New face of digital referral system in eye casualty

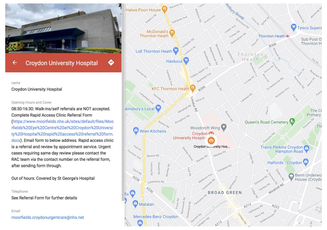


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What is Rapid Access Clinic? It can be searched on Google

Rapid Access Eye Clinic (RAC)
Moorfields
Croydon University Hospital



Uncontrolled Walk-in eye casualty before RAC



Before 2018 (Pre- RAC), it was a walk-in eye casualty

Between 2017-2018, 5894 patients attended walk-in casualty

Only 22% needed emergency management. This is because patients/ referrers' "perceived urgency" is not the same as "clinical urgency". It is also exacerbated by limited eye knowledge. As a result of unnecessarily crowded clinic, there were delay in prioritizing urgent cases. It was unproductive and un-sustainable walk-in service



Pre-referral rate was only 4% with 32 different referral forms without any information about visual acuity in 64% of Referrals!

Illegible readability without enough information is challenging for safe triaging

No feedback channel to the referrers

Service transformation

• Re-design to secured digital referral service with an appointment system.

•2-month-communication campaign prior to launching on 1st November 2018



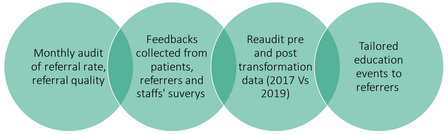
The new service was renamed "Rapid Access Clinic (RAC)."



Standardised, single, simplified online referral form



Service Evaluation



High quality referral = efficient triaging in RAC



Referral rate Increased from 4% to 60% and 88% of them had visual acuity assessment

Appropriateness of referral improved from 18% to 68%



Post- RAC achievement



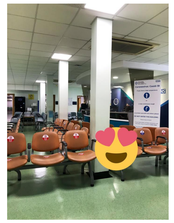




Real Urgent care

Majority of cases were eye emergency needing Ophthalmologist's input such as acute neurology cases. Before RAC, most were minor eye conditions, manageable in community such as conjunctivitis.

Unexpected benefit of RAC during Covid pandemic



RAC had well developed mature e-referral pre-booked appointment system with establishment of symbiotic relationship with referring clinicians before the pandemic. RAC has also achieved sustainable service which plays vital role to immediate adaptation of virtual RAC during lock down to restrict unnecessary face to face consultation. If old walk-in eye casualty was not redesigned to online referral appointment system, continuation of patient care would not be feasible

Even in unprecedented period, RAC works for Right patient at right time with right platform and right management





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Eligible patients for video consultation selected from online referral

Virtual patient waiting room as per online appointment

Real time consultation
Medication posted/collected
Rearrange follow-up/ subspeciality referral

Reference photos are used with Miss Pei-Fen Lin's kind permission