

Suffolk Eyecare Enhanced Services Pathways

October 2012

Purpose of Service

The aim of the service is to improve eye care services for patients in Suffolk by using the skills of primary care optometrists to prioritise, assess and manage patient referrals.

Eye care in the community

For over 10 years community optical practices in Suffolk have provided direct referral with high levels of patient satisfaction. We also run a successful pre and post operative cataract scheme which reduces Hospital Eye Service (HES) appointments. In the past year we have added a referral refinement scheme for routine referrals into secondary care. A key benefit of these enhanced services is a reduction in referral rates to GPs, A&E and hospital eye departments.

Referral Refinement Procedure

Under the previous system, all routine referrals from optometrists and GPs were sent directly to the Hospital Eye Service (HES). Instead, these are now sent via Accipiter to Suffolk Primary Eyecare (SPE) referral management centre (RMC) for triaging by optometrists. Any routine referrals suitable for referral refinement are sent to an accredited optometrist of the patient's choice and an appointment offered within 4 weeks. Referrals not suitable for referral refinement are sent to the HES of the patient's choice as indicated on the original referral.

Referrals from optometrists to the GP for other medical reasons are sent directly to the GP surgery. Optometrists and GPs are encouraged to send emergency referrals directly to the HES.

Enhanced Service Providers (ESP)

The patients directed to an ESP by SPE have conditions considered to be manageable within the core skills of an optometrist.

The pre and post operative cataract scheme

Accredited optometrists refer patients for cataract surgery and perform post-operative checks. Cataract referrals are processed by the SPE referral management centre. The staff check the referral fulfils the criteria required for NHS cataract surgery, contact the referrer for further information if required and may reject the referral if the NHS criterion is not fulfilled.

Glaucoma referral refinement

Patients who are identified as having IOP > 21 and <31 mmHg during a sight test, but show no other convincing signs of glaucoma are suitable for referral refinement. The ESP measures IOPs (using Goldman style tonometry), checks fields, anterior chamber depth and assesses cup disc ratio. Following changes in NICE guidelines, approximately 3000 suspected glaucoma patients were sent to the HES per annum. Using glaucoma referral refinement, this number has reduced by 1/3rd.

General Referral Refinement

ESPs registered in Suffolk to provide general referral refinement may see patients to investigate loss of vision, ocular pain, diplopia, lumps and bumps in the vicinity of the eye, retinal lesions, field defects and unclear or incomplete referrals. Where appropriate, the patient can be seen within 48 hours. General referral refinement currently reduces these referrals by 17%.

Children's Eyecare Referral Refinement

Suffolk Local Optical Committee (LOC) and NHS Suffolk are piloting a pathway for referrals of children aged between 3 and 16 years who are referred through SPE. GPs, health visitors and school screening referrals for suspected squints, amblyopia or other signs and symptoms could be directed to an ESP.

Benefits of the service

For the patient

- Improved access to appropriate eye care
- Community-based service
- Reduced waiting times
- More comfortable in familiar surroundings with own practitioner
- Less travel time, time off work and related costs
- More time for questions and answers

For the commissioners

- Cost-effective integrated care pathways using primary care based clinicians
- Speedier access to care for patients from a choice of providers
- Care closer to home and in a convenient setting
- Services delivered by accredited highly skilled professionals working in well-equipped premises
- Reduction in outpatient referrals to acute hospital services
- Reduction in hospital follow-ups
- Closer working between GPs and local optometric practices
- Regular reporting of activity and outcomes

For the GP

- Quick, local and accurate screening service
- Confidence in accredited optometrists
- Collaborative work with other health care professionals
- Opportunity to identify and share good practice
- Less referral administration to HES
- Fast access, local primary care based service
- Comprehensive reporting for GP about their patient

For the HES and ophthalmologists

- Fewer inappropriate referrals
- Patients who do need to be referred will have sub – specialty identified by optometrist
- Improved communication between primary and secondary care