TRANSCRIPT 1

(One to One Telephonic Interview)

EVIDENCE BASED OPTO METRY

Female voice 1 (Facilitator): All right Reed told you that we are basically doing these focused group discussions...where we are basically trying to...see ourselves what happens...at the moment in the belief of evidence based practice...in optometry...and the discussions are pretty much serving as a base to...formulate new questionnaires which will then be sent out to...the optometrist in Australia...

Participant (male voice): yeah...

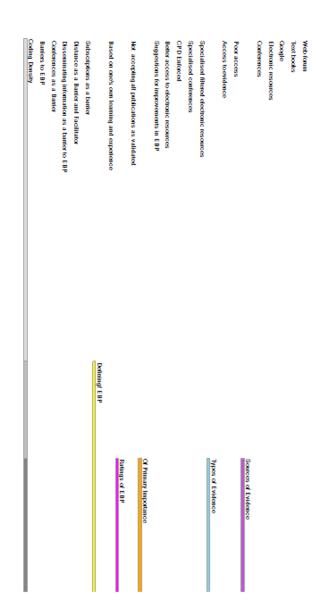
Female voice 1 (Facilitator): so its not right or wrong answer...the discussion that we both have will basically lead to new questionnaires...the reason why I am doing this questionnaire rather than Reed is basically simply so that...the interviews being anonymous...so that...and you basically can say whatever you feel like...without being sort of intimated potentially by the fact that...the researcher...is actually sitting here...and sort of forming an opinion about you...

Participant (male voice): sure...

Definitions of EBP

Female voice 1 (Facilitator): all right...then if you are happy then I would like to start this with you...I don't know whether you have the questionnaire in front of you...but basically...the first question was...describe your understanding of evidence based practice...

Participant (male voice): my understanding would be that...the cause of action that I take...after I got my information...from patient examination...would be guided by research...that has indicated that...in particular type of case management...a particular course of action is indicated...so...for instance...recently I did a study on...the management of myopia...We have (a bifocal spectacles...and the study indicated that...if they had these so...they would develop myopia...then bi focal would be a value...but in other myops...it would not...and a full correction to the myopic was indicated...so that was

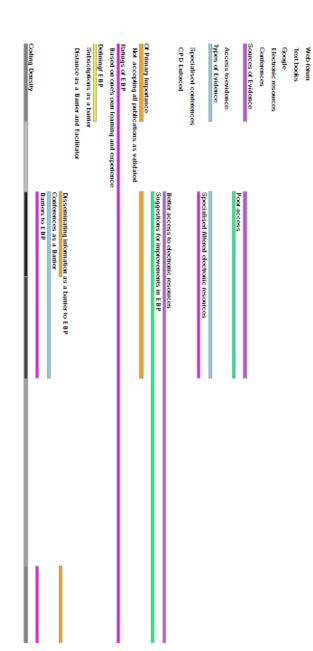


against the current...the trend of the time was to undercorrect...patients...and also to describe...bifocal for most emerging young myops...so that's an example...of using research study...that had an outcome that was different to the common...practice in the management of the patient of the time...

Ratings of EBP

Female voice 1 (Facilitator): brilliant...so I am taking your thinking that...the incorporation of evidence based practice is... important in optometry... or you...

Participant (male voice): yeah I think it is...the unfortunate problem with evidence based optometry is that...some of the studies that are done...the information is not easily...or readily disseminated...to the practitioner...and so therefore they continue to practice the way they practice...were they are aware of what some of the research is indicating...again more recently...the studies that are being done by Hellen swarberick...with ortho- k and myopia control...and I think...with Holden Institute...with regard to myopia spectacle and correction as well...so some of those other studies are indicating that we have some other options available to us...that information is not readily disseminated to practitioners...and so you only look at the...discussions that occur...people you know who say...what about...these multi favorable...contact lenses...and soft contact lenses...in control of young myops...and they say...oh we haven't heard anything about that...and similarly...the use of...like for example...I say spectacle lens for the control of myopia...and they say we haven't heard of that one either...and then use of orthocarotology...to possibly control myopia... and because they don't go to ortho- k conferences...they don't hear about it...so that is a part of issue with evidence based practice...that other that...there was a study done...in the treatment of bacterial conjunctivitis...in young children...do you treat it with Chloramphenicol or do you just clean the eyes...and bath them regularly and watch them...watch the infection clear up...up the time of rather than treat them with Choloramphenical as matter of routine ...and I think that study indicated...in most cases the outcome was as good as without the use of antibiotics...as it was with...so you know that's another example...so I don't think that those studies are well disseminated amongst our profession...



Barriers to EBP

Female voice 1 (Facilitator): so basically the fact that we don't...properly communicate the research outcome...with the practitioners...do you think that that is a barrier...that...a lot of optometrists do not necessarily...

Participant (male voice): yes I think that is...(5:35)... obviously... the problem we have is that...there is a lot of information that comes...with regard to research... I have seen a number of different journals...and if you don't...actively go looking for information...then you may not become aware of it...for some time after it has become accepted... or the research outcomes would indicate that this was the...way to manage a particular...patient problem...so I think it is not necessarily that the researchers have not disseminated the information... I think there is a breakdown in...the researchers put it out to journals...and it gets out to journals...and its peer reviewed and it is accepted...and its outcomes are considered to be valid...but unless an optometrist has access to all these journals...or some abstract service which enables them to...skim through all the stuff as it comes out... and then look for the extra information... as need be...then they are not going to necessarily see it...and again unless you go to the right conference...you may not pick up on this information either...so it's not the researcher's fault...or the institution is doing the researcher's fault...it is also...it's also to do with...the way that it gets...into the profession as a whole...you know if you wanted to...you could subscribe to...an awful lot of journals...but you spend all the time in practice reading the journals...and never have time to practice your profession...you know you have to...you have got to try and find a balance...between how much information you are looking for...and how much information you can put it into practice...so I think its...the sheer amount of information that's out there...and...whats the most effective way...for the average practitioner to...access that information...and make informed decision as to how they go back to... doing their practice...

Types of Evidence

Female voice 1 (Facilitator): and can I ask how you're actually...you are saying you are reading journals...and you are attending conferences...are these two

Text books	
Google	
Electronic resources	
Conferences	
Sources of Evidence	
Poor access	
Access toevidence	
Types of Evidence	
Specialised filtered electronic resources	
Specialised conferences	
CPD Enforced	
Better access to electronic resources	
Suggestions for improvements in EBP	
Of Primary Importance	
Not accepting all publications as validated	
Ratings of EBP	
Based on one's own learning and experience	
Definingf EBP	
Subscriptions as a barrier	
Distance as a Barrier and Facilitator	
Disseminating information as a barrier to EBP	
Conferences as a Barrier	
Barriers to EBP	
Coding Density	