

Community Ophthalmology Service

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- Hillingdon Clinical Commissioning Group Board
(clinical lead for Ophthalmology)

Introduction

- ◆ Following the update of NICE guidelines for glaucoma in 2009, the Hillingdon Clinical Commissioning Group (HCCG) carried out a review of commissioned activity. As a result, in July 2011 it was decided to undertake a re-commissioning exercise for ophthalmology services, by introducing a Consultant led Community Ophthalmology service in order to:
 - Improve the delivery of care to our patients locally
 - Obtain better value for money
 - To make referrals into this service simpler – especially for “urgent” cases
 - Support GPs in making referrals
 - To encourage patients in self management
- ◆ As part of this process patient pathway guidance will be produced which will help GPs in the referral management process. These pathways will be evidence based and should simplify the management of eye conditions in primary care.
- ◆ Optometrist colleagues will use the pathways so that they can refer directly into this service rather than burden GPs with the role of referring on when receiving a GOS18 form.

Local Consultation

- ◆ Discussion with LOC – July 2011
- ◆ Patient Consultation – July to August
- ◆ GP Consultation (Service Specification)
19 July 2011

Service Scope

- ◆ Multidisciplinary, community service, led by a fully accredited Consultant Ophthalmologist.
- ◆ The service will manage adults and children.
- ◆ Clinical triage of all Ophthalmology referrals with appropriate management (assessment, investigation and treatment).
- ◆ Located within community venues with a minimum of one per locality.
- ◆ Primary care education and pathway management.
- ◆ Patient education to enable self care and prevention.

Adults within Service

- ◆ Watery eye
- ◆ Dry eye
- ◆ Red eye
- ◆ Lid lesion
- ◆ Blepharitis
- ◆ Eyelash problem
- ◆ Floaters / flashing lights
- ◆ Field defects
- ◆ Retinal lesions
- ◆ Blurred vision
- ◆ Some emergency provision

Adults within Service

- ◆ Glaucoma: Screening, management of and follow up of ocular hypertension and suspected glaucoma as per NICE guidelines. Follow up of stable primary open angle glaucoma per agreed protocols.
- ◆
- ◆ Cataract: In the short term the service will act as a triage service for patients who may require cataract surgery, in line with the NW London PPwT (planned procedures with thresholds) pathway, and will undertake the approvals process on behalf of the patient/GP.

Paediatrics within Service

- ◆ Strabismus
- ◆ Amblyopia

Excluded from Service

- ◆ Routine tests, eye examinations or any spectacle prescription undertaken within General Ophthalmic Service (GOS)
- ◆ Diabetic retinopathy screening
- ◆ Wet/Dry AMD (or suspected)

Education

- ◆ Support and education for referring GPs and optometrists.
- ◆ A consultant telephone and email advice service.
- ◆ Open educational meetings for all GPs, optometrist, nurses and other community staff, 2 for each of 3 localities per year.
- ◆ In-clinic training for GPs, optometrists, including aspects of diagnosis and treatment to improve skills.

Referral Pathways

- ◆ Provider will receive referrals according to pre-determined criteria from Optoms and GPs.
- ◆ Pre-determined criteria to be drafted in conjunction with clinical lead of the service and HCCG clinical lead for Ophthalmology.

Expected Activity

Demographic	First attendance	Follow up
Adult	1753	3910
Paeds	247	356

Service Specifics

- ◆ Urgent referrals will be triaged within 4 hours, appointment same day or next day.
- ◆ Routine referrals will be triaged and patient issued with appointment within 2 working days.
- ◆ 95% Routine patients to be seen within 4 weeks.
- ◆ Service to offer choice and make referral for secondary care if required.

Work in Progress