

Ophthalmology

Introduction

The following report sets out responses to questions from Members about the current ophthalmology service and plans for the future. For ease of reference the report is split into two parts, east Kent including Swale and west Kent

a. East Kent

Ophthalmology services in east Kent attract the highest rate of referrals compared to most other specialties. This is mainly due to the complex nature of the sub specialties within the service, changes to NICE guidelines for eye conditions and an ageing population. With age related eye conditions the main focus is intervention for conditions that are usually more effectively treated at an early stage to ensure the possible loss of a patient's eye sight is kept to a minimum. Many ophthalmology departments are seeing increases in referrals for all sub specialties of eye care, mainly due to the increasing life expectancy of patients and the related conditions.

Most of the data within this report is for the original NHS Eastern and Coastal Kent PCT area which includes Swale. However, with the NHS reforms being implemented prior to April 2013 and the authorisation of the Clinical Commissioning Groups (CCGs), commissioning intentions for the future are now being worked up for each CCG individually. Four CCGs in east Kent, Canterbury and Coastal, Ashford, South Kent Coast and Thanet have formed a Federation to commission some services jointly. In the most part ophthalmology is being commissioned in this way however some CCGs have small projects within the specialty that they expect to implement within their locality alone.

As Swale patients normally access services in Medway Maritime or Maidstone and Tunbridge Wells, Swale CCG is likely to commission services differently to east Kent and be more aligned with the West Kent and Medway CCGs. Medway Maritime does not provide ophthalmology services within its contract but subcontracts with Maidstone and Tunbridge Wells NHS Trust (MTW) who provide them from Medway premises. Therefore, all activity data will be recorded under the MTW banner.

1. How many ophthalmologists and medical ophthalmologists are working in Kent and Medway?

Patients in the NHS Eastern and Coastal Kent area mainly choose acute services provided by East Kent Hospitals University Foundation Trust (EKHUFT). Within the trust there are 9.41 WTE Consultant Ophthalmologists, who provide services across the area from various locations.

There are also two GPs with Special Interests (GPwSI) providing intermediate eye care at a GP practice in Thanet and 0.2WTE Consultant Ophthalmologist providing general ophthalmology services from the community hospital site in Minster, Isle of Sheppey. Six of the EKHUFT consultants support local ophthalmology clinics based in community or GP surgery settings.

2. Can you provide an outline of what acute ophthalmology services are available in Kent and Medway? Where are the main centres for the services located?

The main services provided in the east Kent area are:

- Glaucoma
- Cataract
- AMD
- Vitreo-retinal
- Medical Retinal
- Cornea
- Oculoplastic/Lacrimal
- Neuro-ophthalmology
- Ophthalmology Laser
- Contact Lens/Complex Refraction
- Low Vision
- Ophthalmology Diagnostics

The main sites for specialist services for EKHUFT are Ashford - William Harvey Hospital, Canterbury - Kent and Canterbury Hospital and Margate - the Queen Elizabeth the Queen Mother hospital.

However, general ophthalmology outpatient services are provided at other sites in the area to ensure patients are able to access, at least the initial care, closer to home.

The table in Appendix 1 shows all services available and their location, including the GPwSI services and other consultant led services commissioned separately to the main acute contract.

3. Is this number in line with clinical guidance?

There are no clinical guidelines on the ratio of consultant ophthalmologists to numbers of population in an area, as capacity to meet demand is monitored by waiting times and

clinic attendances. Clinical guidance exists around wait time and this is addressed in Question 5

4. How many ophthalmology outpatient appointments have there been for each of the last three years and what proportion have been to locations outside of the area?

There is a general trend of acute activity reducing as more local based clinics are commissioned to provide better access for local patients. These clinics will offer the same quality service but will enable patients to choose care closer to home. These local clinics will also help to ensure that only those patients who really need acute care or choose to go to the main hospital site will need to go there.

Across all three appointment types the *other local* providers only show figures for 2012/13 as a new national contract was rolled out by the Department of Health allowing private providers for services charged at national tariff rates. This has further widened the choice of care provider for patients. Also there is a definite trend for tertiary care to reduce over the three years, most significantly for 2012-13 which could demonstrate that more complex care is now available in local acute hospitals.

OP First Appointment

The percentage split between providers shows a small shift in activity from EKHUFT to MTW although the actual numbers for MTW are fairly static whilst the EKHUFT figures are reducing and this may be due to the increase in more local clinics in the east and therefore the figures are more concentrated for patients still choosing MTW.

OP Follow Up

It is interesting to note that first appointment : follow up appointment ratios are increasing and this may be an indication that there is a trend that those patients with more complex care needs are being seen in an acute setting, as more and more minor conditions are treated closer to home in local clinics.

OP Procedures

The OP Procedure tariff was only introduced during 2010-11 so the figures are misleading to begin with, a more informative analysis would need another two to three years of data to be useful. However, the introduction of this appointment type means patients are no longer required to be admitted for many more treatments than previously, which is much better for patients and hospital resources alike.

Ophthalmology acute outpatient activity over the past three years

Key:

EKHUFT – East Kent Hospitals University Foundation Trust

MTW – Maidstone and Tunbridge Wells NHS Trust

Other local – Spireas (Tunbridge Wells or Hythe), Benenden, Chaucer, Somerfield, Will Adams

Tertiary – London, Surrey, Sussex

	2010-11	%	2011-12	%	2012-13	%
OP First App	33166		27395		21078	
EKHUFT	28948	87%	22944	84%	17025	81%
MTW	2941	9%	3205	12%	2940	14%
Other Local	0	0%	0	0%	689	3%
Tertiary	282	1%	291	1%	168	1%
Other	995	3%	955	3%	256	1%
	2010-11	%	2011-12	%	2012-13	%
OP Follow Up	61722		59349		50817	
EKHUFT	52244	85%	49323	83%	41722	82%
MTW	6205	10%	6245	11%	6338	12%
Other Local	0	0%	0	0%	583	1%
Tertiary	1072	2%	1128	2%	731	1%
Other	2201	4%	2653	4%	1443	3%
	2010-11	%	2011-12	%	2012-13	%
OP Procedure	7357		14151		14232	
EKHUFT	6934	94%	13367	94%	13533	95%
MTW	130	2%	309	2%	272	2%
Other Local	0	0%	0	0%	32	0.2%
Tertiary	48	1%	131	1%	120	1%
Other	245	3%	344	2%	275	2%
Grand Total	102245		100895		86127	

5. How long have the waiting times been for ophthalmology outpatient appointments over the last three years?

EKHUFT - Waiting times have averaged 13 weeks for new patients over the last three years, but has recently reduced to 10 weeks with a plan to reduce to 8 weeks by April 2013. Most other community clinics are contracted with a key performance indicator (KPI) to ensure waiting times are kept within the 8 weeks which the acute trust works to. However, most are able to offer appointments within 4-6 weeks and some within two weeks

6. What plans exist for developing ophthalmology services in the county?

As described earlier, whilst the data and information above is provided at NHS Eastern and Coastal Kent (PCT) level and includes Swale patients, new commissioning plans will be the responsibility of each individual CCG. The Federation of East Kent (Canterbury and Coastal, Ashford, South Kent Coast and Thanet) are working together on the following ophthalmology projects:

- **Glaucoma pathway changes**

Repeat Inter Ocular Pressure testing by Optometrists to ensure appropriate referral to specialist Community Glaucoma Network or to acute care to enable patients with stable Glaucoma to be monitored appropriately in a community setting of their choice. This service will go live very soon as an AQP (Any Qualified Provider) tender is likely in the next few months.

- **Change of use for certain drugs for WAMD - Aflibercept (Eylea®) versus Ranibizumab (Lucentis®)**

Discussion around the reduced frequency of use and reduced cost of drugs which may significantly reduce overall spend and result in patients only needing injections bi-monthly instead of monthly. This programme is still being investigated and dependant on the outcome of research so it may or may not be implemented

- **Update of Referral and Treatment Criteria (RaTC) for cataract referral**

Guidelines for cataract referrals have been amended to ensure patients who need cataract surgery are able to access it and also to ensure direct referral of patients requiring second eye operations.

- **Potential to move more OP activity to primary care**

South Kent Coast CCG is looking to move all OP clinics to Folkestone Health Centre as there is no district general hospital in the locality.

Swale commissioning intentions

- A review of ophthalmology services is currently underway and there are plans to introduce a Community Ophthalmology Team (COT) to manage routine ophthalmology referrals. The potential is to join/extend the west Kent COT so that Swale patients essentially follow the same pathway – i.e. into COT and then triaged for appropriateness, treatment within COT (Optician with Special Interest (OPwSI) or GPwSI) or onwards referral to Hospital Eye Service (HES) or Dulwich Medical Centre (DMC) based at Minster Hospital, Isle of Sheppey. There is the expectation to have the triage in place by April, which will be provided by a GPwSI and the Community Ophthalmology Service being developed further from then.

b. West Kent

1. How many ophthalmologists and medical ophthalmologists are working in Kent and Medway?

Maidstone Tunbridge Wells NHS Trust (MTW) employs 12 consultant ophthalmologists. In addition Kent Community Health has a salaried GP with Special Interest (GPwSI) who sees West Kent PCT patients. It should be noted that MTW provide acute ophthalmic services to Medway PCT patients, running outpatient clinics at Medway Maritime Hospital, and to East Sussex PCT patients. The main provider of ophthalmology

services to the Dartford Gravesham and Swanley CCG area is currently South London Healthcare(SLH).

2. Can you provide an outline of what acute ophthalmology services are available in Kent and Medway? Where are the main centres for the services located?

Please refer to Appendix 2.

3. Is this number in line with clinical guidance?

There are no clinical guidelines on the ratio of consultant Ophthalmologists to numbers of population in an area, as capacity to meet demand is monitored by waiting times and clinic attendances. Clinical guidance exists around wait time and this is addressed in Question 5

4. How many ophthalmology outpatient appointments have there been for each of the last three years and what proportion have been to locations outside of the area?

West Kent PCT ophthalmology first outpatient appointments

Trust	2009/10		2010/11		2011/12	
	Number	%	Number	%	Number	%
Maidstone & Tunbridge Wells NHS Trust	14657	63.0%	16510	68.1%	17193	66.9%
South London Healthcare NHS Trust	7503	32.2%	6282	25.9%	7161	27.9%
Moorfields Eye Hospital NHS Foundation Trust	422	1.8%	464	1.9%	393	1.5%
Guy's & St Thomas' NHS Foundation Trust	156	0.7%	272	1.1%	292	1.1%
Queen Victoria Hospital NHS Foundation Trust	120	0.5%	185	0.8%	209	0.8%
King's College Hospital NHS Foundation Trust	128	0.6%	162	0.7%	122	0.5%
East Sussex Hospitals NHS Trust	106	0.5%	136	0.6%	104	0.4%
Others	175	0.8%	235	1.0%	211	0.8%
Grand Total	23267	100.0%	24246	100.0%	25685	100.0%

Numbers include outpatient procedures

West Kent PCT Ophthalmology Follow Up Patient Appointments

Trust	2009/10		2010/11		2011/12	
	Number	%	Number	%	Number	%
Maidstone & Tunbridge Wells NHS Trust	33919	67.5%	34092	66.0%	34142	63.9%
Outside Kent	16331	32.5%	17562	34.0%	19289	36.1%
Grand Total	50250	100.0%	51654	100.0%	53431	100.0%

Numbers include outpatient procedures

Community Ophthalmology Team						
COT	2009/10		2010/11		2011/12	
New	1993		3776		4029	
Follow Up	390		745		1091	
Total	2383		4521		5120	
APCOS (Advanced Primary Care Ophthalmology Service)					478	
	2009/10		2010/11		2011/12	
Annual Total	75,900		80,421		84,714	

5. How long have the waiting times been for ophthalmology outpatient appointments over the last three years?

Community Ophthalmology Team (COT) appointments are generally available within 2 weeks. APCOS patients (Advanced Primary Care Ophthalmology Service) are seen within 36 hours.

Please also refer to Appendix 3 for more information.

6. What plans exist for developing ophthalmology services in the county?

Glaucoma pathway changes - a shared care model is being developed with MTW with the use of virtual clinics and image review by consultants. This will enable patients to be monitored closer to home but with their care remaining under the management of a consultant.

Other plans and changes include:

- Implementation of NICE recommendations of Ranibizumab for diabetic macular oedema patients.
- Review of cataract pathway as a result of the change to Referral and Treatment Criteria (RaTC)
- Introduction of Paula Carr surveillance clinics for some diabetic retinopathy patients to avoid referrals to acute service which can be better managed within screening programme. This will involve image capture and subsequent review.

- The dissolution of South London Healthcare will lead to changes of provider in the Dartford Gravesham and Swanley CCG area.