FROM OUTREACH TO SUSTAINABILITY
The Patient Explored

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BACKGROUND

Previously: limited public sector refractive error services in the KwaZulu-Natal (KZN) Province of South Africa

Population: ~ 9 Million

Large rural community

Aim

To strengthen eye care service in the public sector, through advocating for integration of optometry in the public sector.

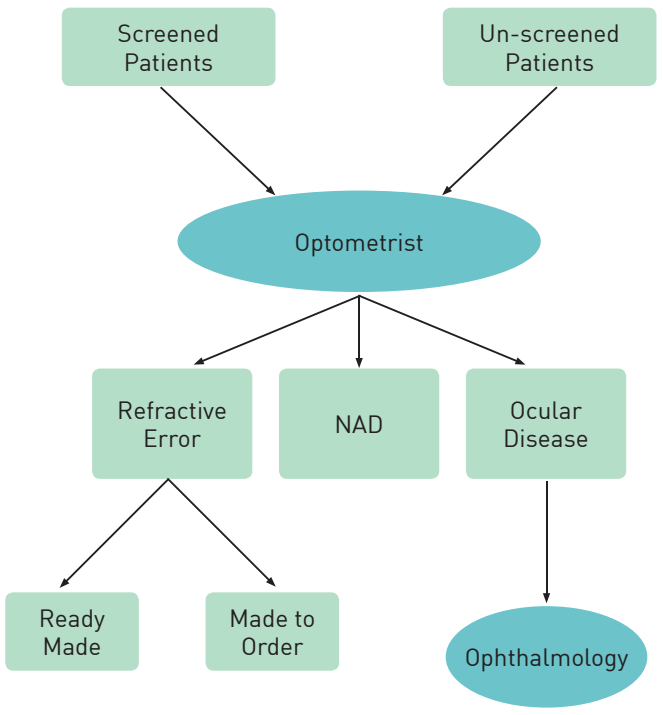
Short Term Strategy

- Develop optometry services to rural hospitals through the Flying Doctor Service (FDS): A community outreach program formed through a partnership between the KwaZulu-Natal DOH and the Red Cross Air Mercy Services.
- Ensure immediate service delivery
- Create awareness of the need with Department of Health (DOH) managers
- Use evidence of demand for services to support advocacy.

Long-term (Sustainable) Strategy

- Advocate for integration of eye care services into public health sector
- Develop sustainable refractive error services

Service Delivered



Affordable Spectacle Program

- Ready made, Made –to –order: Single Vision and Bifocals
- Entry level product -Plastic frame with CR-39 white lenses
- Metal frames and tint upgrade options available
- Policy for provision of spectacles to indigent patients:
  - Clinical criteria
  - Socio-economic criteria

OUTPUTS

- 6000 patients examined per year
- 51 optometry clinics developed
- 25 optometry posts created by KZN DOH
- 14 optometrists employed by the KZN DOH

CURRENT STUDIES

STUDY 1

AIM

To determine patient demographics, spectacle choice, refractive status and impact of service on visual acuity.

OBJECTIVES

1. Examine patient demographics
2. Investigate impact of spectacle correction on vision impairment.
3. Investigate the relationship between patient spectacle choice and socio-economic factors and gender

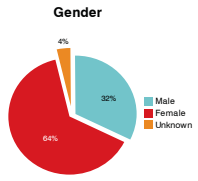
METHOD

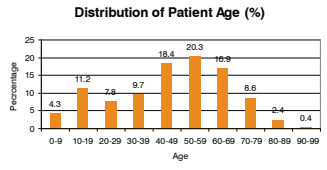
Patient record cards (health & demographic data) of 2721 patients attending FDS clinics were examined.

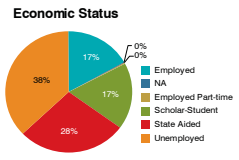
Sampling strategy: random sampling

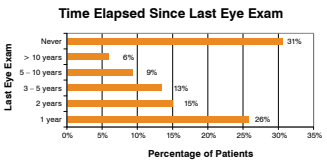
RESULTS

PATIENT DEMOGRAPHICS

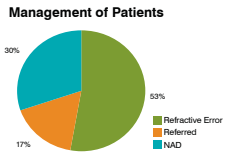


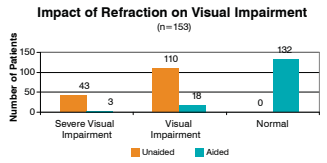




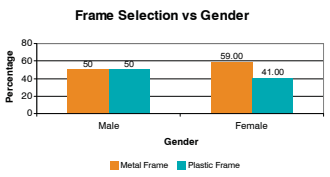


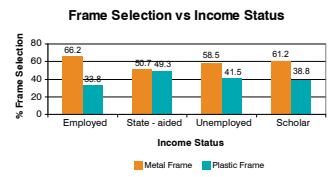
IMPACT ON VISUAL IMPAIRMENT

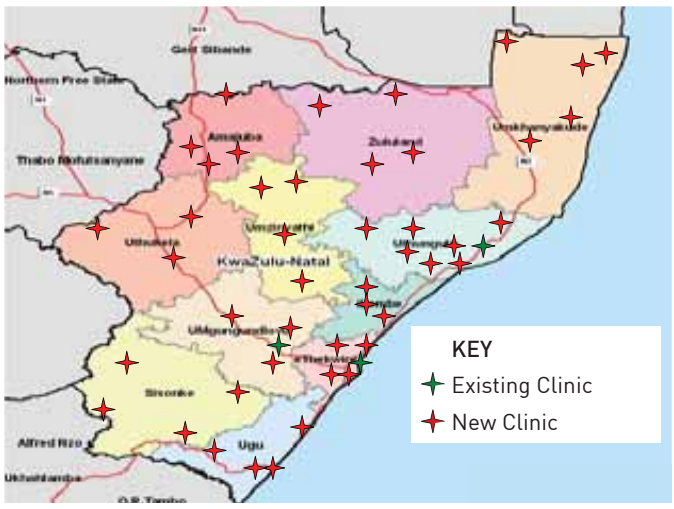




SPECTACLE CHOICE







STUDY 2

AIM

To evaluate the patients' opinion of service delivery at clinics

OBJECTIVES

1. Evaluate patients' access to the service
2. Evaluate patients' satisfaction with service

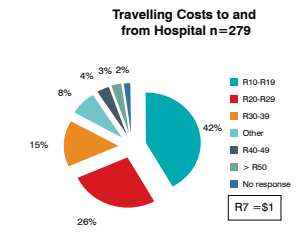
METHOD

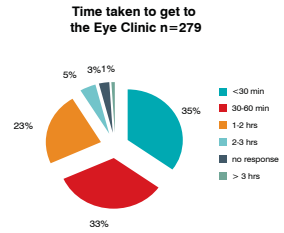
Structured questionnaire was administered to 400 patients (284 first-time patients and 116 patients returning to collect their glasses)

Sampling strategy: random sampling

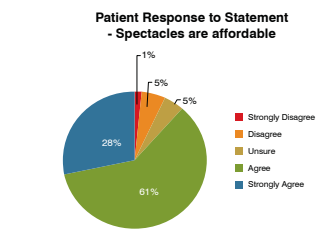
RESULTS

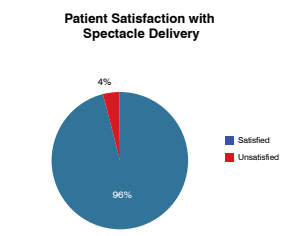
PATIENT ACCESS





PATIENT SATISFACTION





DISCUSSION of RESULTS: Study 1 & 2

- The typical patient was female, most likely between the ages of 50 to 59.
- 31% of patients had never had an eye exam and a further 15% not in the previous 5-10 years or more.
- State-aided, unemployed and scholars -83% of patients.
- 49% of patients had refractive error and/or presbyopia.
- 91% of patients presenting with Visual Impairment due to refractive error had their visual status improved by spectacles.
- 89% of patients agreed that the spectacles were affordable
- Preference for metal frames, even in the lowest socio-economic grouping, despite higher cost.

CONCLUSION

- The refractive error service provided was accessible (for majority of the patients) affordable and efficient in the patients opinion.
- The outreach program led to the establishment of permanent optometry posts and refraction clinics by government thus ensuring sustainability of the service.
- Refractive error services contribute to reduction in visual impairment and should be an integral part of any eye care program.

ACKNOWLEDGEMENT

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