A clinical audit of the appropriateness and documentation quality of eye casualty referrals at Wexham Park Hospital

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Background

- Eye casualty is a specialist emergency department for urgent eye and sight conditions including trauma, sudden loss of vision, and chemical injury.
- Eye casualty referral is a high-risk area and appropriate communication is essential to ensure safe patient care.
- Two key dimensions of referral quality are necessity and quality of documentation.
- There are patient- and system-level consequences of unnecessary referral and non-referral including permanent loss of vision and excess resource allocation.

Aim

To conduct a clinical audit of the necessity and documentation quality of referrals received by the Wexham Park Hospital Eye Casualty against the local triage guidelines to investigate whether the standards are being met and to identify scope for effecting interventions to improve referral quality.

Methods

- 100 consecutive referrals received before 9th September 2020 were retrieved and anonymised for retrospective analysis.
- No exclusion criteria were specified.
- The referrals were analysed against the local Frimley Health NHS Foundation Trust Emergency Eye Care Triage Pathway Guidelines.
- All patients referred should have a clinical need for urgent assessment.
- Presence/absence of all important clinical features specified in guidelines should be documented.
- Referral appropriateness was judged on global assessment if not addressed by guidelines.
- A 15% random sample was double reviewed and validated by a foundation doctor and consultant ophthalmologist.
- Secondary analysis performed on documentation of patient ambulant status.

Figure 1: Clinical features addressed by the Frimley Health NHS Foundation Trust Emergency Eye Care Triage Pathway Guidelines

- Flashes/floaters
- Headache
- Double vision
- Sudden loss of vision
- Bell's palsy
- Papilloedema

Figure 2: Double vision triage guidelines

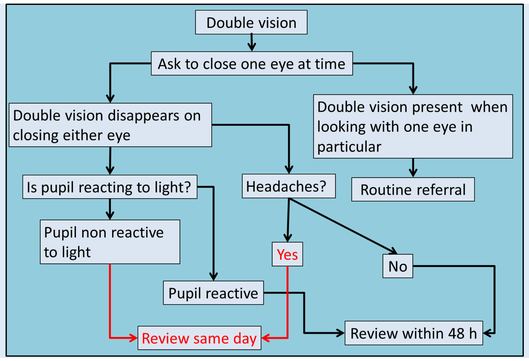
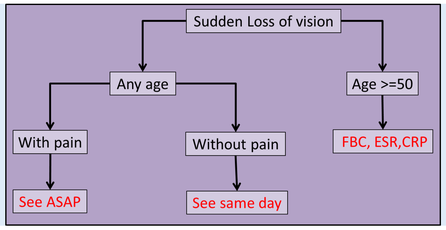


Figure 3: Sudden loss of vision triage guidelines



Results

- 96/100 (96%) referrals were clinically appropriate for eye casualty.
- 33/100 (33%) referrals involved clinical features addressed by guidelines.
- 23/33 (70%) referrals involving clinical features addressed by guidelines lacked complete documentation.
- 67/100 (67%) referrals involved only clinical features beyond the coverage of the guidelines.
- The commonest unaddressed undifferentiated clinical feature was red eye in 9/67 (13%) referrals.
- 9/36 (25%) non-ambulant referrals lacked additional documentation justifying the classification.

Conclusion

- Most referrals received by the Wexham Park Hospital Eye Casualty were clinically appropriate.
- However, efficient triaging is limited by the narrow coverage of local guidelines and poor documentation.
- Measures to widen the scope of triaging guidelines and increase their profile among referrers have now been actioned to facilitate risk assessment, resource allocation, and national benchmarking.

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Conflicts of interest

There are no conflicts of interest to declare.