



# **Tasmanian Department of Health and Human Services**

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## **Agency Health Professional Reference Group**

## **Allied Health Professional Workforce Planning Group**

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## **Allied Health Professional Workforce Planning Project**

## **Orthoptics Information**

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### **3 Preface**

This Orthoptics Information should be read in conjunction with the main Allied Health Professional Workforce Planning Discussion Paper.

## 4 Overview

Orthoptists are concerned with visual functions and eye movement disorders and specialise in diagnostic procedures related to disorders of the eye and visual system. Orthoptists are involved in vision therapy, vision rehabilitation, specialised vision testing procedures, vision screening, education and research.

All DHHS orthoptists were employed in the Departments of Ophthalmology at the Royal Hobart Hospital and the Launceston General Hospital in the Hospitals and Ambulance Service Division. They were managed by the medical heads of those Departments.

There were four orthoptists employed in 0.65 FTE positions in the DHHS, which meant that approximately six orthoptists were required to fill one FTE position within DHHS. This rate was the highest for the DHHS allied health professional workforces.

All orthoptists employed in the DHHS were female and aged over 30 years. This indicated that the DHHS orthoptics workforce was older than the national orthoptics workforce that peaked in the 25 to 34 year old age group in 1996.

In the years, 2000 and 2001, no orthoptists left DHHS employment, but one DHHS orthoptic position was advertised.

Although the rate of 1.5 orthoptists per 100,000 population in Tasmania was below the national average of 2.0 per 100,000 of the population, Tasmania had the third highest rate of orthoptists to population, after New South Wales and Victoria.

The orthoptists employed within the DHHS were only employed for a small number of hours and they were employed for the rest of their time in practices in the private sector. This was consistent with national data obtained in 1996, which states that 84 per cent of the Australian orthoptics profession were employed in the private sector.

Undergraduate and post-graduate courses in orthoptics are offered at the University of Sydney, New South Wales and La Trobe University, Victoria (Orthoptics Association of Australia 2002).

Further workforce planning for orthoptists in the DHHS could be undertaken in liaison with the Tasmanian branch of the Orthoptics Association of Australia.

## **5 Description of the profession**

An orthoptist is concerned with visual functions and eye movement disorders and specialises in diagnostic procedures related to disorders of the eye and visual system. Orthoptists are involved in vision therapy, vision rehabilitation, specialised vision testing procedures, vision screening, education and research.

An orthoptist may perform the following tasks:

- measure and assess visual acuity (ability to discriminate detail), focusing ability, eye movement, binocular function and colour vision
- detect and treat disorders of the eyes which prevent normal vision such as strabismus (turned eye) and amblyopia (lazy eye): treatment may involve the use of exercises and techniques to control eye movements
- conduct specialised tests to determine the effects of general pathology on the eyes and effects of eye diseases such as glaucoma
- provide reports on the existence of eye defects to medical practitioners
- provide educational information to patients and members of the community about eye conditions and their effects
- provide eye tests to groups within the community (e.g. pre-school children).

Orthoptists are employed in a variety of settings, including private practice eye clinics, public hospitals, community health centres, specialist teaching and children's hospitals, rehabilitation centres and universities (Commonwealth Department of Education, Science and Training 2002).

### **5.1 Description of related occupations**

#### **5.1.1 Optometrist**

Optometrists perform eye examinations and vision tests to determine the presence of visual and other problems relating to the eye, and prescribe lenses, other optical aids or therapy.

#### **5.1.2 Ophthalmologist**

Ophthalmologists are medical practitioners who diagnose and treat diseases, injuries and deficiencies of the eye.

(Commonwealth Department of Education, Science and Training 2002)

## 6 Workforce supply

### 6.1 Profile of the current orthoptics workforce

#### 6.1.1 Demographics of the orthoptics workforce

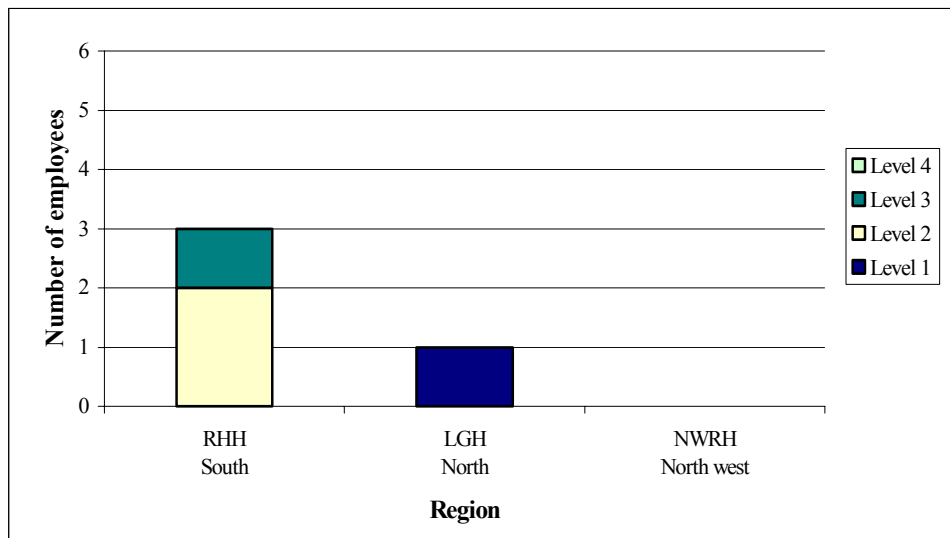
##### 6.1.1.1 Human Resource Services Information System data

Data on the DHHS orthoptics workforce from the DHHS Human Resource Services Information System (as at 21 March 2002) has been displayed graphically. The information displayed in these graphs represents all orthoptics positions within DHHS regardless of whether these were filled or vacant at the time of analysis.

There were four orthoptists employed in part-time positions (0.65 FTEs) in DHHS.

Figure 1 shows that the orthoptists were employed in the Royal Hobart Hospital and the Launceston General Hospital in the Hospitals and Ambulance Service Division.

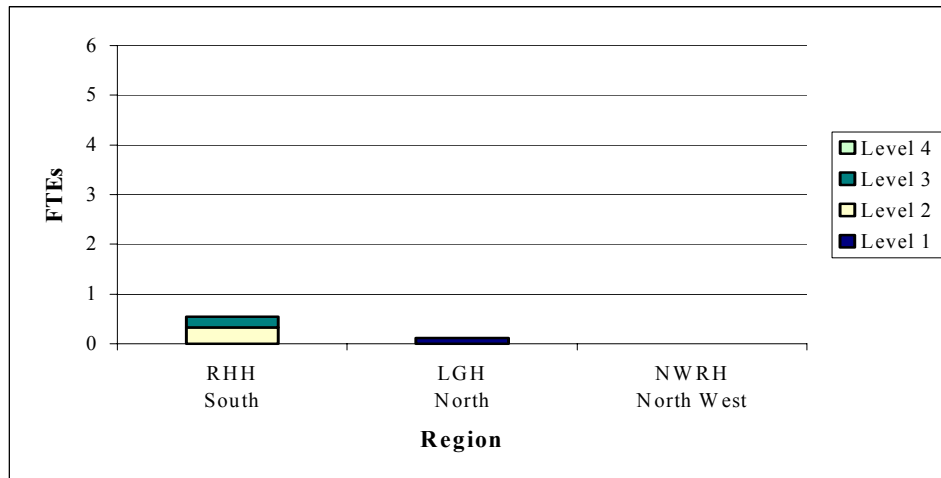
**Figure 1: Orthoptics headcount per award classification in HAS**



Source: DHHS Human Resource Services Information System 21 March 2002

Figure 2 displays the supply of 0.65 FTE orthoptists in the three regions of Tasmania.

**Figure 2: Orthoptics FTEs per award classification in the HAS**



Source: DHHS Human Resource Services Information System 21 March 2002 (filled and vacant positions)

Table 1 displays the numbers of DHHS orthoptic FTE positions at the various award levels.

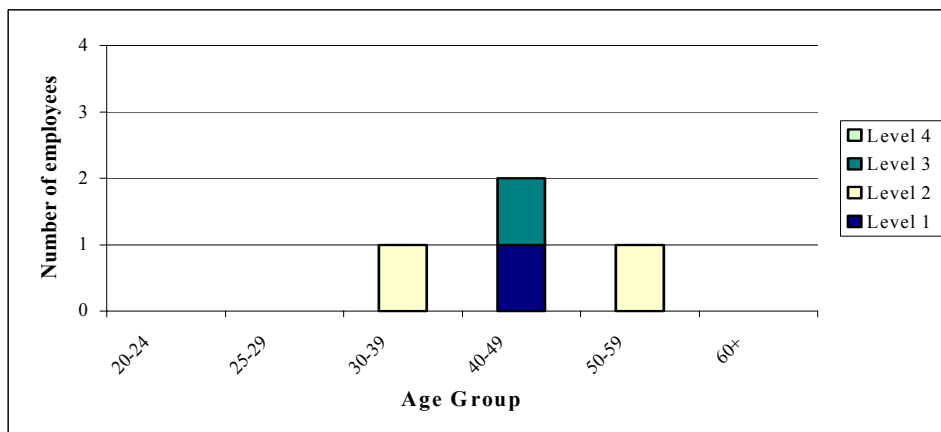
**Table 1: Breakdown of the number of DHHS orthoptic FTE positions at specific award levels**

Award level	PF1	PF2	PF3	PF4
FTE orthoptist positions	0.11 FTEs	0.33 FTEs	0.21 FTEs	0.0 FTEs

Source: DHHS Human Resource Services Information System 2002 (filled and vacant positions)

As displayed in Figure 3, all DHHS orthoptists were aged over 30 years. The DHHS orthoptics workforce was older than the national orthoptics workforce that peaked in the 25 to 34 year old age group in 1996 (AIHW 2001).

**Figure 3: Orthoptics workforce per age groups and award classification**



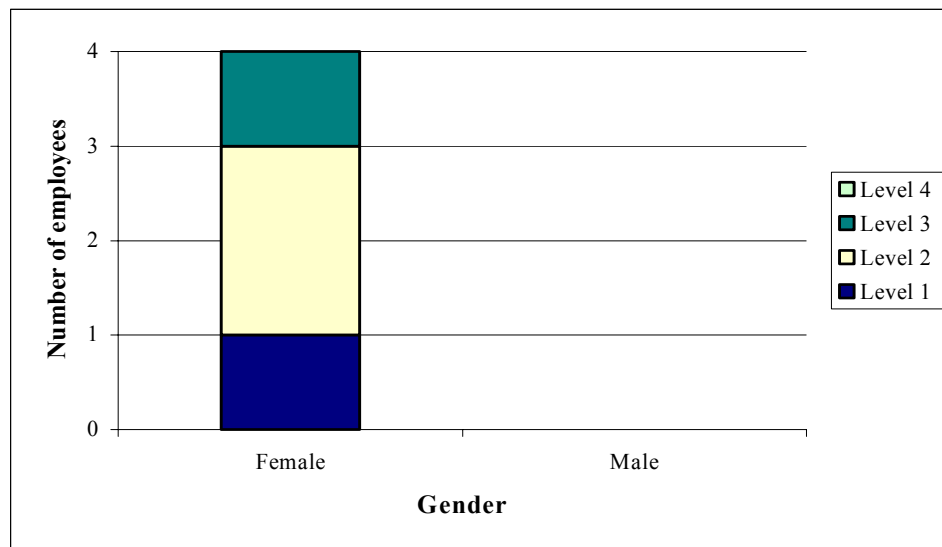
Source: DHHS Human Resource Services Information System 21 March 2002 (filled and vacant positions)

The median age of the DHHS orthoptist workforce was 47 years. This was older than the median age of all the AHPs in the DHHS workforce, which was 42 years.

The AIHW (2001) indicated that in 1996, all orthoptists employed in Tasmania were female. Nationally at that time, 89 per cent of orthoptists were female.

As displayed in Figure 4, all of the orthoptists employed in DHHS in 2002 were female.

**Figure 4: Orthoptics workforce per gender and award classification**



*Source: DHHS Human Resource Services Information System 21 March 2002 (filled and vacant positions)*

### 6.1.1.2 DHHS staff survey data

There were four orthoptists employed by DHHS and two completed a survey form; resulting in a response rate of 50 per cent. Due to the low response rate, only responses to some questions were used to describe the supply of orthoptists later in this paper.

### 6.1.2 The education of orthoptists

Undergraduate and post-graduate courses in orthoptics are offered at the University of Sydney, New South Wales and La Trobe University, Victoria (Orthoptics Association of Australia 2002).

## 6.2 Projecting workforce supply

Workforce supply is a balance between outgoing staff (retirees, those temporarily withdrawing from the workforce, emigrants or those who die or take up employment with other employers) and incoming staff (new graduates, immigrants, staff coming from other employment and staff increasing their hours of employment).

### 6.2.1 Outgoing staff

No orthoptists left DHHS employment in 2000 and 2001.

In order to ascertain the possible future numbers of outgoing orthoptists, staff were asked a number of questions in the DHHS staff survey. Staff were asked:

- if the hours they worked were the hours they wanted to work;
- if they anticipated a change in their work hours in the next three years and the reasons for this change;
- if they were considering leaving the DHHS in the next six to twelve months, and if so, what were the reasons;
- what their levels of satisfaction were for a number of professional practice parameters.

Both of the orthoptists who responded to the DHHS staff survey indicated that the hours they worked were the hours that they wanted to work. One of the respondents anticipated an increase in work hours over next three years. This respondent indicated that an 'increase in patient numbers' was the factor most likely to cause this increase in hours.

Neither of the orthoptists who responded to the DHHS staff survey indicated that they were intending to leave the DHHS in the next six to twelve months.

Table 2 provides information on staff levels of satisfaction with the various professional practice parameters is listed in

**Table 2: Satisfaction with professional practice parameters in DHHS**

Criteria measured	Per cent of respondents who were satisfied or very satisfied
Opportunity to use your abilities	100%
Sufficient work to maintain competence	100%
Hours of work	100%
Amount of work	100%
Overall satisfaction	100%

*Source: DHHS staff survey October 2001*

### 6.2.2 Incoming staff

One position was advertised for orthoptists in the DHHS in 2000 and 2001.

## 7 Workforce demand

### 7.1 Current demand for orthoptists

#### 7.1.1 Patterns of usage

##### 7.1.1.1 Profession to population ratios

The AIHW (2001) indicated that in 1996 there were 1.5 orthoptists per 100,000 population in Tasmania compared to 2.0 per 100,000 across

Australia. However, Tasmania had the third highest proportion of orthoptists to population after New South Wales and Victoria.

#### **7.1.1.2 Staff workload assessments**

The DHHS staff survey asked orthoptists if they considered their current workload was about right, too much or too little. Of the two orthoptists who responded:

- one stated that the workload was about right
- one stated that the workload was too much.

### **7.2 Projecting future demand for orthoptists**

#### **7.2.1 Perceived drivers of orthoptics services in Tasmania**

Both of the orthoptists who responded to the DHHS staff survey perceived that the factors most likely to increase the future size of the orthoptics workforce were 'aging of the population' and 'growth in consumer demands'.

## **8 Workforce planning issues identified in consultations**

### **8.1 Organisational structure within DHHS**

The orthoptists in DHHS were employed for sessions in clinics of the Department of Ophthalmology at the Royal Hobart Hospital and the Launceston General Hospital. They were managed by the medical heads of those Departments.

Approximately six orthoptists were required to fill each FTE position within DHHS.

The orthoptists employed within the DHHS were only employed for a small number of hours. They were employed for the rest of their time, in practices in the private sector. This was consistent with national data obtained in 1996, which states that 84 per cent of the Australian orthoptics profession were employed in the private sector.

Further research into the DHHS orthoptics workforce was beyond the scope of this project, but could be undertaken in collaboration with the Tasmanian branch of the Orthoptics Association of Australia.

### **8.2 Staff satisfaction with DHHS employment**

Information about staff satisfaction with DHHS employment was sought through the focus groups. However, no orthoptists attended these sessions.

### **8.3 Professional development to retain and strengthen a quality workforce**

There was no consistency in the orthoptists' responses to questions on the DHHS staff survey regarding the provision of regular CPD.

Neither of the orthoptists who responded to the DHHS staff survey had applied for conference funding in the past two years.

## **9 References**

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