

Ophthalmology Engagement Analysis for NWL Overview and Scrutiny Committee Chairs

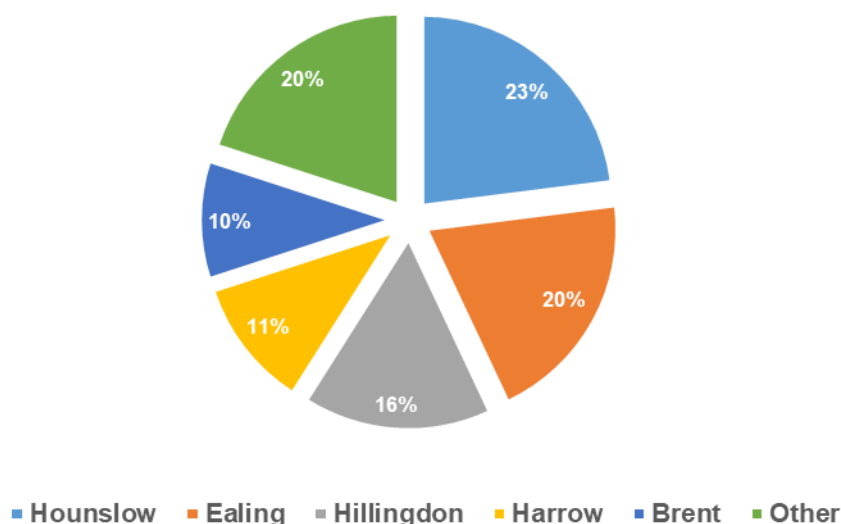
1.0) Background – Engagement completed on NWL ophthalmology pathway changes

NWL Integrated Care board (NWLICB) is completing work to commission a single specification for community eye care across the 8 boroughs within NWL. As part of this work engagement was undertaken with the residents of NWL on the current community eye services. This was part of the engagement exercises undertaken regarding the new pathway which also included online and face to face sessions with NWL residents to get their views on the new services being proposed.

2.0) Ophthalmology survey analysis

The survey was shared with the NWL Citizens panel and the Next Door digital platform. Within the Next Door platform, work on ophthalmology generated the fourth highest level of interest within May. The survey was also shared via NWL ICB engagement leads to borough specific local community organisations as well as local residents with a particular interest in health care. The survey was shared over a period of 7 weeks with a total of 101 responses received. The split of respondents by NWL borough is detailed in the diagram below.

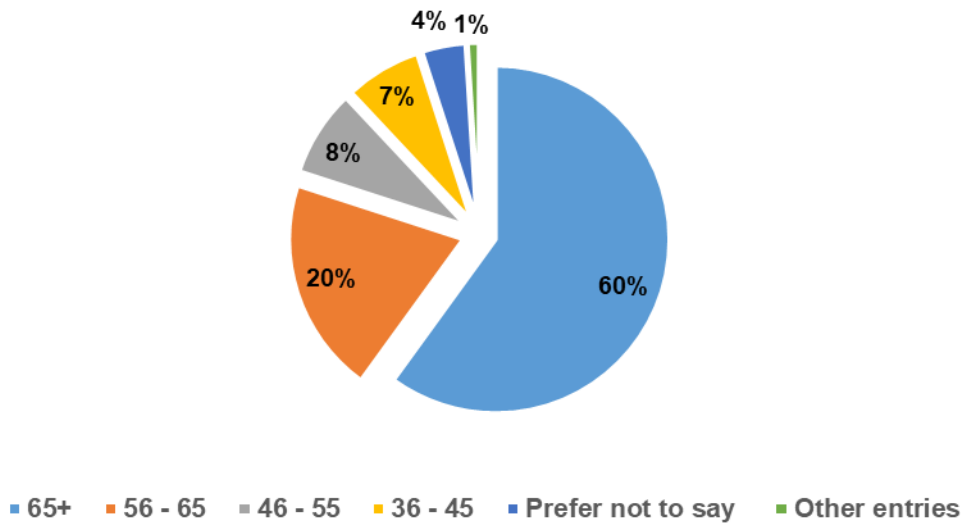
Which borough in North West London do you live in?



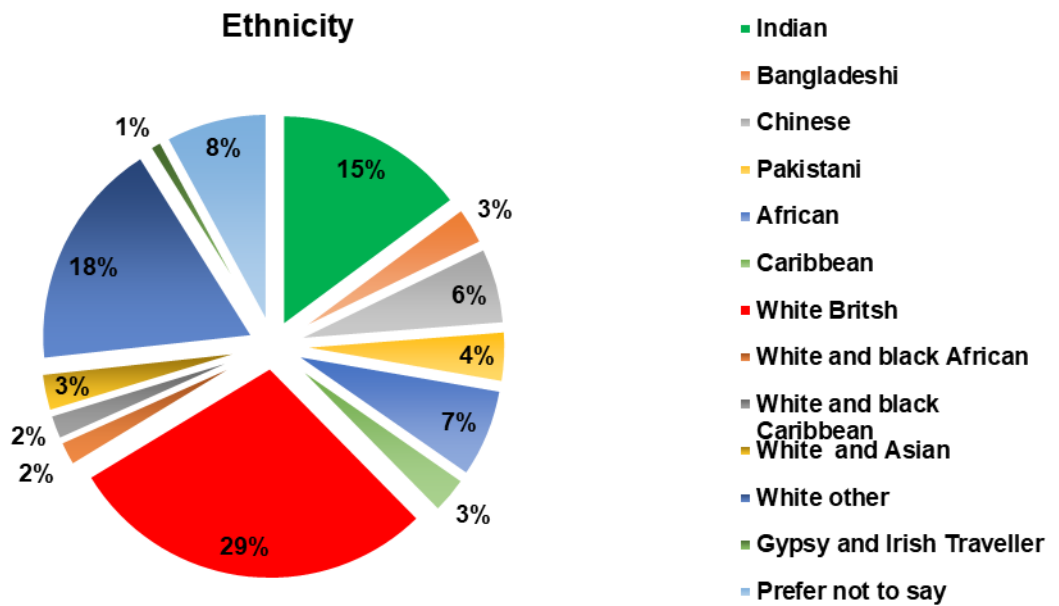
2.1) Demographics

The majority of patients responding to the survey were aged over 65 years (60%) with 20% of respondents aged between 56-64

What age group do you belong to?



The responses received for the survey were in line with the ethnicities that make up the communities within NWL with a wide range of ethnicities responding to the survey.



3.0) Survey responses

The responses received were in general positive with

- Majority of respondents finding the location of community services convenient (74%) including some comments regarding high street locations / community services in a place with good transport links being particularly preferable
- Majority of respondents stating the community service helped with the management of their health needs (61%)

- Majority of respondents said the service they received was very good or good (61%)

The table below gives a high level summary of the responses received for each question within the survey

Some of the survey questions	Brief feedback
Q1. Which type of community eye health services do you use or have used?	An assortment of services that people use. There does appear to be a well-defined knowledge and information about the range of eye services that people use.
Q1b). Are you a long term Glaucoma follow up patient?	23% indicated yes
Q1c). Please let us know if you are responding for a patient accessing the paediatric service?	Only 4% responded on behalf of a child
Q2. Are you being monitored for raised eye pressures or for monitoring of glaucoma treatment (drops)?	A number of participants indicated that they were being monitored for raised eye pressure
Q3. Are you also under the care with another ophthalmology service e.g.hospital?	23% indicated yes – it appears that the majority attend Moorfields
Q4. How do you find booking your community eye health service appointments?	Ease of booking mixed: 43% said very easy or easy and 32% said very difficult or difficult. However, on reading the comments. It is not so much the difficulty of booking it is the long waits between appointments
Q5. How do you get to your appointments?	22% walk, 23% bus, 20% car
Q6. Do you find the location of the community eye health service convenient	A huge number of 74% indicated that they find the location service convenient. With some indicating a preference of closer to home.
8. How would you rate the community eye health service you receive?	61% indicated that they rated their community eye service as either very good or good, whereas 20% indicated as very poor or poor
Q9. Has the community eye health service helped you manage your health needs?	61% indicated yes against 39%. The comments connected to this question were essentially positive

Some areas for improvement were also flagged which we will build into the delivery of the newly procured service. These included

- 32% of respondents found it difficult or very difficult to book appointments for the service. We will work with provider for the procured service to support approaches that may appointment booking easier for residents.
- Waiting times for services were also mentioned. As the procured service will be provided across a number of optometry practices within each borough, this will support a large capacity being available for the service. This should help to reduce waiting times for an appointment. We have also included key performance indicators within the service specification that will support patients being seen within 4 weeks for routine conditions.
- Comments relating to location where it was felt this could be improved included consideration of sites where long travel distances were undertaken and the modes of transport required (example given of travel from Ealing to Brent Cross which required a car in particular for patients unable to use public transport). The procured service will be provided by high street optometrists to help improve access with sites being available within the high street.
- Location comments also included Mobility requirements therefore where possible to have services provided from sites that are on the ground floor.
- 20% of respondents felt the services received were poor or very poor. One comment mentioned that the services were not convenient especially for older people.
- With regards to approaches that could improve their experience:
 - One comment flagged that hard copy letters should still be sent as communication about the services as they had problems accessing the digital letters sent to their phone.
 - Communication post the GP referral was also mentioned to keep patients aware of the service they have been referred to.

- One comment related to information being shared with patients regarding which services they could self-refer to, which required GP referral and how to get a GP appointment.

4.0) Online and face to face engagement sessions

A total of 14 online and face to face engagement sessions (3 online, 11 face to face) with 49 attendees, were held across the different NWL boroughs.

The sessions provided detailed information on the reasons why the service model for ophthalmology required some change and the proposed new model. These included:

- The rates of sight loss registrations being higher in 5 NWL boroughs (Harrow, Brent, Ealing, Hillingdon and Hammersmith and Fulham) than the London average
- Variations in rates of blindness in particular for three boroughs (Brent, Harrow and Hillingdon) compared with the remaining boroughs within NWL
- New model would be optometry led, increasing access to services through the provision of these from high street optometry practices

Feedback on the new model of care was supportive with participants seeing the value in supporting the early diagnosis of complex conditions that impact eye health and vision. It was also welcomed that there would be an improved link for opticians to the specialist to be able to support patient with preliminary and ongoing eye care

Comments were raised highlighting some potential areas which included:

- Where ongoing communication will be required, for example around charges for optician services and access to information on the different parts of the eye care pathway.
- Suggestions were also made on how to engage with harder to reach populations e.g. with the use of a mobile outreach van.
- Some queries were also raised including how would patients not currently suitable for treatment would be monitored so they could be identified when treatment is required.

Section 5 below details some of the frequently asked questions from these sessions.

5.0) Community Ophthalmology engagement frequently asked questions

Frequently asked questions from the ophthalmology engagement sessions have been detailed below. These have / will also be shared on the NWL ICB website.

Q1. Keratonisis is a particularly serious complaint that impacts teenagers and young adults. It's a complaint that is frequently missed by Opticians. I am concerned that this new model relies on opticians who might miss it. If not picked up early enough it can have very a very serious impact on sight.

A1. The new model supports better working relationships between the local optician and the hospital ophthalmologist or other eye specialist. Opticians will be able to raise queries and receive training to support their diagnostic skills.



Q2. The services delivered in local opticians, will it be local independents, or high street / brand names?

A2. The tendering will be open to both and we would expect this to encourage earlier access to the optician and with more opticians on the high street better access to services.

Q3. I am concerned about what you pay for and what is free, I have visited the optician and they are always trying to sell you other stuff. I would worry about going as I might have to pay even when I just want the eye test. If I go to my GP it is free?

A3. The eye test at your local high street optician (optometrist) is free for those that fall within certain criteria including, children under 16, those in full time education between 16-18, adults over 60, adults diagnosed with diabetes or glaucoma. For the full list of criteria please see [Free NHS eye tests and optical vouchers - NHS \(www.nhs.uk\)](http://www.nhs.uk)

Within the planned new service Opticians will be able to do more to help you, including managing some common lower complex eye conditions that don't require hospital management as well prescribing for certain conditions.

Q4. Will the GP or Optician be able to refer me to the hospital?

A4. The planned new service will support opticians providing services within the new service model to refer patients directly to the hospital. Hospital Ophthalmologists will be able to support the local optician with advice and guidance so more things can be tackled locally before having to go on to hospital.

Q5. If I have healthy eyes but think I have a problem will I have to pay for the eye test?

A5. If you need a prescription or treatment, then you will have to pay for this under the same guidelines as the GP. The eye test is free for those that fall within certain criteria [Free NHS eye tests and optical vouchers - NHS \(www.nhs.uk\)](http://www.nhs.uk) but a prescription or over the counter medication would need to be paid for unless there are exemptions.

Q6. When a patient accesses the services how or do the results get back to the GP?

A6. Currently patient results are shared with the patient GP post management within the hospital services. The specification for the new service will require electronic links for patient information to be shared by the hospital specialist both with the GP and the referring optician.

Q7. If the new service identifies a patient is not suitable for onward referral to hospital for a chronic condition. How will the patient be monitored so it can be identified when they need onward referral?

A7. Patients referred to the new service for a chronic condition will receive routine monitoring from their regular optician. Should their regular optician identify at a later date that onward referral is required they will be referred by their regular optician to the new service or to their GP depending on the condition that requires management.

