Integrated Eye Service Briefing

East Lancashire and Blackburn with Darwen CCGs confirmed early last year they were to re-design Ophthalmology as an integrated service where patients are seen closer to home; by the right person in the right place at the right time; and to give patients the ability to move seamlessly between levels of care as necessary.

Using innovative ideas developed within a co-design event during 2014, a range of Commissioners, GPs, Optometrists and clinical Ophthalmology staff identified an integrated model of eye service, whereby Ophthalmology will work collectively, as one team, with community based accredited Optometrists, operating under Consultant and Optometry leadership. This will enable delivery of a more timely, highly specialist eye care service within the hospital environment for acute and surgical need with Optometry practices treating and monitoring the less complex and chronic eye conditions.

Blackburn with Darwen has also seen the inclusion, within the integrated team, of the GPs with Special Interest. This will add great value to the skill mix and aid the ability to offer specialist medical eye care in a closer to home setting for certain eye conditions.

GP initiated routine eye referrals will be made through Choose and Book to the integrated referral hub.

All Optometrists will make routine referrals through the bespoke integrated IT system. This new referral pathway for optometrists will provide them with the ability to make a direct referral to the eye service without the need to route referrals via the patient's GP, as was previously the case.

Daily triage of all routine eye referrals will direct the patient to the right practitioner first time, each time, working to the principles of the correct expertise and as close to home as possible. For those patients with a hospital eye service triage outcome, choice of secondary care provider will be offered and, for those with an enhanced optometry service triage outcome, choice of accredited optometrist will be provided.

Integrated pathways and clinical protocols have been developed to deliver smooth patient journeys, stepping up and down, between all elements of the integrated service, as appropriate. Cataract care, for example, includes a clinical work up by accredited optometrists, ensuring that patients stepped up for surgery are fit, clinically appropriate and through shared & informed decision making, are agreeable to the care plan. Post uneventful cataract surgery review will be undertaken by the screening optometrist, releasing valuable capacity within the Hospital eye Service for more complex eye care.