

Suffolk LOC History

Suffolk LOC have proactively worked to promote optometry and eye healthcare in the community, forging key relationships with the PCT, Hospital Consultants, General Practitioners and the people of Suffolk, our patients. The committee is innovative and proactive. In 2002 Suffolk was the first LOC, working with GP's and the local Ophthalmologists, to establish Direct Referral by Optometrists direct into the local hospitals bypassing the GP's, unless medical issues were of concern. Notification is always made to GP's of the Optometrists actions. We have good working relationships with the GP's and our ongoing training provided by the local Hospitals continues to provide the up skilling. This scheme has been so successful that it has been adopted in other parts of the Country. Suffolk LOC looked to provide more co working with the local hospitals, and the PCT. Cataract referrals were on the increase, so work was done with the LOC to create referral criteria, and also to train Optometrists to do Post Op checks in the community. This involved training which was provided and continues to be provided by the local Ophthalmologists. Optometrists who wish to do Cataract referral and post op checks have to be accredited and this is achieved by clinical attendance at the local hospital and ongoing training in lecture form by the Ophthalmologists. 90% of local Optometrists are now accredited. Adequate fees were negotiated with the PCT for this, which is of benefit to the membership. Patients have benefitted with continuous care with their local eye health provider. The LOC, realising uptake of eye examinations for young children in the community was poor, created The Jolly Giraffe Scheme for Children's eyecare to promote awareness of eye examinations for young children. A booklet was produced telling the story of a cartoon giraffe going to the Opticians. It is available to children, health visitors, school nurses and teachers to promote eye examinations for young children. The scheme is backed by a local consultant paediatric ophthalmologist who provided the membership with guidance for children's eye examinations by lecture and leaflet. Optometrists were encouraged to follow guidance and they became known to patients by displaying a Jolly Giraffe poster in the practices. Stickers are given to children post test depicting the Jolly Giraffe. The LOC has worked with Suffolk County Council Education dept to place a flyer re Jolly Giraffe and eye examination in the Starter Pack for ALL new intakes to primary schools in the September of each year. The LOC worked hard with Diabetic Retinal Screening in the community, but this was then re contracted out to a company providing screening in a large part of the East of England, and at a price we could not match. Suffolk LOC also work to expand optometry among professionals by providing a number of CET lectures/Study Days each year. The committee works with the membership to provide topics that they wish to get more knowledge on. We have several facilitators within the Committee and will be providing Peer Review Sessions for the membership. Our evening lectures are usually well attended with up to about 50 members. The PCT were looking for ways to reduce referrals into the Secondary Care system. The LOC have set up a , we believe , unique, Optometrist only led Triage process for ALL eye referrals in Suffolk. Details of this service are expanded below. The LOC continue in dialogue with the CCG Optical leads to continue to work with them to provide services in the community. We have set up a web site which we will continue to update to keep all LOC members aware of information they need to know and links and info of interest. Where we do not feel we are essentially different from our other LOC colleagues as all do good works, we do constantly try to seek to be innovative and ensure our skills and abilities are recognised by commissioners and hopefully allow us to use them in our practice settings.

Suffolk LOC has been innovative in producing a Referral Refinement system that benefits Patients, Local Optometry and Health Commissioners. Historically there has been no way of measuring activity going in and out of our local Hospitals and when the Suffolk PCT found that one of their local Hospitals was 9000 eye appointments behind, causing risk to patients, they approached the LOC to explore the possibility of managing more eye work in the community. The LOC proposed a system developed by an IT/Administration Company led by Peter Price-Taylor and worked with him and the PCT, with guidance and financial support from LOCSU, to set up a pilot scheme. A cost neutral company, Suffolk Primary Eyecare Ltd. was set up by 4 LOC Members to contract with Suffolk Health to provide an Optometrist Only "Triage" service for ALL eye conditions in Suffolk. SPE Ltd contracts the Admin Company, Evolutio, to administrate the referral refinement system. Any profits made by SPE Ltd are made available to the LOC. Initially the assessment of referrals by the SPE Optometrists was on computers in a central office but software advances have allowed them to work from home on their own computers. Now ALL routine Ophthalmic referrals from Optometrists, GP's, Community Nurses and Health Visitors are received by Evolutio who log them in the eRefer software. These referrals are viewed by SPE Optometrists who decide where they should go, using protocols based on College Guidelines. When appropriate, referrals are directed back into the Community to be seen by Enhanced Service Providers(ESP). The ESP's are Optometrists who have undertaken further training and assessment (provided by WOPEC). The ESP use core skills to assess the patients who may not need to go into the secondary system. Typical examples are patients referred with high Non Contact Tonometry results, or patients with dry eye or lid problems. Once a patient has been seen by a ESP, they are either: "Discharged" with a notice being sent to both the Patient's GP and the referring Optometrist or "Retained" by the ESP for further treatment or "Referred" to the Hospital if the problem is beyond the remit of the Optometrist. About 15% of referrals, not including Cataract referrals, are redirected into the community. Of the patients referred into the community about 70% are safely discharged, with the rest going onto the HES. We have a number of ESP's spread around the County to give patients choice and reduce travel for them. The ESP's have a contract/service specification with the PCT and are paid for their work with patients from other practices and for providing Enhanced Services to their own patients. Acute referrals still go direct to the hospital, both from GP's and Optometrists, but a note is sent to Evolutio resulting in activity being logged. An added benefit of this pathway is the ability to send all information electronically, including scans of fields/photos etc. The electronic system is available without charge to all practices in Suffolk. The software ensures accurate patient details are provided and removes difficulty caused by poor handwriting. There is a facility to print off a copy to send to the GP and give a copy to the patient for information. We have reduced unnecessary patient visits to the Hospital Eye Service, saved money for our local health service, created a massive source of information about referral activity, improved the quality of optometric referrals and enabled local optometrists to be paid for performing enhanced services. We are currently negotiating with the new Clinical Commissioning Groups to have the system permanently adopted by them.