Eye Casualty Referrals to Rapid Access Corneal Clinics in a Tertiary Level London Hospital

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Introduction

- Western Eye Hospital, Imperial College Healthcare NHS Trust, is a tertiary Ophthalmology unit in North London, with one of the busiest eye casualty departments covering most of the northwest London region, especially during out-of-hours.
- High volumes of patients presenting to casualty with emergency anterior segment pathology led to the creation of Rapid Access Corneal Clinics (operating once a week), to offload referrals of acute conditions into already inundated cornea clinics.
- They were designed to review straightforward cases anticipated to only require one further follow-up appointment prior to discharge.
- Criteria to be referred into these clinics include follow-up required within 1-2 weeks (no financial reimbursement to the Trust outside this period), approval by the A&E consultant or senior in charge, and diagnoses considered as "appropriate" for referral as per departmental guidelines.

Aims

- To ascertain whether patients are being seen in the rapid access corneal clinics within 2 weeks
- To assess the appropriateness of conditions being referred
- To identify the rate of further corneal follow-up vs discharge after first clinic visit
- To assess the grade of referrers and whether senior discussion occurred as per protocol
- To review patient postcodes and establish whether they fall in the Trust's catchment area

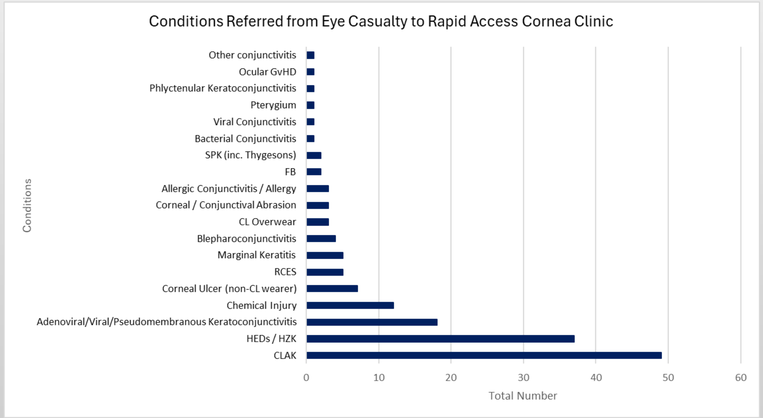
Methodology

- Retrospective data was collected over a **3-month period** (1st August – 31st Oct 2023)
- **Total of 156 new eye casualty referrals (median: 14/week)** made
- Patient data was collected from electronic health records (Medisoft and Cerner)

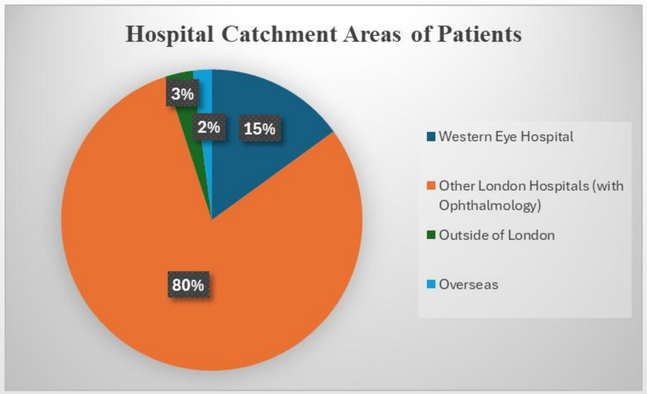
Results

- Median age of patients = 39 years
- 60% were female and 40% were male
- Time to appointment: **18% of patients were seen more than 2 weeks after their initial casualty visit** due to lack of appointment availability

- **Top 3 presenting conditions *(Chart 1)*:**
  - Contact lens associated keratitis (CLAK) 31%
  - Herpetic eye diseases (HEDs) 24%
  - Viral Keratoconjunctivitis 12%



- Approximately **15%** of referrals made were **not appropriate** by diagnosis criteria e.g., corneal abrasions, pterygiums etc.
- **75% concordance rate** between diagnosis made in casualty and clinic
- **51% of patients' conditions resolved after only one visit** with subsequent discharge
- High **'did not attend' rate of 19%** with **15% being discharged**
- 8% of patients were rebooked into rapid access corneal clinics for ongoing future follow-up
- **19% of patients required longer-term follow-up** in the general cornea clinics, but only 7% of these lived in the hospital's catchment area.



- No senior approval was documented in 12% of referrals made by junior registrars (ST1-4)
- Ambiguous as to whether other allied health professionals also had to seek senior approval for their referrals
- **Only 15% of patients seen in the hospital's rapid access corneal clinics were from the trust's catchment area** *(Chart 2)*

Conclusion & Recommendations

- Overall, the Western Eye Hospital performed well keeping to the <2-week target
- Areas to be improved: DNA rates, minimising inappropriate referrals, not rebooking patients longer-term in rapid access clinics, more clinics per week.
- This audit also highlighted challenges of being a tertiary centre and the freedom of choice patients have to seek care at any hospital of their choosing in the NHS. Not only can this lead to an inundated service and financial consequences but also compromise care of more local patients as resources are being stretched to encompass patients who may be served equally as well in their local eye units.
- The result is an imbalance in workload across trusts and improper utilisation of each trust's resources.
- A collaborative approach is needed to ensure acute patients are followed up safely across different hospitals.