Audit of novel hybrid model of care in General Ophthalmology using diagnostic hubs

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Background

The usual model for clinical care involves diagnostic checks and consultant review occurring on the same day. Arranging both on the same visit has a number of disadvantages such as limiting patient numbers seen, long wait times and clinic space constraints.

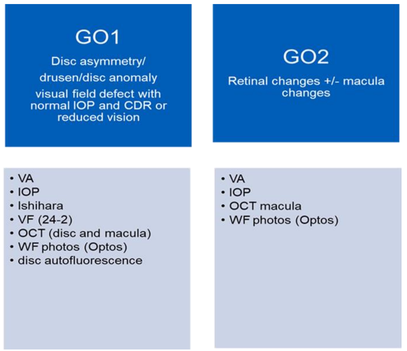
Therefore, a new model was trialled with the aim of improving efficiency.

In this model suitable patients are first identified via triage. They are then scheduled to have an earlier scheduled diagnostics appointment followed by a remote consultation with a consultant within a few weeks.

Methodology

Suitable low to medium risk conditions identified during triage:

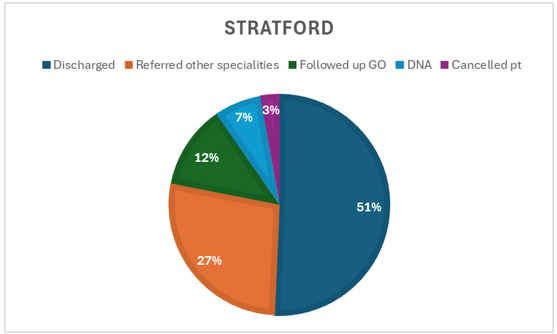
- Suspicious discs
- Disc drusen
- Reduced vision
- Non-specific blurry vision
- Macula changes seen (normal VA)
- Visual field defects with normal IOP's and CDR
- Neurological conditions for monitoring

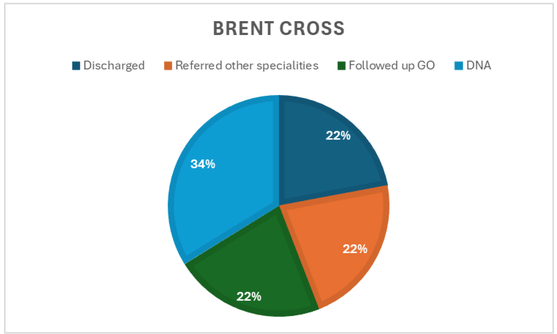


Technicians use a comprehensive questionnaire
Red flags like raised IOPs seen immediately

Results

Stratford hub: 73 patients were reviewed – seen between Sept 23 and February 24
Brent Cross hub: 68 patients were reviewed – seen between Sept 23 and Nov 23, then Feb 24 to Apr 24





Analysis

Stratford hub:
- Discharge rate of 51% – F2F previous clinic audits (40% to 47%).
- Roughly 40% required further treatment/management.

Brent Cross Hub:
- Discharge rate of 22% is lower than Stratford.
- 44% required further treatment/management.
- Results distorted by high DNA rate of 34%. Data from another audit showed this was due to location.

Positives:
Increased appointment flexibility for patients and reduced wait times
Improved efficiency with video/phone consultations
Freeing up face to face appointments for high risk/red flag urgent cases

Negatives:
Long distance commutes to reach diagnostic hubs
Unclear communication of appointment details
Accessibility of diagnostics and virtual consults

CONCLUSIONS

- This model could be the future of increasing remote consultations
- F2F clinic audit had 30% dissatisfaction with waiting time in clinic
- Further audits re patient satisfaction, efficiency and outcomes
- Clear protocols for triage and diagnostic investigations are key to success
- Now a single comprehensive bundle of investigations
- Location of hub must be convenient
- Good patient communication is important