The important role of the regional eye health coordinator in NSW

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Aims: In 1998, the Commonwealth Government and NACCHO agreed that Aboriginal people were more likely to seek eye care within Aboriginal Community Controlled Health Services (ACCHSs). The NSW Aboriginal Eye Care Program was rolled out, in partnership, by the state’s peak body for ACCHSs and a non-government organisation who provide optometry services. The Commonwealth-funded equipment for eye clinics and regional eye health coordinator (REHC) positions within seven ACCHSs within NSW (and similar positions in the other states and territories). This presentation aims to showcase the role of the REHC in coordinating and facilitating access to eye care for Aboriginal people across NSW.

Methods: The roles of two NSW REHCs were outlined, and the common job tasks listed. Key factors contributing to success of these programs were identified.

Relevance: Appropriate and accessible eye care programs for Aboriginal Australians are important, given the largely preventable rates of visual impairment and blindness. Eye care within ACCHSs ensures services are accessible. REHCs play a central role in enabling access for Aboriginal people, by:

- facilitating outreach services
- engaging ophthalmologist that bulk bill
- ensuring rural and remote areas receive an equitable level of services
- networking to enable the eye health program to grow.

Results: Key roles of REHCs in NSW include:

- vision screening for Aboriginal people (including school screenings)
- network with partners and communities to ensure culturally appropriate services
- overcome barriers to accessing eye care for Aboriginal people
- organising clinics for visiting optometrists
- organising annual recalls for diabetic retinal examinations
- make specialist appointments for patients
- follow up with patients after surgery (eg cataracts).
This program has been very successful. REHCs are seeing more children and adults with vision problems, through Aboriginal health checks and school and preschool screenings. The reaction of the Aboriginal community has been excellent. Collaboration with local eye practitioners enables more Aboriginal people to access treatment for refractive error, cataracts, diabetic retinopathy, or any disease/trauma.

**Conclusions:** REHCs play a very important role in the holistic care of Aboriginal communities by organising eye clinics in rural/remote areas. Eye health is vital and just as important as oral and ear health, yet doesn’t receive as much attention. REHCs taking these clinics to Aboriginal people are providing part of the holistic health care process that is working towards ‘closing the gap’.