

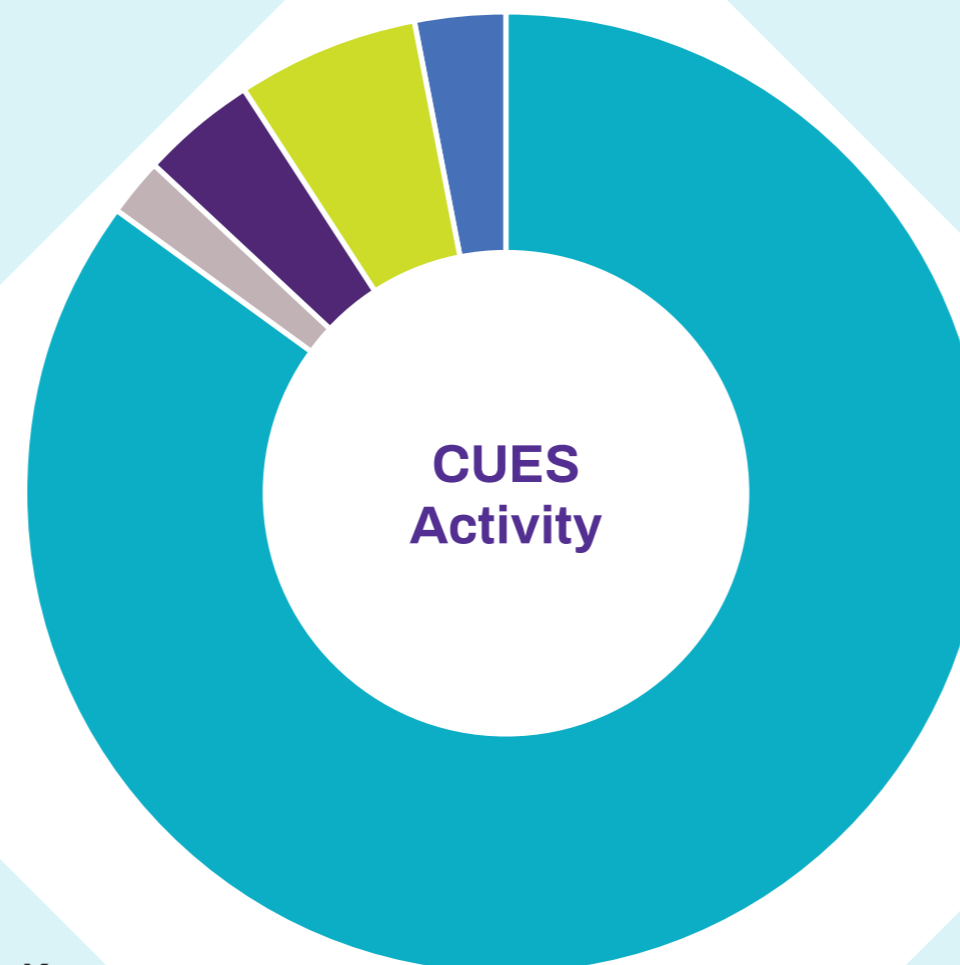
## Description of Intervention

Optometry First is a comprehensive new care model which promotes utilising Primary Care Optometry in the delivery of first contact care to resolution and continuity of care for people with long-term eye condition, working in partnership with the hospital eye service.

The Isle of Wight is one of the three early adopters for Optometry First, the local commissioners, primary care, secondary care and third sector collaborated closely to implement three interventions (data from Primary Eyecare Services):

- Implementation of CUES telemedicine hub – reducing the pressure on the island workforce and releasing clinic capacity for conditions requiring face to face examination. In 2022/23, 1063 CUES patients were seen in the community and only 192 were referred to secondary care from CUES
- Implementation of a pre-cataract service – reducing hospital activity and increasing conversion rate to surgery. This was introduced in Q2 of 2022/23 and 112 patients were seen in primary care
- Implementation of a post-cataract service – ensuring community based follow up 4-6 weeks after surgery with re-referral into the HES only where clinically indicated while providing ophthalmologists with NOD data

## Impact on HES Referrals 2022/23 (Data From ICB)



### Key

- Discharged (managed by service) 85%
- Refer to GP 2%
- Refer to HES (routine) 4%
- Refer to HES (urgent) 6%
- Follow-up 3%

- Emergency Department activity was 71% of pre-pandemic level – a decrease of 178 appointments
- Emergency Department seeing more urgent (appropriate) cases, (53% compared to 45% in 2019/20)

## Intended Objectives

- Enhance patient care
- Elevate patient experience
- Improve access to care
- Reduce access and health inequality
- Support care close to home
- Reduce hospital waiting time
- Reduce unnecessary hospital activity

## Outcomes

Value for money – increased efficiency through reduction in ED attendances and outpatient appointments.

Patient experience – positive patient feedback regarding quality of care received and access. HES able to redirect capacity to address other pathways and waiting list, improving other patients' care indirectly.

Improving workforce resilience – utilisation of existing resources more creatively and on integrated pathways increases pathway resilience and addresses traditional recruitment barriers.

Managing demand – HES able to redirect resources to focus on restoration and recovery of services post-pandemic.

## Next Steps

- Continuation of existing service (CUES / Integrated Cataract pathway into 2023/24)
- Development of an integrated glaucoma pathway

## Other Key Contacts

Bryony Allen – Hampshire LOC, Primary Eyecare Services.