

Continuing professional education program for orthoptists

– By Connie Koklanis and Zoran Georgievski*

Over the last few years the Orthoptic Association of Australia, with the continued support of Optimed, has organised several continuing professional education programs for orthoptists, focused primarily on diabetic retinopathy screening and glaucoma monitoring.

These programs have a particular emphasis on the clinical assessment of the fundus and anterior segment.

The continuing education program has been repeated in various forms in Melbourne and Sydney, with the latest held in November at the Royal Victorian Eye & Ear Hospital immediately prior to the national conference of the OAA. This was a great success, with a number of orthoptists attending and having the opportunity for hands-on experience. The RVEEH orthoptic team including Alison Fourmaris, Ignatio Koukouras, Fleur O'Hare, Lucette Scuteri and Julie Taylor led the education modules.

The day included presentations and clinical training which was further facilitated by the use of a digital slit lamp, fundus cameras and the technical assistance of Doug DeLaMare and Louis Eppel from Optimed.

The Orthoptic Association is focused on the up-skilling of orthoptists in the screening and monitoring of patients with eye disease, and particularly common conditions, as more and more Australians are requiring eye health care.

Diabetic retinopathy and glaucoma, in addition to cataract and age-related macular degeneration account for the majority of the outpatient occasions of service in ophthalmology departments.

With population increases and the ageing of the Australian population, a significant rise in eye disease and demand for treatment is inevitable. It is predicted, in fact, that the number of Australians with vision impairment will almost double by 2024 (Taylor et al, 2005').

Given that interventions or measures

for the effective prevention of vision loss are available for many eye conditions, it is essential that eye health care services are easily accessible to patients.

However, waiting times due to high demand and limited resources is often a barrier to accessing public ophthalmology services in a timely manner.

With an adequate supply of eye care professionals, including ophthalmologists, orthoptists, optometrists, and ophthalmic nurses, one way to address this issue is through workforce redesign, where 'value' is added for better utilisation of the skills of medical and non-medical staff in the delivery of eye care.

New ophthalmology models of care have been discussed, planned or implemented locally, nationally and internationally with various alternative and enhanced professional roles often central to these changes.

Orthoptists have over time emerged and proven themselves as sound eye-care professionals in secondary health care who can play a pivotal role improving access and pathways for patients.

Local examples include the orthoptists role in diabetic retinopathy screening, glaucoma monitoring, and pre- and post-operative cataract care.

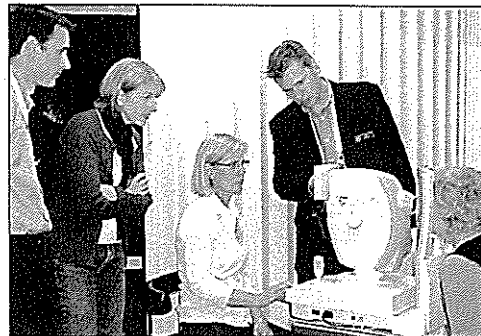
Continuing education programs such as those provided by the Orthoptic Association of Australia are an important part of addressing the issues in eye health care provision. Orthoptists' enthusiasm to attend and upskill also reflects a workforce ready and preparing for the challenges ahead.

Reference

'Taylor HR et al. Vision loss in Australia. MJA 2005; 182: 565–568

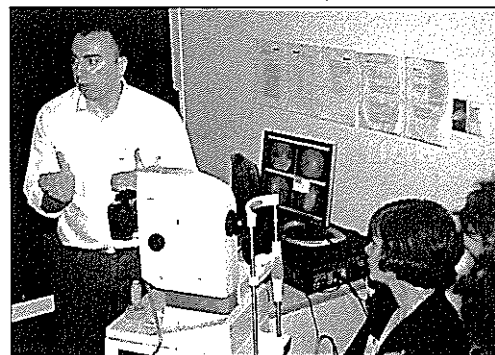
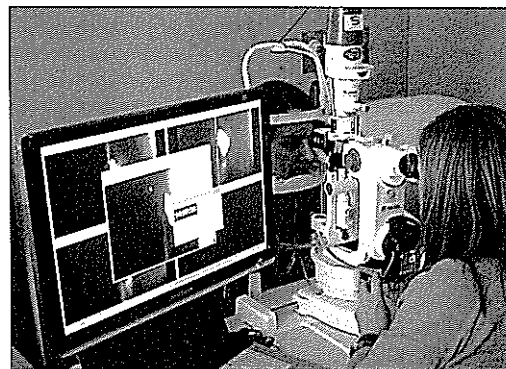
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Louis Eppel and Doug DeLaMare from Optimed offering tips on photography techniques with the Canon non-mydiatric retinal camera



Practising retinal photography

An orthoptics lecturer demonstrating posterior imaging with a condensing lens, utilising the teaching aid of a Takagi digital slit lamp with live video display



Zoran Georgievski explaining retinal photography protocols