Refreshing Optometry 2040

The Optometry 2040 project initiated by Optometry Australia (OA) in 2018 aimed to identify the plausible scenarios for optometry, optometrists, and community eye health. Members supported the identification of a preferred future for optometry in 2040, which has guided the work of OA since.

In 2023, we recognised that some change assumptions had progressed faster than expected, others slower or not at all, and as a result, the scenarios developed in 2018 needed to be refreshed to remain relevant and useful. Supported by experts, we undertook a consultation process to refresh the plausible scenarios for optometry in 2040 and identify our preferred future. The refreshed scenarios will guide OA's strategic planning and foster discussions within the optometry community regarding the future of eye care in Australia, ensuring alignment with evolving trends and priorities.

Refreshing key priorities and commitments

1. Lead the evolution of optometrists' clinical scope, including pursuit of oral therapeutic prescribing; educational opportunities to increase future clinical scope; integration of research skills into clinical practice; and development of a clear agenda for research into service delivery and associated funding models and workforce requirements.

2. Support optometrists to work to maximal clinical scope, including implementing an Advanced Practice Recognition program, entrenching collaborative care models and optimising referral pathways, which both meet community eye care needs and maximise the value and benefits of optometrists' clinical scope.

3. Raise public and key decision maker awareness about eye health and the essential role of optometry in the eye health system.

4. Facilitate the development of funding systems and models of care that benefit optometry, optometrists and community eye health, including supporting the development of safe and secure data sharing platforms to facilitate both advocacy and professional development.

5. Pursue opportunities to ensure optometry, optometrists and community eye health are engaged in Australia's broader digital health transformation, across telehealth; artificial intelligence; and e-referral, e-prescribing and e-health record platforms.

6. Support timely patient access to culturally safe care across the country, including for Aboriginal and/or Torres Strait Islander peoples.

7. Support the profession to continue to take steps towards reducing the optometry sector's environmental footprint.

The preferred future for optometry

In 2040, optometrists are an integral part of a multidisciplinary, collaborative health care system that provides patients with seamless access to services as and when they need them. AI, coupled with real-time access to comprehensive health data, enables optometrists to predict future patient health issues and work with them as active participants (partici-patients) in decisions about their health care.

This scenario sees optometry as a multi-tiered profession with several specialisations, including as neurosensory specialists utilising diagnostic retinal imaging for a range of neurological conditions, and postgraduate professional paths that variously meet the complex eye care needs of geographically and culturally diverse populations. Supported by regulatory reform, optometry expands in scope to include a greater role in disease management and intervention.

Optometrists work across a wide range of modalities, and are embedded in a network of primary care, specialist and other support services (including general practitioners, ophthalmologists and disability services) with support from AI, real-time data, and technologies such as implantable eye health monitors. Services are delivered face to face and virtually, in practices, at home, in health kiosks (for example in pharmacies) and in multidisciplinary primary care clinics. The range of delivery modalities means that optometrists have flexible working hours and a networked capacity to share/distribute service delivery, reducing workforce turnover and increasing work-life balance.

With a substantial rise in chronic and complex health conditions, there is community acceptance that governments cannot fully fund health care. This results in new public-private partnerships with community businesses and industry, and a greater financial contribution from consumers and health insurers.

Medicare fee-for-service funding has been largely replaced by funding of health services based on packaging of services for each patient (capitation) or on patient outcomes. New and improved communications and data transfer systems to increase the effectiveness and efficiency of interprofessional practice have been established.

Horizontally integrated health services that include optometry range from small centres (e.g. pharmacies) to larger multidisciplinary urban and regional health hubs. Glasses and contact lenses can be easily obtained online, but consumers continue to refer to optometrists with any concerns, and for ongoing management of eye health conditions. Public education and awareness programs have raised consumer understanding of the broader role of optometrists in holistic and preventive health care, and provide consumers with guidelines on eye care, at-home digital ocular services and how to decide when to contact an eye care professional.

Optometry training and education in Australia has a new emphasis on teamwork, leadership and collaboration. Education opportunities are shared with other health professions, including training placements. Optometrists receive ongoing training in culturally safe practice to ensure they meet community expectation, and digital health transformation and the use of big data require ongoing education in advanced digital technologies such as AI, and in cybersecurity. Optometry practice is now fully responsive to social and regulatory demands for sustainability to limit the impacts of climate change, and overall, CPD programs are continuously reviewed to respond to new technologies, government policy changes and evolving community needs.