

31 October 2024

Aged care legislative reform
Department of Health and Aged Care
AgedCareLegislativeReform@health.gov.au

To whom it may concern,

I am writing on behalf of Optometry Australia, the peak representative body for 85% of Australian optometrists, to bring your attention to the critical role of primary eye care in aged care settings, and the crucial need for optometry to be included in the Allied Health Services List in the Aged Care Rules (the Services List).

Optometry Australia recommends that optometry be added to the Services List. Doing so would ensure that optometry is included in needs-based assessments of older Australians and would enable Older Australian's improved access to their recommended annual eye examination.

Context

Optometry Australia believes it is critical that we work together to ensure effective access to primary eye care for older Australians, especially those residing in aged care facilities or receiving care at home. Australia's ageing population means the number of Australians with eye disease and vision impairment is increasing. The 2016 National Eye Health Survey found that 4.5% of Australians aged 50 and older experienced visual impairment, rising to 15.2% in those aged over 80^{1, 2}. It is estimated that 90% of blindness and vision loss among both Indigenous and non-Indigenous Australians is preventable or treatable, if detected early³.

Ageing is closely linked to conditions such as uncorrected refractive error, cataract, age-related macular degeneration, diabetic retinopathy, and glaucoma. Many of these conditions can result in changes in vision and potential vision loss if not detected early enough. It is therefore critical that older Australians have access to primary eye care and optometrists, to undergo their recommended annual eye examinations in order enable detection, diagnosis and management of these conditions.

Although access to eye care in aged care settings has improved over the past decade, significant gaps remain, particularly for elderly individuals with limited mobility. The personal and social impact of vision loss in older Australians is profound. Impaired vision, whether at home or in residential aged care, is linked to dementia, increased fall risk, depression, reduced mobility, and difficulties with daily tasks—all of which lead to a diminished quality of life⁵⁻¹¹.

Aside from personal and social impacts, vision impairment has wider implications for the Australian economy, costing the Australian economy \$27.6 billion annually⁴. The economically and socially disadvantaged—older Australians, people with chronic diseases, those living in rural and remote communities, and First Nations peoples—are disproportionately impacted.

The Aged Care Royal Commission reiterated the importance of ensuring that aged care residents have access to visiting allied health professionals, including optometrists, as part of their care plans. This recognition stems from the key role optometrists play as the first point of contact for 80% of Australians regarding eye health³. They regularly detect and manage the five primary conditions responsible for vision impairment in Australia, as well as other conditions in asymptomatic patients.

Australians aged over 65 are eligible for an annual comprehensive eye exam under the Medicare Benefits Schedule and we note that 94% of optometrists bulk-bill these services¹². However, despite this, evidence suggests that the older Australians particularly those in aged care facilities are not receiving their annual eye check.

Optometry Australia believes that timely, affordable and regular eye care is vital to improving the overall health and well-being of older Australians, whether they reside in aged care facilities or at home; and that a key enabler of this is optometry's inclusion in the Services List.

The Aged Care Rules 2024

In reviewing the *Aged Care Rules 2024* and the Stage 1 release of the Service List, which outlines the care and services available to older people under the new legislation, we have noted that optometry has been excluded from the list. While we understand that many details of the new Aged Care Act remain to be clarified, and Clause 60 provides policy for ensuring aged care facilities provide general access to allied health services, we are concerned that excluding optometry from the Allied Health Service List may hinder optometry's inclusion in future needs-based assessments and future funding considerations.

We welcomed the Australian Government's increased investment in optometry domiciliary services, noting changes to the Optometry Medicare Benefits Schedule as part of the 2024-25 Federal Budget. Increased investment in domiciliary primary eye care will support optometrists to continue to offer eye care to at-risk and vulnerable patients, particularly those in aged care settings. However, Optometry Australia believes that including optometry in the Services List is an opportunity to further embed the critical role of optometry and primary eye care in these settings.

The inclusion of optometry in the Services List will contribute to efforts to address known barriers to accessing primary eye care, including the disparate access to comprehensive eye exams and the lack awareness of the need for effective referral to optometrists and other eye care professionals.

Additional comments

In addition to the above, Optometry Australia urges the Government to ensure that regulatory frameworks, such as the Aged Care Act, do not impose unnecessary barriers on optometrists and other providers. Specifically, this includes reducing the administrative burden by avoiding duplication of tasks already overseen by bodies like AHPRA.

We also support Allied Health Professionals Australia (AHPA) in calling for the new Aged Care Bill to mandate a nationally consistent, evidence-based approach to identification, assessment, and care planning for aged care residents and home care recipients.

We look forward to continuing to work with the Australian Government to embed primary eye care into aged care settings, to ensure the Australian health care system evolves to meet the eye and

vision care needs of an ageing population. We'd also be more than happy to meet and discuss further should you require any further information.

Kind regards,



Sarah Davies
Director, Optometry Advancement
s.davies@optometry.org.au

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