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West Yorkshire

Eye Care Transformation Programme



Introduction









OUR JOURNEY



THE LAST 12 MONTHS



KEY ACHIEVEMENTS



NEXT STEPS











In the beginning



- Increased risk of sight loss and national recognition prompted action
 - The Way Forward Royal College of Ophthalmologists
 - State of the nation eye health 2017 report
 - NHSE Eyes Wise Elective Care Transformation
 - More than 1.5 million people in England have reduced vision. It is estimated that this figure would double by 2050.
 - The population is ageing One in five people aged over 75 and half of people aged over 90 live with sight loss
 - NHS Digital 2017
 - Ophthalmology referrals to hospital eye services rose just over 12% from 2013/14 to 2017/18 and now account for just over 8% of outpatient appointments
 - Ophthalmology High Impact Intervention specification launched 2018, developed with The Royal College of Ophthalmologists, the Clinical Council for Eye Health Commissioning, the RNIB, the Local Optical Committee Support Unit and the College of Optometrists, along with NHS Digital and the Getting It Right First Time programme.







- Opportunities to ensure patients receive assessment, treatment and care in the most appropriate setting, first time:
 - Improving referral processes to remove unwarranted variation. (Royal College of Ophthalmologists, 2017).
 - Improving processes and efficiencies in outpatient clinics (Royal College of Ophthalmologists, 2018), (Clinical Council for Eye Health Commissioning, 2018).
 - Addressing lack of capacity, optimising the skills and expertise available with multidisciplinary working across primary and secondary care (Royal College of Ophthalmologists, 2017).
 - Improving data collection and coding, ensuring intended dates for treatment and risk of harm can be recorded.
 - Engaging and empowering patients to self-manage, supporting patients with co-morbidities.









In the beginning



- Sufficient evidence to support establishment of the West Yorkshire Eye Care programme
- Approved in March 2018 by ICS and launched November 2018
- Programme team identified WY Director Planned Care, Project Manager, Project support admin
- Vision
 - Working together to transform the way we deliver eye care so that all patients receive the same high-standard of care, when they need it and in the most appropriate place
- Ambitions through clinical engagement and collaboration
 - Improve clinical outcomes to reduce the risk of irreversible sight loss
 - Improve patient care and experience
 - Address health inequalities
 - Reduce variation in service provision across WY&H
 - Ensure patients have equitable access to eye care services so they are seen in the right place at the right time
 - Increase capacity and achieve system-wide efficiencies through the 'left shift' of services where clinically appropriate and viable









Our journey



- Decision to concentrate on 5 key areas:
 - Glaucoma
 - Cataract
 - AMD
 - Diabetic Retinopathy
 - **Paediatrics**
- Invitation to eye care representatives across eye care network including; acute trusts, primary care optometry, LOC's, LOCSU, support services, charities (Macular society / RNIB) and partners to attend introductory day to meet the programme team and plans to tackle the highlighted issues.
 - Acute Trusts included:
 - Leeds Teaching Hospital NHS Trust
 - Bradford Teaching Hospital NHS Foundation Trust
 - Calderdale and Huddersfield NHS Foundation Trust
 - Mid Yorkshire Hospital NHS Trust
 - Airedale NHS Foundation Trust
 - Harrogate & District NHS Foundation Trust
- Each Trust allocated one of the project groups to lead, identifying a Clinical Lead Ophthalmologist to represent the group.
- Clear governance structure within programme and ICS for sign off and approval as required









Our journey



Continuous engagement, collaboration, innovation

Cataract

- Agreed standardised pathway considering innovation efficiencies and MDT workforce
- One stop design pathway within HES
- Design standardised referral form
- Agree bilateral consent pathway
- Discuss and agree bilateral surgery on individual surgeon basis
- Engagement to agree way forward for EOS pathway
- **Encourage NOD participation**

Glaucoma

- Agreed standardised pathway considering innovation efficiencies and MDT workforce
- Engagement to agree way forward for EOS pathway - inclusion of a primary care referral refinement element
- Support business case development to introduce new procedures and surgeries – MIGS, Micropulse in all units
- Ensure NICE compliance

AMD

- Agreed standardised pathway considering innovation efficiencies and MDT workforce
- Engagement to agree way forward for EOS pathway
- Standardise visual acuity for treatment across units
- Designed referral from for fast track wet AMD referrals with failsafe mechanism
- Implement HCQ monitoring in all units and design patient information
- Support transition to a nonmedical injecting workforce
- **Ensure NICE compliance**
- **Encourage NOD participation**

Other

- Specification engagement and procurement of new EeRS referral system
- Funding secured for training and development across primary and secondary care (in line with EOS expansion)
- Standardise Paediatric discharge policies
- Clinical thresholds reviewed
- Collate EOS activity to baseline for optimisation
- Sharing of protocols, SOP's to standardise best practice and service delivery

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Reallocation of colleagues to support pandemic and elective recovery 2020-2021

Ensure risk stratification of patients
National Eye Care Recovery
Transformation Guidance being
implemented at place



The Last 12 months



- New eye care transformation programme team appointed 21/22
 - Project support admin appointed and commenced November 2021
 - Programme Lead appointed and commenced January 2022
 - Project Manager appointed August 2022
- Continuation of project groups Glaucoma, Cataract, AMD
- Re-introduction of paedatric project group
- Introduction of new project groups digital, high-volume diagnostics (link with CDC programme)
- Focus on communication, awareness and prevention, training and education, Optometry First











Key achievements / ongoing deliverables



Continuous engagement, collaboration, innovation

Cataract

- Innovation direct to list pilot (Optometrist to HES)
- Agreed referral form for new electronic EeRS referral enabler
- Shared care decision making discussion – to improve surgical conversion
- Engagement with network regarding new EOS specification in readiness for recommissioning

Glaucoma

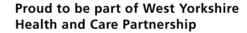
- Secured agreement for expanding EOS glaucoma pathway (inclusion of referral refinement with imaging)
- Implement SLT guidance equitable access
- Standardising and supporting equitable access to treatments
- Embed risk stratification in line with qualifications STRAT FAST
- Ensure angle closure guidance shared and implemented

AMD

- Task and finish group created to coordinate implementation of new AMD medicines to ensure equitable access for patients
- Agreed way forward for new and switch patients inc patient information
- Secured agreement for expanding EOS AMD pathway (inclusion of referral refinement with imaging and low risk monitoring post treatment)
- Identification of HCQ patients to improve failsafe mechanism

Paediatrics

- Integrate specialist eye tests for children, young people and adults with learning difficulties
- Development of the MDT to expand practice to support Paed Ophthalmology workforce pressures













Key achievements / ongoing deliverables



Continuous engagement, collaboration, innovation

High Volume Diagnostics / CDC's

- Secured inclusion of Ophthalmic high-volume diagnostics within CDCs – working alongside CDC programme
- FAQ to support technicians with sporadic questions to reduce time impact for virtual reviews

Digital

- Digital strategy to advance ambition for shared care record between primary and secondary care
- Continued support to regional EeRS project team – first adopter in WY this month
- Integrating WY agreed referral forms and inclusion of direct referral from primary care to ECLOs
- Anterior segment pilot in collaboration with Bfd University
- My eve health platform patients / eve care professionals info platform (funding bid awaiting approval)
- Pursue Medisight transition for all Trusts
- Ambition of one shared eye record across primary and secondary care

Other

- Business case to procure EOS fit for purpose in line with Optometry First – engagement across programme supporting this work
- Secured £650k for primary care optometry education and training to support enhanced optical services expansion
- Monthly communications newsletter on key eye care transformation and key information
- PIFU patient action cards developed at sub-specialty level to support patients identify access and overall performance
- Awareness and prevention roadmap paediatrics to elderly to increase awareness of access and culture to eye care provision (still in development)
- Work with SNOOK supporting the NECRTP to develop a WY eye care model in support of the national eye care business case for change
- Bring forward support services at a national level
- Training and education podcasts, teaching presentations, live event
- Raise risks across service provision to ICS attention
- Monthly WY eye care newsletter to reach the network and beyond
- Include patient reps into project groups

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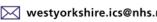


Next steps



- Key focus Q3 Q4 of 2022/23
 - Submit business case for approval including expansion of Enhanced Optical services based on engagement within dedicated project groups and in line with national NECRTP guidance
 - Commence procurement for commissioning of Enhanced Optical Services
 - Open applications for training and education for primary care optometry enhanced qualifications
 - Glaucoma
 - Medical Retina
 - **Independent Prescribing**
 - Coordination of clinical placements
 - Go Live of first implementer of new electronic EeRS referral system
 - Draft roadmap for eye care awareness and prevention
 - My Eye Health Platform if monies secured











- Collaboration across eye care network
- MDT approach to design, service improvement and change
- Platform to promote eye care services and build trust across primary and secondary care
- Support elective recovery and operational challenges
- Creativity and innovation drawn to forefront of discussion
- Safe, inclusive and respectful forum for local discussion and way forward
- Declare our desired results, reality and responses to formulate local vision
- Progress eye units in parallel
- Reduce the gap across professions and support services
- Standardise practice and improve services to the local population





