



**Offthalmoleg Ardal
De-ddwyrain Cymru**
**South East Wales
Regional Ophthalmology**

Regional Ophthalmology Strategy

2022 - 2025



Our Vision



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Ophthalmology Services in South East Wales are sustainable and deliver high quality care and improved outcomes to patients in a timely way.

Upon referral into the service patients are directed to the right place and are seen quickly by the most appropriate clinician for their needs. All treatments and procedures clinically required are undertaken swiftly and safely, within the NHS, in fit for purpose facilities that have up to date equipment and supplies.

Staffing models match service demand and include a forward thinking skill mix of new and complementary roles that enable everyone to work to the top of their licence in integrated teams that communicate well. The Ophthalmology Service in South East Wales is a desirable and rewarding place to work

The Regional Centre of Excellence network enables the region to care for all complex eye care procedures and for specialists to share and enhance their skills, whilst at the same time allows less complex eye care to be delivered closer to the patient. The whole region is a centre of excellence for training, research innovation and development working closely with academic and industry partners to advance practices and create the next generation of Ophthalmic specialists across the wide variety of roles that support Ophthalmology Services.



Our Principles



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**Learning and
Improvement**



**Reducing Variation
and Inequity**



**Designing Value
Based best
practice services**



**Delivering timely
and high quality
patient centred care**



A Regional Eye Care Service for South East Wales



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The concept for a Regional Ophthalmology provision has been considered since 2017, however the significant service pressures incurred by the recent Pandemic have escalated and the scale and pace of the programme needs to be increased accordingly.

There is now agreement to establish and implement a regional planning framework for Ophthalmology Services for South East Wales. Regional solutions for Eye Care across Aneurin Bevan, Cwm Taf Morgannwg and Cardiff & Vale Health Boards will be put in place where this adds the most value to patients and staff

Regionalising Services to ensure their sustainability and offer the best services to patients aligns with A Healthier Wales, The National Clinical Framework and Royal College of Ophthalmologists Clinical Guidance and best practice.





The Case for Change

Patients

Patients losing their sight
with longer waiting times

Increased number of
patients requiring
Eye Care

Workforce

Limited pool of
expertly trained staff

Hard to recruit and
retain staff

Equity of Service

Variations in
services offered and
waiting time across
the region

A Patient Story

"I first noticed change in my vision about 2 years ago, I was struggling to read small text in some of my books and I started to lose some of my peripheral vision in my left eye but I could still manage ok. I went to see my optician, they told me I have cataracts and referred me to the hospital for assessment and surgery. I had some letters from the hospital about being on the waiting list but I haven't had any contact for a while now and worry I've been forgotten. My sight is now much worse and I can only see colours and shapes in my left eye and my right eye is becoming cloudy. My husband and my son have to do more and more things for me and don't want to leave my house in case I fall over and lose more of my independence. I'm also finding it increasingly hard to see the text on my mobile phone and I really miss the little things like doing my knitting and needlework, reading a book and going for a walk. I'm really scared about losing my sight altogether and how I will cope."



How Patients can expect to receive care in the future



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There are a wide range of Eye Care services that are offered by Ophthalmic Services. A clinical workshop in December 2021 enabled the determination of whether services should be delivered on a regional or local footprint. The Regional services in the list below make up the scope of this regional strategy.

Regional Services – In Scope

- Complex Cases (Glaucoma, Uveitis, Oculoplastics, Medical Retina, Cornea, complex cataracts)
- Neuro Ophthalmology
- Vitreo Retinal Surgical Hub
- Expanding Regional capacity for Cataracts
- Eye Casualty, Out of Hours Care
- Complex Paediatric Care

Local Services - Out of Scope

- Routine outpatient and theatre treatments
- Specialist dependent condition monitoring (Glaucoma, Cornea, Medical Retina)
- Paediatric Care
- Orthoptics

Community Services - Out of Scope

- AHP-led stable and routing condition monitoring (Glaucoma, Cornea, Medical Retina)
- Screening



Specialty	On a regional level	At a local level	Community
Glaucoma	Surgical / complex Glaucoma	Medical Glaucoma	Stable treated Glaucoma, Ocular Hypotension
Uveitis	Complex Uveitis	Anterior Uveitis	Simple recurrent Uveitis
Emergency Eye Care:	Eye Casualty	Follow up clinics	Follow ups, Minor Ailments
Out of hours Care	Out of hours Care		
Cornea	Cross linking	Routine Cornea	Keratoconus Monitoring
Oculoplastic	Orbit, Complex	Lids, Minor ops	
Medical Retina	Retinal Dystrophies, Genetics, complex Medical Retina	Stable monitoring, injection services, stable diabetic eye disease	Diabetic screening and monitoring
Paediatrics and Orthoptics	Complex Paediatrics	Routine Paediatrics,, Adult Orthoptics, Paediatric Orthoptics	Screening
Neuro Ophthalmology	Neuro Ophthalmology		
Vitreo retinal	Emergency and routine procedures		
Cataracts	Cataracts Expansion	Cataracts	Follow ups

Regional and Local Services



Regional Services are generally more complex in nature and reliant on other specialties. They are best delivered on a regional footprint, bringing the specialist workforce and equipment together.

Local Services are generally more routine in nature and often involve ongoing patient interactions with specialist trained clinical staff. These service are best delivered more locally where clinicians can get to know their patients and the patient travel is reduced. Delivery is clinician-led with supervised AHP's

Community Services are generally for more stable patients that can be looked after by AHP's. Services include screening and are overseen by a clinician

Our Partners



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This vision cannot be delivered by Health Boards alone. The support and input of partners is critical for success. Our key partners include Primary Care teams, Welsh Government, Patient Group including RNIB and other local patient groups, HEIW, Universities, Royal College of Ophthalmology and Royal College of Nursing and the School of Optometry.



Regional Model



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Where are we today

Currently all ophthalmic services are delivered on an individual health board basis with only a small number of highly specialised services delivered in Cardiff for patients across the region. Due to increasing demand and workforce complexities it is no longer sustainable for all health boards to run all services. Better patient care and sustainable value for money services will be delivered by bringing services together into a Regional Centre of Excellence network model that will condense delivery of speciality, complex care and an expansion of cataracts services across the region

What will the future hold?

The Regional Centre of Excellence network model will provide expert specialist care for patients, ensuring they are seen quickly by the most appropriate specialist for their needs. In the Regional Centre of Excellence there will be experts from a wide range of services that can treat complex conditions with links to other tertiary services such as neurology, enabling the best possible care to be provided in Wales. In addition, the expansion in the regional capacity for cataracts will provide shared assessment and surgical capability for the treatment of cataracts adopting best practice high flow principles. The Regional Centre of Excellence network model will link seamlessly with local and community services. It will be sector leading with a modern skill mix of roles who learn together to drive improvement, and teaching and training facilities to grow the ophthalmic staff of the future.

Target for 2025

By 2025 Plans for the development of the Regional Centre of Excellence network model will be well underway with funding approved in principle and a full business case for a new facility in development. The expansion in the regional capacity for cataracts will be fully utilised taking patients from all over the region, reducing cataract backlogs and flexing capacity to cope with current and future demands.



Sustainable Services



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Where are we today

There are several areas of service delivery that require attention to make them sustainable in the short and medium term, congruent with the overall aim of this strategy to make all Ophthalmic Services sustainable in the long term. Areas requiring more immediate attention are Vitreo Retinal (VR) services, corneal cross linking, and emergency and out of hours cover across the region. Areas for medium term attention are the reduction of routine outsourcing and making the best use of estates and equipment.

What will the future hold?

Services identified above will be delivered effectively on a regional footprint, making the best use of the capacity available and ensuring the services as stabilised and efficient. Outsourcing of routine cases will cease with patients treated out of area on exceptional clinical basis only. The estates and specialist ophthalmic equipment available across the three health boards will be reviewed and optimized.

Target for 2025

By 2025 Vitreo Retinal (VR) services, corneal cross linking, and emergency and out of hours cover will be working well across the region to agreed clinical and funding models. No routine cases will be treated out of the region. The estates review will be finalised and the findings fully implemented.



Workforce



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Where are we today

The workforce across Ophthalmic services is fragile, with many experienced staff at all levels close to retirement and all health boards struggling to recruit trained staff. Vacancy levels are affecting service capacity and staff are being sought from overseas to fill posts. Training is available but delivery is patchy and requires greater co-ordination across the region with all partners involved.

What will the future hold?

Ophthalmic Services in South East Wales are a great place to work. Qualified and trained staff are attracted to the area and vacancies are quickly filled. Training and development for all staff is co-ordinated and teaching, learning and improvement are central principles of how all ophthalmic services in the region operate. All professionals work to the top of their licence.

Target for 2025

By 2025 regionalised training plans and programs will be in place for all disciplines of staff with tracking and reporting of competencies and achievements delivered in partnership with HEIW and the Universities (CU and USW). Multi-disciplinary teams and skill mix reviewed and new roles filled. Future workforce plans developed and implemented.



Research, Innovation and Development



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Where are we today

The research innovation and development activities that are currently undertaken with the region are sometimes ad-hoc and led by individual clinicians. There is a strong vision research base in Cardiff University but it is not integrated into Ophthalmology services in the region.

There are relatively few fellowship opportunities within the region and no substantial funding streams for this type of work are accessed routinely. The only industry partnership working is for outsourcing and there are few links with hereditary conditions and genomics.

What will the future hold?

Regional Centre of Excellence network model and the Ophthalmic services provided by Health Boards provide the variety and complexity of cases to attract research fellows and innovation opportunities.

There will be a regional Clinical Research Facility allowing delivery of high quality clinical research trials which will increase income and quality of care for patients whilst building links with industry partners with strong consultant support. There will be sustainable funding streams for research in the region.

Meaningful and mutually beneficial Industry Partnerships are created and links with genomics are developed and strengthened.

Target for 2025

By 2025 the Regional Centre of Excellence network model will work closely with Clinical and Research Fellows whose work will enhance the services provided. There will be more academic trainees who have both clinical and research aspects to training within the region. All types of clinical and non-clinical roles play an active part in research activities.

At least one industry partner will be engaged with the regional working and an Ophthalmic Genomics working group will be well established.



Enablers



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Where are we today

The organisational culture, use of data and systems, clinical variation and standards and patient led service design are all critical enablers to the delivery of this strategy.

Connection and sharing of services between health boards is restricted by variation in IT communication and documentation systems. Wales are on the cusp of adopting a new electronic patient record system call Open Eyes that will underpin the regional working, however currently access to routine capacity, demand and activity data is limited in some areas. There is clinical variation across Health Boards and while more recent services have been designed with the patient, not all services are delivered in a patient centred way. There is growing support for regionalisation within the organisational culture but more work needs to be done.

What will the future hold?

All services will be data driven with a full adoption of Open Eyes in every specialty enabling sharing of patient records and data and shared patient treatment lists to inform day to day operations, management and long-term planning. Patient reported outcomes will enable shared decision making with patients. Adoption and inclusion of a regional approach for Eye Care is central to decision making and the services provide equity of access to all patients for treatment and staff for training and opportunities. Clinical variation is minimal in regional services and patients are fully engaged in service design.

Target for 2025

By 2025 Open Eyes will be fully adopted. A Regional Strategy will be fully embedded with Health Boards thinking 'Regional first' where appropriate services require support. Shared Patient Treatment Lists (PTL's) will be in place where appropriate and patient outcomes will be clearly visualised. Clinical variation will be minimised in Vitreo Retinal (VR) services, corneal cross linking, and emergency and out of hours cover across the region. A patient reference group will be participating in service design and change.



High Level Timelines



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2023

- ❖ Regional expansion in capacity for cataracts will be fully utilised
- ❖ Regional Vitreo Retinal Service operational
- ❖ Regional Eye Casualty and Out of Hours Care in place

2024

- ❖ Research, Innovation and Development well established
- ❖ Workforce Development Programme in place

2025

- ❖ Regional Centre of Excellence network funding agreed

