



Immediate Solutions to Address Demand and Capacity Pressures in the Hospital Eye Service

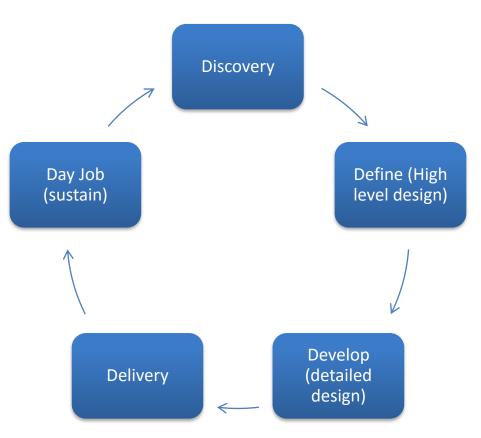
East Lancashire and Blackburn with Darwen Integrated Eye Service

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East Lancashire solution; Service Redesign







Discovery; June '14

HES High demand & rising!

- Referral demand = circa 1200 patients
- Conversion rate for cataract at 40%
- Polling time for cataract = 11 weeks
- Max 8 patients in HES Cataract clinics
- 100% post cataract activity delivered in the HES

<u>Also</u>

- GPs limited equipment & expertise
- Optometrists capacity not fully utilised nor linked to GPs or Ophthalmologists
- Specialist ophthalmology workforce - limited
- Referral pathways uncertain; resulting in duplicate appointments and delays for hospital based treatment
- Less than optimal patient experience





Define; co-design day event



Thinking Innovatively



Self-Care & Supporting Primary Care



Designing the Best Service for Patients

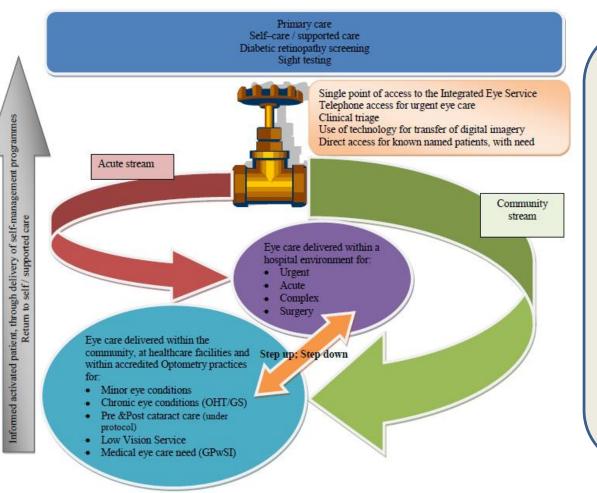


Opportunity to improve processes





Develop; detailed design



- Prime contractor model
- Robust governance
- Clinical leadership
- Trained and accredited optometrists
- Integrated IT system
- Integrated team (acute; community optoms; GPwSI; primary care)
- Education- other professionals & selfmanagement
- Jointly developed protocols
- Smooth seamless integrated pathways

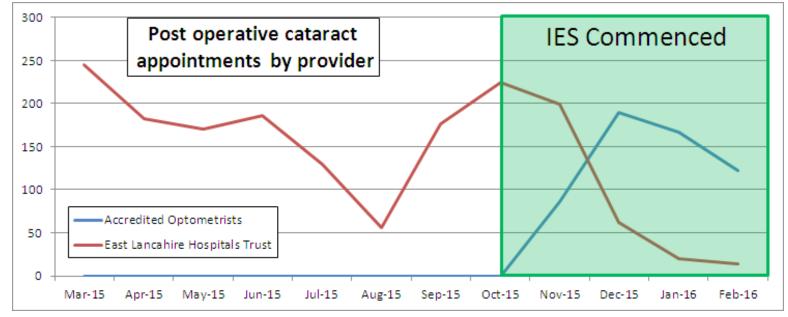




Delivery; from October '15

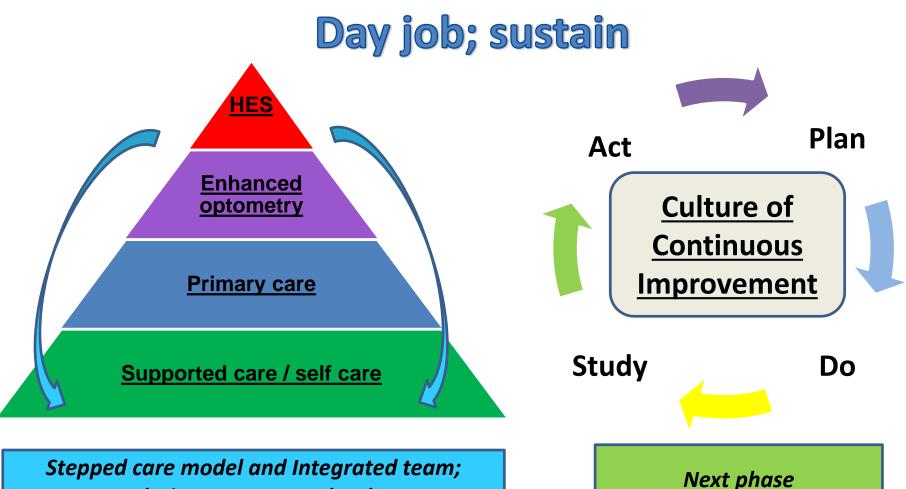
So how are we doing?

- Reduced HES referral demand = circa 800 patients
- Improved conversion rate for cataract; now at 80%
- Shorter polling time for cataract = 5 weeks
- 50% increase in HES cataract O.P. activity (12 patients in clinic instead of 8)
- Some 95% post cataract demand now provided in the community





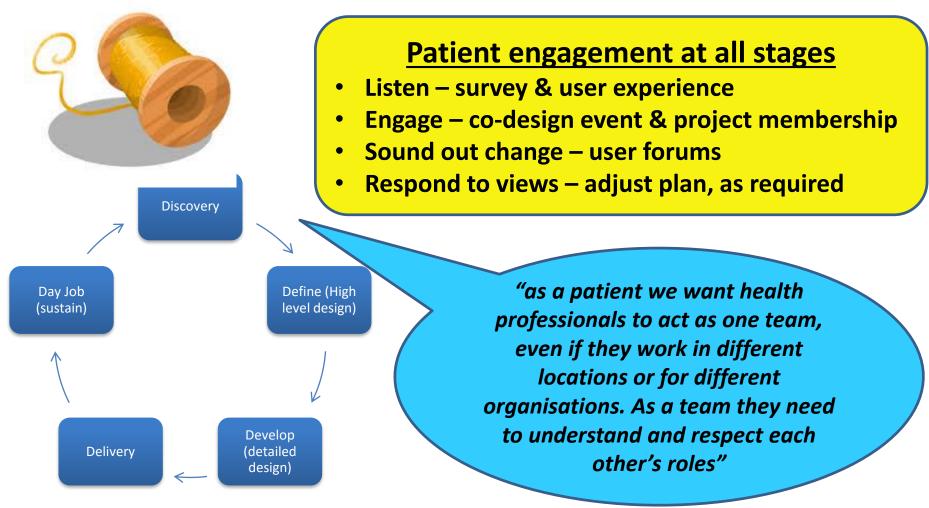








Summary; golden thread









Questions?

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