



**Integrated
Care System**
Shropshire, Telford and Wrekin



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and Wrekin**

Eye-care Transformation Programme – case for change

Nationally, the NHS is experiencing significant pressure and unprecedented levels of demand for elective care, with around 1.7 million patients referred for elective consultant-led treatment each month.

Between 2011/12 and 2016/17, referrals rose annually by an average of 3.7% per year and since 2005/06, total outpatient appointments have nearly doubled from 60.6 million to 118.6 million.

Timely access to high quality elective care is a key priority under the NHS Constitution. The redesign of elective care services a must-do for every local system.

The NHS Long Term Plan clarifies the direction for health and care over the next ten years, including the importance of transforming outpatient services and Eye-care Planning Implementation Guidance 21-22 sets out expectations around recovery and transformation of eye-care services.

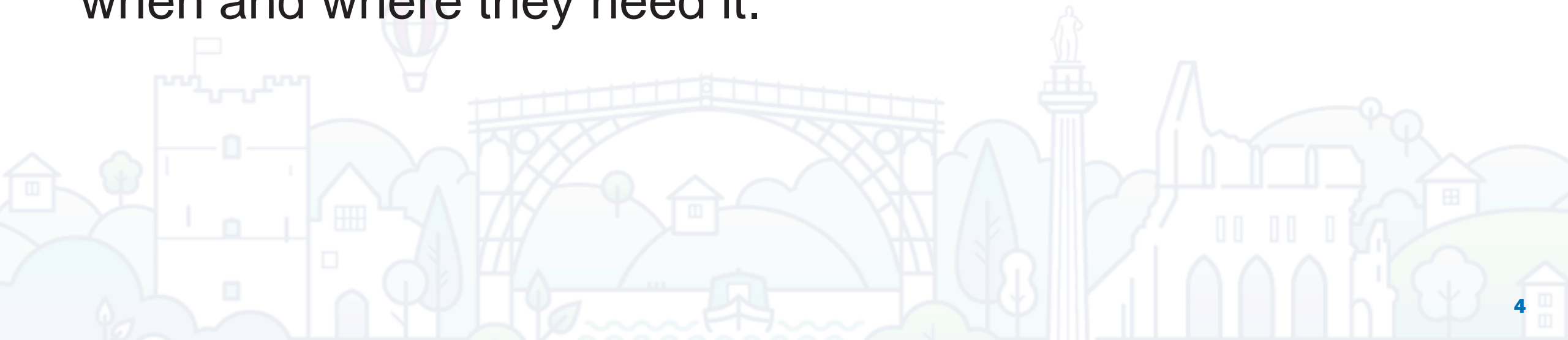
Shropshire and Telford and Wrekin Eye Health Needs Assessment (EHNA 2019) highlights extensive growth in the prevalence of cataract, glaucoma and age-related macula degeneration (AMD) due to an ageing population, with a projected rise in AMD and cataract of over 55% between 2016-2030.

This emphasises the need to find system-wide solutions capable of meeting current demand for eye care services and additional capacity to meet increasing demand across high-volume specialities.

As a system we are also committed to delivering on our key pledges, including:

- improving safety & quality
- integrating services at place and neighbourhood level
- tackling health inequalities and access to health
- climate change – reducing the need for travel to hospital for appointments
- enhanced engagement and accountability
- system sustainability
- workforce and system leadership.

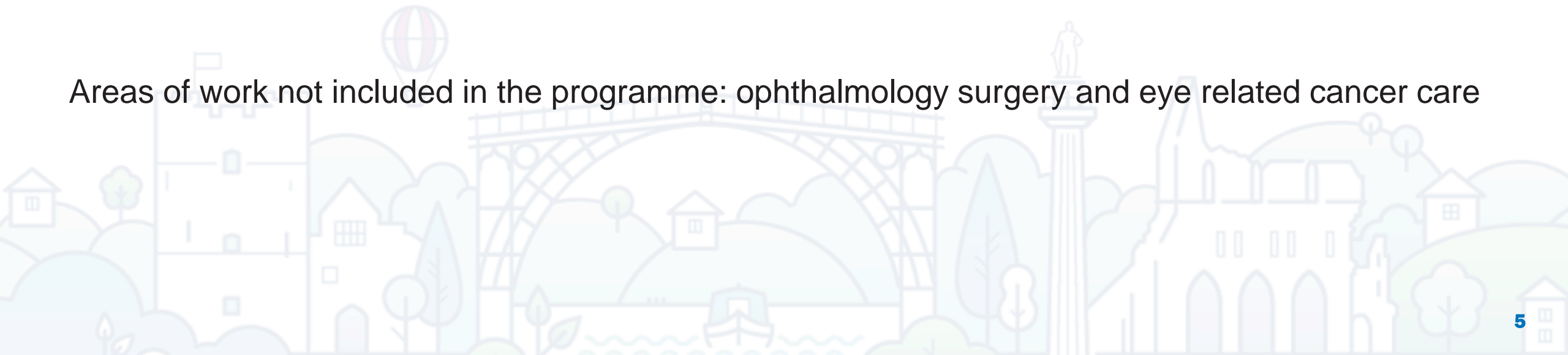
To provide effective eye-care services that are more joined up so that adults and children get the best care possible when and where they need it.



Key areas of work that will be included in the eye-care transformation programme are:

- Referrals processes
- Outpatient care
- Integrated pathways (the patient journey) across Primary/Community/Secondary eye-care and links with social care
- Speciality pathways e.g., cataracts, glaucoma etc.

Areas of work not included in the programme: ophthalmology surgery and eye related cancer care



- Provide person-centred responsive services
- Improve and refine eye care pathways and processes
- Improve integration of eyecare across primary, community and secondary care with one common aim
- Ensure sustainable specialised services
- Reduce duplication and improve resource efficiency
- Ensure value for money of commissioned services through provider collaboration
- Ensure high quality outcomes
- Strengthen accountability of staff
- Improve the flow, quality and use of information in order to optimise decision making; both operationally and strategically
- Ensure the involvement and engagement of patients and public in the design and development

Objectives of the programme

- Reduction in face-to-face eye-care outpatient appointments
- Reduction in unnecessary travel to hospital
- Reduction in overdue follow ups
- Reduction in appointment DNAs (the number of patients missing their appointments)
- Increase in use of one-stop clinics
- Increase in use of Nurse led/Allied Healthcare Profession clinics
- Increase in uptake of advice & guidance between GPs and consultants
- Introduction of patient led follow up where clinically appropriate
- Increase in uptake of remote and virtual monitoring
- Support the recovery of backlog post COVID
- Improve access to support for people diagnosed with sight loss
- Achieve optimum and consistent patient safety
- Improve experience and outcomes of eye care and eye health
- Improved experience for staff in services.