Title: Update from Barking and Dagenham CCG on Eye Care pathway review

Report of the Barking & Dagenham Clinical Commissioning Group

Open Report  For Information

Summary:

In 2014/15 the Health and Adult Services Select Committee (HASSC) conducted an in-depth review of local eye care services and the final report was presented to the Health and Wellbeing Board in October 2015. The reason for commissioning the review was a concern that the people may be experiencing difficulties in obtaining care and therefore missing treatment that could otherwise prevent serious sight loss.

The key findings of the review was that:

- The current arrangements [for eye care] seemed complex and difficult for patients to understand;
- It was not clear that everyone who should have a sight test was getting one; and
- It was not clear to that the pathway fully promoted choice and control by service users.

The Health and Wellbeing Board agreed to oversee a review of the eye care pathway and this paper provides on how the recommendations have been taken forward and what changes have been put in place or are planned.

Recommendation(s)

The Committee is asked to note this update report.

1.0 Purpose of the Report

1.1 The purpose of the report is to provide an update to the Committee on the actions taken in response to the recommendations of the HASSC’s review of local eye care services.

2.0 Background/Introduction

2.1 Eye care services are commissioned by the CCG (secondary and tertiary care ophthalmology services), NHS England (community optometry and diabetes retinopathy services) and Public Health (school nursing services). The CCG’s commissioning action has focused on introducing service change and innovation through its current main contracts. This approach has potential to identify resource that can be redeployed for additional pathway improvements.
2.2 The Health and Adult Services Select Committee undertook an in-depth scrutiny review into local eye care services in 2014/15. The final report was presented to the Health and Wellbeing Board on 20 October 2015.

2.3 The findings of the review led to a number of recommendations being made to the Health and Wellbeing Board. Having considered the review and its recommendations, the Board agreed to:

(i) Oversee a review by the Barking and Dagenham Clinical Commissioning Group (CCG) of the local eye care pathway, given that:

- The current arrangements seemed complex and difficult for patients to understand;
- It was not clear that everyone who should have a sight test was getting one; and
- It was not clear to the HASSC that the pathway currently fully promoted choice and control by service users;

(ii) Oversee a review by the CCG, which would consider the clinical benefits of community optometrists (high street opticians) being able to refer patients directly to hospital eye clinics and other services, rather than having to do this via GPs;

(iii) Ask the CCG to consider the benefits of commissioning an ‘Eye Care Liaison Officer’ for local residents, to ensure that people with newly acquired sight loss were provided with support at the point of diagnosis and were signposted to appropriate services;

(iv) Ask the CCG to consider whether cost-effective improvements could be made to local low vision services;

(v) Oversee a local communication campaign, to be undertaken by the Council’s Public Health Team, which would emphasise the importance of having regular eye tests, whilst also delivering other important eye care messages as part of the future programme of public health campaigns;

(vi) Consider what options could be used to ‘make every contact’ count and introduced a scheme or schemes to encourage and possibly incentivise parents to arrange an eye test for their child prior to starting school;

3.0 Update on CCG actions

3.1 The CCG was asked to review the eye care pathway and consider the clinical benefits of community optometrists (high street opticians) being able to refer patients directly to hospital eye clinics.

3.2 The CCG initiated a joint procurement for a community eye service in September 2015 with Redbridge CCG. The procurement sought to commission a community-based service for the management of minor eye conditions (such as blepharitis, dry or watering eyes and eyelash problems) as well as suspected cataracts and the treatment and/or management of glaucoma.
3.3 Direct referral by optometrists to the community-hospital eye clinics was included in the service specification, which was designed to streamline the referral process. The potential opportunity for this change was confirmed at a pre-procurement meeting attended by the Local Optical Committee and other providers.

3.4 The procurement process was concluded in March 2016 and did not result in the CCG awarding a contract.

3.5 The ophthalmology pathway review is now being taken forward in the context of the referral to treatment time (RTT) programme across the BHR CCGs and BHRUT. This programme has been established to ensure delivery of the NHS constitutional target for waiting time performance in response to long waiting times for some specialities provided by Barking Havering and Redbridge University Hospitals NHS Trust (BHRUT). Ophthalmology has been identified as one of the top ten specialities where further work around RTT and sustainability is required.

3.6 Each CCG is leading on three pathway reviews. Havering is leading on the ophthalmology review on behalf of the Barking & Dagenham and Redbridge CCG’s. Havering CCG and BHRUT Clinical Leads have started to work jointly on the glaucoma pathway redesign, with the support of designated clinical directors and clinical leads. Glaucoma has been agreed as the priority area as this provides a substantial amount of ophthalmology activity at BHRUT, and delays in treatment could have an impact on patient outcomes.

3.7 A clinical review of the review of the current glaucoma pathway has identified improvements to the glaucoma pathway, this includes provision of glaucoma referral refinement, and monitoring of stable glaucoma patients with community services. This will be implemented by December 2016, to increases the capacity of secondary care for patients with complex glaucoma.

A project group has been established to oversee the delivery of the new pathway. The Ophthalmology Glaucoma pathway has been based on the following evidence:

- Report of the Health & Adult Services Select Committee – Local Eye care services In depth Scrutiny Review 2014/15
- UK Vision Strategy case for change
- Commissioning Guide: Glaucoma (recommendation (June 2016), The royal College of Ophthalmologists

The pathway will also allow for direct referrals from optometrists, as is the case in other areas, and discussions have begun with the Local Optical Committee agree how to take this forward.

3.8 The CCG was asked to consider the benefits of commissioning an ‘Eye Care Liaison Officer’ for local residents. This service is provided through some secondary care providers (e.g. Barts Health) commissioned by the CCG and used by Barking and Dagenham patients. Further consideration is required to determine whether this is a service that BHRUT could provide within existing financial resources. It is
expected that this will be taken forward in wider discussions regarding the redesign and sustainability of local ophthalmology services.

3.9 The CCG was asked to consider whether cost-effective improvements could be made to local low vision service which operates out of both King George’s and Queen’s hospitals. This service supports the delivery of low vision assessments for residents of Barking and Dagenham who still experience sight problems after having an eye test and wearing the right contact lenses or glasses.

The service offers a two-stage assessment of visual need where the service user will see both a low vision therapist and an optometrist. At the end of the assessment they may be issued with a low vision aid that best meets their need and provided with the support/training on how to use the aid. The service user may also be offered advice about using magnification, task lighting, contrast and managing glare.

The opportunity to review and potentially extend this service can be included as part of the CCGs pathway review of ophthalmology.

4.0 Update on LBBD actions

4.1 A local communication campaign has been designed and developed in partnership between the Vision Strategy Group, LBBD communications team and public health. A campaign is due to be run in conjunction with eye health week – 19 -15 September 2016. The campaign will emphasise the importance of having regular eye tests, whilst also delivering other important eye care messages.

4.2 Eye tests for pupils are a requirement as part of the school nursing contract.

<table>
<thead>
<tr>
<th>Activity Indicators</th>
<th>Threshold</th>
<th>Method of measurement</th>
<th>Reporting frequency</th>
<th>Consequence of breach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine health reviews: Year 1 vision test</td>
<td>95%</td>
<td>% children at Year 1 Health Review with Vision Test completed</td>
<td>Per term end</td>
<td>Improvement plan to be agreed with Commissioners</td>
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Date: July 2016