



The Royal College of
Ophthalmologists

PRESS RELEASE: LONDON, 30 Sept 2014

The Royal College of Ophthalmologists recommends consultant ophthalmologist-led eye health services to overcome capacity issues and reduce sight loss

A response to NHS England's Call to Action – 'Improving eye health and reducing sight loss'

The Royal College of Ophthalmologists is the professional body that represents ophthalmologists, who are medically qualified eye doctors in the UK. In its response to NHS England's Call to Action – 'Improving eye health and reducing sight loss', **the College states that patients must be seen by the appropriate medically qualified professional in the right location and at the right time to improve capacity and reduce the risk of sight loss for patients.**

Lack of capacity, funding and sufficient long-term planning has been clearly identified by RCOphth and is at the heart of their response. They call on NHS England to urgently review eye health services in and out of hospital settings to meet the growing needs of patients in an ageing population.

The number of eye out-patients attendances increased by 30% from 5million to 6.5million (2008 – 2012). This increase has been absorbed as a result of efficiencies and the **successful introduction of innovative services through the use of multi-disciplinary teams working in hospitals.** RCOphth recommends that these teams of non-medical professionals, such as ophthalmic nurses, optometrists, orthoptists and technicians, are given mandatory and appropriate training to enable them to adequately support the needs of patients working alongside ophthalmologists.

Professor Caroline MacEwen, President of The Royal College of Ophthalmologists, is steering the response from the College and said, 'NHS England's Call to Action is a unique opportunity for us to help shape the future of ophthalmic services in the NHS. We are at the front-line where our consultants continue to experience capacity issues due to the large number of patients being referred and more successful treatments that preserve vision, but require regular and long term interventions. The use of multi-disciplinary teams has helped in the hospital sector, but a lot more needs to be done to ensure that such teams can extend their roles in the community with the right tools and training to effectively treat and care for patients using clinically led protocols, pathways and guidelines'.

RCOphth has also identified a need for Clinical Commissioning Groups (CCGs) to embed a **consistent approach to assessing the cost of eye health services** and for NHS England to remove arbitrary tariffs that 'reward' new referrals but put at risk the safety of existing patients with known eye diseases who require follow up appointments.

Professor MacEwen continues, 'In our response, we are calling for a number of key recommendations as hospital services are now overloaded and patients are at risk of not being seen in a timely manner. **Accurate and timely collection of data** as well as improving communication systems and technology, means patients should be managed in a joined up way throughout the primary and secondary care journey'.

Many of the recommendations by The Royal College of Ophthalmologists are a call for evidence-based financial decisions by Clinical Commissioning Groups and NHS England to optimise eye care services for the entire population and to improve access for disadvantaged and hard to reach groups. Standards of care and training for non-medical eye care professionals are required, together with dynamic implementation of innovative eye health services in hospitals and community locations. An approach that RCOphth says will ensure a more appropriate and efficient use of funding, resources and clinical expertise.

ends

Notes to Editors

Core recommendations by The Royal College of Ophthalmologists:

- **identify need** – gather accurate data
- **ensure adequate quality standards** and build in audit of practice for outcome data clarify **costs of** implementing the right service needs at a local/regional level
- **train the workforce** for extended roles across a number of medical and non-medical disciplines, continue to assess and maintain high professional standards
- **utilise consultant led pathways** – clinically evidenced based to meet the needs of patients
- **develop relationships** – communicate and collaborate across teams, both in and outside of hospital settings
- **provide adequate communication systems and IT** that help monitor, assess and identify patient follow up care

For the full response go to www.rcophth.ac.uk/calltoaction

About The Royal College of Ophthalmologists

The Royal of Ophthalmologists (RCOphth) is the only professional body for eye doctors, who are medically qualified and have undergone or are undergoing specialist training in the treatment and management of eye disease, including surgery. As an independent charity, we pride ourselves on providing impartial and clinically based evidence, putting patient care and safety at the heart of everything we do. Ophthalmologists are at the forefront of eye health services because of their extensive training and experience.

RCOphth received its Royal Charter in 1988 and has over 3,500 members in the UK and overseas. We are not a regulatory body, but we work collaboratively with government, health, charity and eye health organisations to recommend and support improvements in the co-ordination and management of eye care both nationally and regionally.

www.rcophth.ac.uk

For all press enquiries, please contact:

Liz Price, Communications Manager
The Royal College of Ophthalmologists

Liz.price@rcophth.ac.uk

Mobile: 07787 427720

Switchboard: 020 7935 0702