

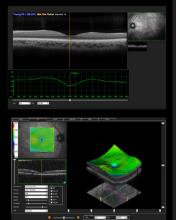




"This whole project has highlighted the difference made to patients when care is provided closer to home, within the community and how the skills of primary care optometrists can be best utilised to facilitate a positive experience of healthcare for the patient".

Sali Davis, Chief Executive Optometry Wales.





Ophthalmic imaging data shared with hospital eye consultant using OpenEyes™ dedicated **Electronic Patient Record system** 



- Adoption of new technology reducing patient waiting times through community care
- Change in clinical management
- Increased capacity in secondary care to assess and man age eye care patients in the health board
- Skills and competency training for independent optometrists
- Closer links to Secondary Care technology could lead to provision of additional services by optometry enterprises
- New health economics insights in ophthalmic care
- Engagement with HEI and greater understanding by experts in research in eye care-related health
- Peer reviewed publications and clinical innovation case studies, academic impact for REF



Technology could lead to diversification of other domains of

## TRANSFORMING EYECARE SERVICES IN WALES:

## **EVALUATING DIGITAL** VIRTUAL CLINICS **DELIVERED BY HIGH STREET OPTOMETRISTS**

## **PROJECT DURATION: 17 months**

**PARTNERS: Cardiff University, Cardiff and Vale** University Health Board, Optometry Wales and community optometry enterprises

**PROJECT AIM: To establish enhanced eye care services** delivered by community optometry practices registered with NHS General Ophthalmic Services in Wales

## **OVERVIEW** -

There is insufficient capacity in secondary care to assess and manage eye care patients in Wales. At December 2019, nearly 115,000 patients in the R1 category (risk of irreversible sight loss if patient target date is missed) were waiting for a hospital eye appointment in Wales, 38% having exceeded their target date. Moreover, demand on eyecare services is increasing through an ageing population and increased risks linked to other diseases, particularly diabetes.

The application of digital technology to tackle unmet clinical needs has seen growing prominence in health and social care, delivering substantial improvements in prudent care. This project aims to alleviate unsustainable pressures on current ophthalmology services through digital innovation With Welsh Government support, Cardiff and Vale University Health Board has developed a service framework in which registered high street optometrists assume the management of designated high-risk eye patients. Accelerate is supporting Cardiff academics, Optometrists, and Cardiff & Vale UHB staff to evaluate a revolutionary

clinical model to facilitate specialised eye care services in community settings. We are supporting a series of novel pilot services to manage up to 9000 designated patients across 5 domains of care: Glaucoma (new referrals and follow-up); Wet Age Related Macular Degeneration; Diabetic Retinopathy; and Unscheduled Eye Casualty.

Skilled Optometrists in community practices will use sateof-the-art imaging technology, dedicated software and electronic patient records to enable diagnosis by acute care Ophthalmologists viewing digital data uploaded from remote locations. Complex cases will be referred to acute services for appropriate care. Evaluation of pilot data by Cardiff academics will include comparisons with usual care along with patient and practitioner experiential and outcome measures and health economics appraisals. Findings will inform sustainable rollout of shared care ophthalmic services, pan Wales.

health and social care employing e-patient records

- Future collaboration between commercial, academic, third sector and clinical partners
- Rollout of an innovative model across NHS Wales

"It's about care closer to home and being seen by the right person at the right place at the right time. We are looking to increase capacity in eye clinics and reduce waiting times for patients".

Sharon Beatty, Optometric advisor to Cardiff and Vale University Health Board.





