

Request under Freedom of Information Act 2000

Thank you for your request for information which we received on 29 May 2019.

I am pleased to confirm the following.

1) Can you please confirm the number of patients that you saw in 2016/2017, 2017/2018, and 2018/2019 for each of the following:

Total Ophthalmology monitoring/follow-up appointments

New glaucoma diagnosis appointments

Routine glaucoma monitoring/follow-up appointments

Urgent glaucoma monitoring/follow-up appointments

The Trust is unable to respond as the quality of the data is not robust enough and would not represent a fair picture.

2) Please confirm how many patients are currently under the care of the hospital trust for the monitoring of their glaucoma

The Trust is unable to respond as the quality of the data is not robust enough and would not represent a fair picture.

3) Please confirm how many of the glaucoma patients under your care are classified as:

Routine/Stable

Urgent/non-stable

The Trust is unable to respond as the quality of the data is not robust enough and would not represent a fair picture.

4) Of the patients seen for glaucoma within the last 12 months, can you please confirm how many patients:

- Were seen on or within 2 weeks of their review date.**
- Were seen within 2-4 weeks of their review date.**
- Were seen within 1-3 months of their review date.**
- Were seen within 3-6 months of their review date.**
- Were seen within 6-12 months of their review date.**
- Were seen, but over 12 months of their review date.**
- Were not seen, and were over 12 months from their review date.**
- Were not seen, as they were not due their review appointment yet.**

The Trust do not record this information.

5) Please confirm how many glaucoma patients are currently outstanding their review appointment on the following basis:

- Currently between 0-1 month past their scheduled review date.**
- Currently between 1-3 months past their scheduled review date.**
- Current between 3-6 months past their scheduled review date.**
- Currently between 6-12 months past their scheduled review date.**
- Currently over 12 months past their scheduled review date.**
- Are currently past their review date, but you are not certain of how far past their review date the patient is.**

The Trust is unable to respond as the quality of the data is not robust enough and would not represent a fair picture.

6) Please confirm where you are paid by your CCG(s) on a block contract, on a tariff payment per episode basis, or on an alternative payment method for glaucoma services. If you are paid on an alternative method, please provide details.

Block contract via MKCCG

7) Please confirm the patient pathway in your trust for Glaucoma Diagnosis and Glaucoma Monitoring within your service?

a) New glaucoma referrals are seen in a consultant led clinic at MKUH. New Referrals are received via choose and book (usually optom to GP to referral); from other clinics within the department; or "Booked Urgent Service" referrals received via fax from GP's or Optometrists; or from other trusts / hospitals.

b) All New Glaucoma patients have a visual fields test, an OCT scan and photo of their optic discs, OCT scan of their angles, Goldman applanation tonometry and measurement of corneal thickness. They are also seen by a clinician (usually the consultant) and undergo a detailed history and examination followed by discussion about the findings. These steps are all in keeping with NICE glaucoma screening guidelines and compliance with NICE protocols is audited annually. Patients are graded for risk at this assessment and in each subsequent follow up appointment.

c) If drop medication treatment is required, it is initiated by the examining clinician and the GP is informed for continued regular prescriptions. Other treatment options offered at MKUH are Laser iridotomies, Selective Laser Trabeculoplasty, cyclodiode laser ciliary body ablation, cataract surgery for pressure control, or trabeculectomy surgery. Aqueous shunt surgery in the form of Xen implants has been approved for use at MKUH and is in the process of being implemented.

d) The GP letter is routinely copied to the patient.

e) If no glaucoma is found, the patient is discharged back to the care of the community optometrists.

f) Cases of primary angle closure are booked into laser clinics for laser peripheral iridotomies with the patient's understanding and consent. If the need is urgent, the iridotomies are done in the clinic the same day.

g) In cases of Glaucoma or Glaucoma suspicion, appropriate follow up is made according to the individual clinical need.

h) Cases of stable glaucoma, or ocular hypertension, are referred for follow up in our optometrist led "Glaucoma Devolved Care" (GDC) clinic where they have Goldman tonometry pressure checks, visual fields and clinical examination. If there is concern or suspicion of progression, these are brought to the attention of the consultant who decides on further management and if necessary brought back into the main consultant led glaucoma clinic. All patients in the GDC clinic are reviewed by the consultant every 2 years for consultant oversight.

I) In addition to the above, The consultant has 2 sessions (half day) a month to perform virtual review of patients using data gathered from electronic notes, visual fields and OCT scans to decide on further management. Patients are graded for clinical risk during

this assessment.

j) The consultant also analyses the notes of any patients awaiting follow up appointments to assess the urgency of their appointment to avoid delays in higher risk patients. Patients are assigned a risk grading during this process.

k) Therefore the possible patient outcomes following assessment in the glaucoma clinic is;
discharge, follow up in glaucoma clinic according to need, follow up in GDC clinic, follow up with fresh tests at a later date for review in virtual review clinic, referral to the drop clinic (see point m below); or very rarely onward referral to a tertiary unit for specialised intervention not yet available at MKUH (eg. aqueous shunt surgery).

l) Outcomes from GDC clinic are;
continued follow up in GDC, referral back to doctor led glaucoma clinic; notes passed to consultant for review (including 2 year review); verbal discussion with consultant for advice; discharge after discussion with consultant.

m) We also have a "drop clinic" which is led by our senior trained optometrist with glaucoma training and a prescribing qualification. Patients who have a change in drops or start new drops are referred to this clinic to ensure they do not get lost in the system and that the drops are effective and target pressures are achieved. If not, the optometrist can discuss with the consultant and the patient is either seen again in drop clinic after an intervention, or more commonly referred back for routine review in the glaucoma clinic.

n) The glaucoma team also organises a "Patient Support Group" meeting in their own time on a Friday evening twice a year. We invite all patients and their relatives / friends to come along and gain more insight into their condition with lectures (including external guest speakers) and Q & A sessions. The emphasis is on getting New diagnosis patients to attend as these patients stand to gain the most out of it and they are the most worried. Attendees usually number 80-100 and the feedback is overwhelmingly positive.

8) Please confirm whether this service the patient pathway in your trust for Glaucoma Diagnosis and Glaucoma Monitoring is delivered wholly by staff employed by your hospital trust, or whether this is partially or wholly delivered

by another provider. If this is delivered by another provider, please also confirm:

What proportion is delivered by other providers.

Who is the provider delivering this service on your behalf?

Where is this service delivered?

What elements of the service do they deliver? Is this the diagnostics only, consultant oversight, treatment or all elements.

Wholly delivered by staff employed at MKUH

9) Please confirm the address of all locations that the service the patient pathway in your trust for Glaucoma Diagnosis and Glaucoma Monitoring is delivered from.

Milton Keynes Universtiy Hospital, Standing Way,Eaglestone, Milton Keynes, MK6 5LD

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If you need any further assistance, please do not hesitate to contact us at the address above.

Yours sincerely,

Freedom Of Information Co-Ordinator
For and on behalf of Milton Keynes Hospital NHS Foundation Trust

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