



The ROYAL COLLEGE of
OPHTHALMOLOGISTS

The Royal College of Ophthalmologists calls for urgent action on eye health services

Saving and preserving sight can significantly enhance quality of life and reduce dependency on health and social care

Demand has increased by over 30% in outpatients across the NHS England in the last five years from 5million to 6.5million due to an increasing ageing population that suffer from chronic diseases such as glaucoma, AMD and diabetes and more successful treatments that require more time and medical resource.

The Royal College advocates the following actions as a priority for UK eye care services that ensures **‘the right eye care professional in the right location at the right time’** to treat and preserve sight for all patients.

Evidenced based commissioning of services to optimise properly costed and resourced clinical service provision both in hospital and community settings

- Remove arbitrary tariffs that ‘reward’ new patients and disadvantage follow up patients
- Target limits for new patients should be broadened and varied to reflect the urgency and risks of particular conditions and diagnoses

Utilise extended work-force teams that are ophthalmology led

- Implement extensive training programmes for optometrists, orthoptists, nurses and ophthalmic technicians: assessed competencies, continued professional development, appraisal, personal audit and revalidation for this extended workforce

Develop IT and communication infrastructures to manage patients seamlessly within the system

Collect data and analyse for quality assurance to identify needs at local and national levels

- All hospitals to collect and share compulsory data for outcome measures, analysis and benchmarking
- Safety and alert mechanisms to be introduced to identify and appoint patients who are falling out of recommended review times

Improve patient awareness about the importance of follow up appointments for chronic eye disease and eye health

- Education campaigns highlighting risks of delayed follow up
- Reach vulnerable groups
- Educate healthcare staff

Evidence of continued lack of capacity and causes

Lack of capacity has left clinics and treatment sessions significantly overbooked

- New models of working have been implemented using the full ophthalmic care team in hospitals, but now insufficient manpower means that patients are not always seen within safe time limits
- Successful new treatments for diseases such as AMD, diabetic retinopathy and vascular retinal disease means more patients are diagnosed earlier and require a programme of sustained follow-up care and treatment
- Publication of NICE guidelines for the treatment of glaucoma which clarified monitoring intervals for this disease has altered clinical practice unrecognisably

Patients are losing vision whilst on waiting lists through lack of capacity and delays to follow up treatment within clinically recommended time.

- A survey of hospital ophthalmology clinical leads carried out by the Royal College in 2012 identified evidence of widespread delays to ophthalmic follow up appointments
- Reported cases to the NRLS have increased more than 20 fold between 2009 and 2013 with nearly 500 patients suffering deterioration or loss of sight from delayed hospital appointments between 2011 and 2013
- The 2013 RNIB document 'Saving Money, Losing Sight' found that 41% of the ophthalmology staff surveyed in England recognised that patients were sometimes or often losing vision due to delayed treatment or monitoring (similar survey with same results in Wales, 2014)
- The Macular Society identified that 67% of cases of age related macular degeneration (AMD) were not meeting the follow up times that were clinically indicated (2013) from a questionnaire to Trusts using Freedom of Information
- In 2003, 25 patients lost vision due to eye department appointment cancellations at the Bristol Eye Hospital (reported to the Commons Public Administration Committee). Insufficient capacity coupled with targets for new patients were recognised to be distorting clinical priorities for returns – a practice that was advised to stop
- In 2009 the National Patient Safety Agency (NSPA) identified that it had received 44 reports of concerns about patient safety due to delays in appointments for glaucoma patients, of which 13 went blind (4 year period)

The Royal College of Ophthalmologists is the professional body for doctors that specialise in eye health and members are on the front line of eye care services

- Ophthalmologists are the only medically trained professional that specialises in the medical and surgical care of patients with eye diseases
- They are experts in their field – trained for a minimum of seven years as a doctor with a further minimum of seven years postgrad specialist training in ophthalmology
- Whilst hospital based they are part of a multi-professional collaboration pathway for delivering optimum eye care for patients

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