



Black Country LOC Glaucoma Referral Analysis 2024

At A Glance

- Demonstrating the effectiveness of a Glaucoma Enhanced Case Finding (ECF) Service
 - Comparing referral activity in areas with and without a Glaucoma ECF service
 - Proving that an ECF service decreases the number of first appointment activities per Trust
 - Supporting the case for the System-wide commissioning of Glaucoma ECF
-

Challenge

The Black Country ICS serves a population of 1.21 million people. The LOC areas of Dudley, Sandwell, Walsall and Wolverhampton, that make up the Black Country footprint, each have an NHS Trust Hospital with an eye department.

A Glaucoma Enhanced Referral Service (GERS) which is a form of Glaucoma Enhanced Case Finding (ECF) service was introduced in Wolverhampton in 2019 which shows that, on average, 50% of patients are deflected from being referred to the Hospital Eye Service (HES). Despite constant lobbying from the LOCs, this service has not been adopted across the whole of the Black Country footprint.

In 2024 there was a System-wide implementation of an Eyecare electronic Referral Service (EeRS) provided by the Cinapsis referral platform. All four system trusts have implemented EeRS, and 85% of Optometric practices in the region are signed up to use EeRS. The introduction of the Cinapsis EeRS platform has made available accurate data on the number of Glaucoma referrals to Trusts.

This review of EeRS and GERS data from 1 October 2024 to 31 December 2024 aims to understand glaucoma referral patterns and volumes to help determine if expanding GERS to Dudley, Sandwell, and Walsall would reduce referrals, freeing up hospital resources and shortening hospital waiting lists.

The Data Analysis

Data was taken from the Cinapsis Referral platform and the Opera management system of the GERS service. The data used covers the period from October 1 to December 31, 2024. Referrals into Black Country Trusts from practices outside the Black Country were not included, as local pathways and referral protocols in other systems differ.

Glaucoma Referrals Via Cinapsis

The table below shows a summary of all the referrals via the new EeRS platform (Cinapsis) from Primary Care Optometry Practices to Black Country Trusts over the period solely for suspicion of Glaucoma.

NHS Trust	Total No. of referrals	No. of Glaucoma Referrals	Percentage
Sandwell	920	178	24.8%
Dudley	920	248	26.9%
Walsall	467	128	27.4%
Wolverhampton	926	91	9.83%

Glaucoma Referrals from GERS

Over the same period, GERS data shows the number of patients seen in the Wolverhampton GERS service that would have been referred to the Trust if the service did not exist = **167**.

Total Numbers of Suspect Glaucoma

To calculate the total number of patients seen by Optometrists in the community in Wolverhampton suspected of having Glaucoma we have to combine Cinapsis and GERS data as shown below:

	TOTAL NO OF REFERRALS	TOTAL NO FOR GLAUCOMA	PERCENTAGE
CINAPSIS REFERRALS TO WOLVERHAMPTON	926	91	9.83%
PATIENTS REFERRED TO GERS	167	167	100%
	1093	258	23.60%

The total number of patients with suspected Glaucoma in Wolverhampton was **258**.

GERS Outcomes and Hospital Activity

When comparing HES activity levels between Trusts, we must include patients that were referred to Royal Wolverhampton via GERS, which is independent of Cinapsis.

Of the 167 patients seen in GERS, 90 were deflected and discharged from the service, resulting in a 54% discharge rate.

The number of suspect Glaucoma patients referred to the Wolverhampton Trust from GERS = **77**.

These referrals are not processed through Cinapsis, therefore they do not appear in the EeRS statistics.

To calculate the total number of patients referred to the Royal Wolverhampton Glaucoma clinic for suspect Glaucoma, the EeRs and GERS referral numbers are totalled.

91 EeRS referrals plus 77 GERS referrals = Total 168 patients referred for Glaucoma.

Royal Wolverhampton	Referrals	No. of Glaucoma	Percentage
Cinapsis Referrals	926	91	9.83%
GERS Referrals	77	77	100.00%
Totals	1003	168	16.75%

Results and Outcomes

NHS Trust	Total No. of referrals	No. of Glaucoma Referrals	Percentage
Sandwell	717	178	24.83%
Dudley	920	248	26.96%
Walsall	467	128	27.41%
Wolverhampton	1003	168	16.75%
Totals	3107	722	23.24%

- 16.75% Referral rate for suspect Glaucoma to Wolverhampton
- Significantly lower than any other Trust
- Suspect Glaucoma referrals are being managed within primary care within the locally commissioned GERS service
- Adoption of GERS to the other parts of the system would have an immediate and similar impact upon volumes of suspect Glaucoma referrals being sent to the other hospital trusts

The table below shows the potential impact on the number of Glaucoma referrals to each Trust, assuming the GERS service was introduced across the Black Country.

	Sandwell	Dudley	Walsall	Total
Total number of referrals	717	920	467	2104
Total number of Glaucoma referrals	178	248	128	554
Current referral rate (%)	24.83%	26.96%	27.41%	
No of referrals if rate reduced to 16.75% by GERS	120	154	78	352
Referrals saved per quarter	58	94	50	202
Likely percentage reduction in activity	8.1%	10.2%	10.7%	9.6%

- 202 first appointments saved per quarter
- over 800 first appointments saved per year
- Does not include data for any follow-up appointments that patients being monitored at HES before discharge may require

Conclusion

Referral data from GERS and Cinapsis shows that the introduction of the GERS, an Enhanced Case-Finding Service following the LOCSU pathway, across the system will decrease the number of first appointment activities per Trust by an average of 9.6%, an expected saving of over 800 first appointments across the Trusts per year.

Patients seen in the GERS service are seen closer to home, and more quickly, for their first investigative visit. If referral is warranted, patients understand more about the nature of their referral and the need to attend.

GERS referrals contain a comprehensive data set, enabling Trusts to make informed decisions about patients at first attendance, streamlining care pathways and potentially reducing the number of further appointments at HES. Since suspected Glaucoma referrals often require multiple eye clinic appointments due to the need for various tests and

monitoring to confirm the presence or absence of Glaucoma, the cumulative activity savings for Glaucoma clinics would facilitate a more rapid reduction in waiting time lists.

The data strongly supports the proposal to commission GERS across the whole of the Black Country to deliver benefits such as reducing referrals, freeing up hospital resources, and shortening waiting lists.

LOC Case Study – Black County Local Optical Committees

Acknowledgements:

Charles Barlow, EeRS Lead for Black Country LOCs (Author)

Divya Sudera, Chair Sandwell LOC (Editorial Oversight)

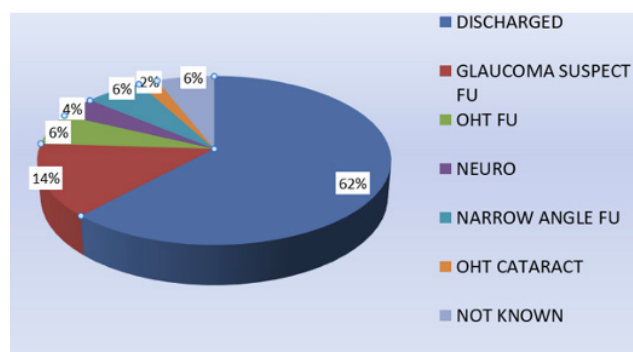
Wasim Sarwar, Clinical Lead Primary Eyecare Services Limited for GERS data

Further Information

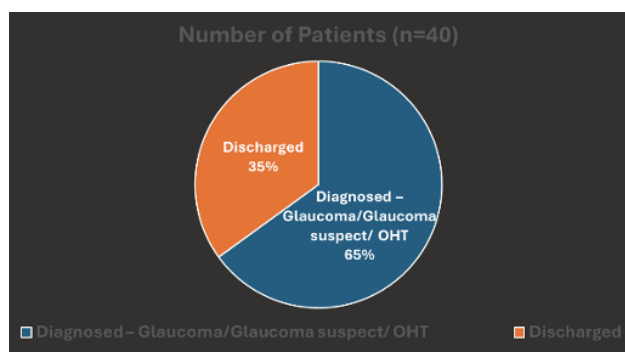
GERS Service Information

Wolverhampton Glaucoma Enhanced Referral Service was introduced in 2019 following a 2017 Trust audit showing that 62% of Glaucoma referrals were discharged after the initial appointment. To assess the effectiveness of the service, a similar audit was completed in 2024 confirming that the initial discharge rate has been more than halved.

2017 Audit

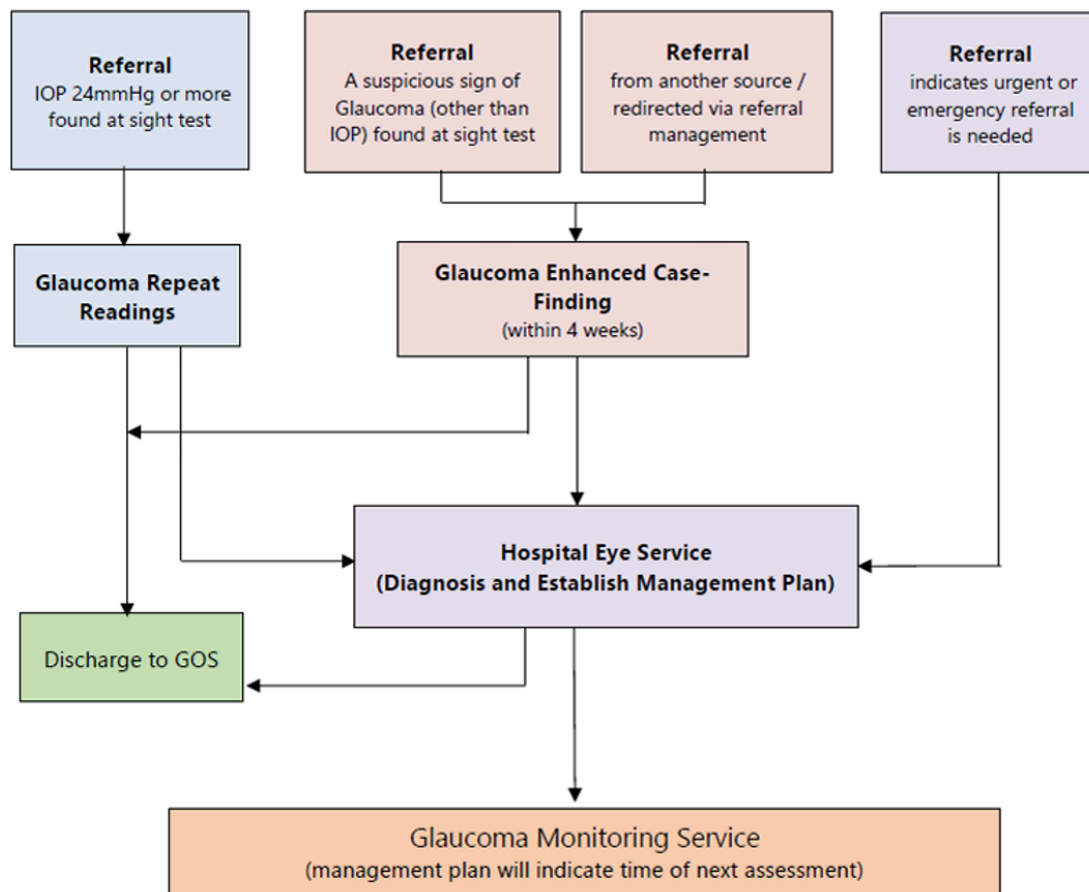


2024 Audit



If an optometrist suspects Glaucoma after a sight test, the patient is scheduled for further assessment at an optical practice. An optometrist with advanced qualifications conducts additional tests, including a detailed history, repeat pressure check, visual field test, and dilated examination of the optic nerve. This approach helps determine if a referral to HES is necessary or if the condition can be managed locally, thereby reducing unnecessary referrals.

Wolverhampton Glaucoma Pathway



Benefits of GERS to patients:

- Access is more convenient
 - On High Street vs. travelling to hospital
 - Flexible timing vs. set clinic times
- Reduces anxiety, cost and time commitment associated with false positive referrals

Benefits of GERS to the NHS:

- Relieves pressure on hospital eye services through:
 - Reducing false positive referrals; and
 - Shifting activity to community settings
 - Accelerated reduction in waiting time backlogs
- Frees up ophthalmologist time to focus on more complex and high-risk patients
- Potential Net Financial benefit as activity in Trusts may not be a single appointment because many Glaucoma referrals automatically have follow-up appointments

Benefits of GERS to Staff:

- Optometrists can provide a wider range of clinical services – increasing satisfaction, recruitment & retention
- Facilitates best use of specialist HES staff

Benefits of GERS to wider society:

- Reduces productivity loss as patient travel commitments reduced
- Secondary contribution to reducing sight loss as releases capacity for higher-risk patients – widespread economic & social benefits