risk of T2DM, and Aboriginal and Torres Strait Islander Peoples). This compares to 49 per cent and 32 per cent respectively at the start of the project)
- 94 per cent of practices now include eye screening as part of their CDM plans
- 81 per cent now refer more to optometry (19 per cent reported no change)
- 58 per cent now receive correspondence back from optometry more often
- A specific optometry referral template was tested and adopted by many practices to help streamline and standardise the referral process
- Clinical software and data extraction tools were used to help identify patients with risk factors for eye disease and add a reminder in the patient file to ask "when was your last eye check"

Next steps

The aggregated data for this project has been submitted to the Victorian Department of Health for evaluation. A full report will be available in April 2024.

The Vision 2020 Australia training modules and webinar recordings remain available for all Victorian health professionals and can be accessed freely at: Register - Vision 2020 Australia Training Platform - Online Training Portal (kineoportal.com.au)









