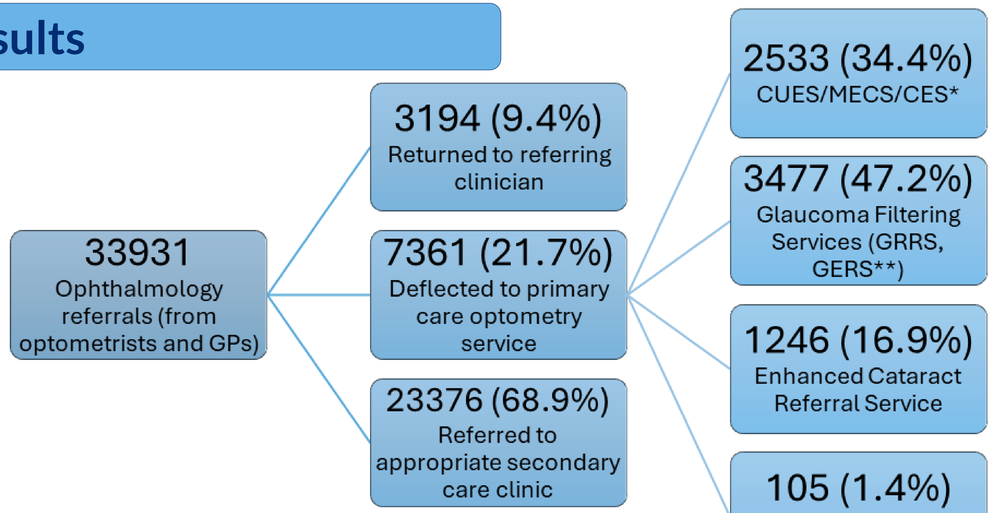
Evaluation of Single Point of Access (SPoA) for the management and triage of ophthalmology referrals to maximise the use of commissioned primary care optometry services

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Introduction

- Ophthalmology provides 7.5 million outpatients appointments a year, the highest of any sub-specialty within the NHS, with ever-increasing demand. [1]
- Avoiding unnecessary or false positive referrals to secondary care is a priority across many specialities.
- SPoA (Single Point of Access) hubs manage all speciality referrals through a single system, ensuring that patients are seen in the right place within the most efficient timescale.
- Some SPoAs shift appropriate care from secondary care by deflecting patients to commissioned primary care services which have been shown to be effective in reducing the burden on secondary care though referral filtering and managing appropriate patients in primary care. [2, 3]
- We evaluate the outcomes of such SPoA ophthalmology referral management and triage services Provided by Primary Eyecare Services in localities across England.

Results



Outcomes of triage. *CUES=Community Urgent Eyecare Service, MECS=Minor Eye Conditions Service, CES = Community Eye Service **GRRS=Glaucoma Repeat Reading Service, GERS=Glaucoma Enhanced Referral Service. For more information about these services please visit https://primaryeyecare.co.uk/services/ or scan the QR code

Conclusions

- Over 1/5 of referrals deflected to primary care service and a further 9% deflected to referring clinician
- Unnecessary secondary care appointments avoided both by patients accessing commissioned primary care services close to home, and by avoiding progression of referrals to potentially inappropriate clinics
- There is substantial potential to further reduce pressure on secondary care systems with the consistent commissioning of both SPoA and extended services in primary care optometry.

Methods

- Primary Eyecare Services provides SPoA ophthalmology referral triage in five Integrated Care Boards (ICBs)
- Referrals were reviewed by optometrists specifically trained in triage, with the following outcomes available:
  - urgent or routine deflection to a commissioned primary care optometry service;
  - urgent or routine referral to secondary care or
  - returned to the referring clinician (e.g. requesting further clinical detail to allow for accurate triage or suggesting alternate management including where referral may not be appropriate).
- The outcomes of referrals received from optometrists and GPs across the five localities from April 2023 to March 2024 were analysed.

References

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3. Baker, H., Ratnarajan, G., Harper, R. A., Edgar, D. F., & Lawrenson, J. G. (2016). Effectiveness of UK optometric enhanced eye care services: a realist review of the literature. Ophthalmic and Physiological Optics, 36(5), 545-557.