

***Request under Freedom of Information Act 2000***

Thank you for your request for information which we received on 06 April 2022.

I am pleased to confirm the following.

**What is the Ophthalmology budget for 2021/22 and 2022/23?**

Total budget for 2021/22 was £2.76 million

Total budget for 2022/23 has not been agreed/set yet

**What is the cataract surgery budget for 2021/22 and 2022/23?**

There is not a separate budget for cataracts

**What % capacity is the ophthalmology departments across the Trust area running at compared to 19/20 capacity?**

Currently the capacity is the same as 19/20, except for ad-hoc additional clinics, the department are looking to increase staffing so we can increase the capacity. We are also looking into options of using independent providers to further increase capacity in the short term to help clear the backlog.

**What are the contract end dates and current annual contract values for all independent providers currently delivering cataract surgery in the Trust area?**

**Please provide a total contract value if the contract values cannot be easily broken down.**

There are currently no contracts between MKUH and any independent providers for Ophthalmology

**What is the current number of patients waiting for cataract surgery in the Trust area?**

There are currently 367 patients listed to have Cataract surgery at MKUH

**What is the threshold of VA for first and second eye to qualify for cataract surgery for patients within the Trust/CCG area?**

## **Eligibility Criteria**

Referrals should not be based simply on the presence of a cataract. **Referral of patients with cataracts to ophthalmologists should be based upon the following indications, and therefore categorised as restricted.**

**A:** The patient accepts that there are risks and benefits and wishes to undergo cataract surgery.

The referring optometrist or GP should discuss the above with the patient before referring.

Patients who are not willing to have Cataract surgery should not be referred.

## **AND**

**B:** Corrected visual acuity documented of 6/12 or worse in the affected worse eye, assessed by the clinician as being due to a rectifiable lenticular opacity

## **OR**

**C:** Impairment of lifestyle (not exhaustive list) such as;

- the patient is at significant risk of falls  
**OR**
- the patient's vision is affecting their ability to drive  
**OR**
- the patient's vision is substantially affecting their ability to work  
**OR**
- the patient's vision is substantially affecting their ability to undertake leisure activities such as reading, watching television or recognising faces  
**OR**
- management of other co-existing eye conditions

The reasons why the patient's vision and lifestyle are adversely affected by cataract and the likely benefit from surgery must be documented in the clinical records. This information, together with a report from a recent sight test, should form the minimum data on the referral form.

## **AND/OR**

Other indications for cataract surgery include facilitating treatment for one or more of the following:

- Monitoring posterior segment disease e.g., diabetic retinopathy
- Correcting anisometropia
- Patient with Glaucoma who require cataracts surgery to contract intraocular pressure.

## **Patients with single sight (monocular vision)**

The indications for cataract surgery in patients with monocular vision and those with severe reduction in one eye e.g., dense amblyopia, are the same as for patients with binocular vision, but the ophthalmologist should explain the possibility of total blindness if severe complications occur

## **Second eye**

There are sound clinical grounds for cataract surgery in the second eye.

Patients will be offered second eye surgery provided they fulfil the referral criteria (see above).

Second eye surgery should be deemed urgent when there is resultant symptomatic anisometropia i.e. a large refractive difference between the two eyes resulting in poor binocular vision (this should be clearly recorded in the patient's notes).

**Which Commissioners/Procurement team members are responsible for the procurement of ophthalmic services within the Trust? Please provide the names and contact details for these individuals.**

Procurement [Procurement@mkuh.nhs.uk](mailto:Procurement@mkuh.nhs.uk)

**Does the Trust have a commissioning plan for the provision of eye services and to tackle the elective procedure backlog for 2022/23?**

The Ophthalmology department are currently looking into options of using independent providers to tackle the backlog, nothing has been agreed so far.

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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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