

Protecting and improving the nation's health

Quality improvement in the referral of Diabetic patients to the Diabetic Eye Screening Programme.

Author: Sarah Archer

Location: Screening and Immunisation Team Yorkshire and the Humber

INTRODUCTION

At a Public Health England (PHE) South Yorkshire and Bassetlaw Diabetic Eye Screening Programme (DESP) Board meeting in October 2015; a concern was raised regarding delays in referral to the Diabetic Eye Screening Programme from General Practice. As a result from this Programme Managers were asked to carry out an audit of patients with delayed referral to the Diabetic Eye Screening service.

Patients who are delayed in referral to the Diabetic Eye Screening Programme are at risk of Diabetic Retinopathy causing blindness if left untreated.

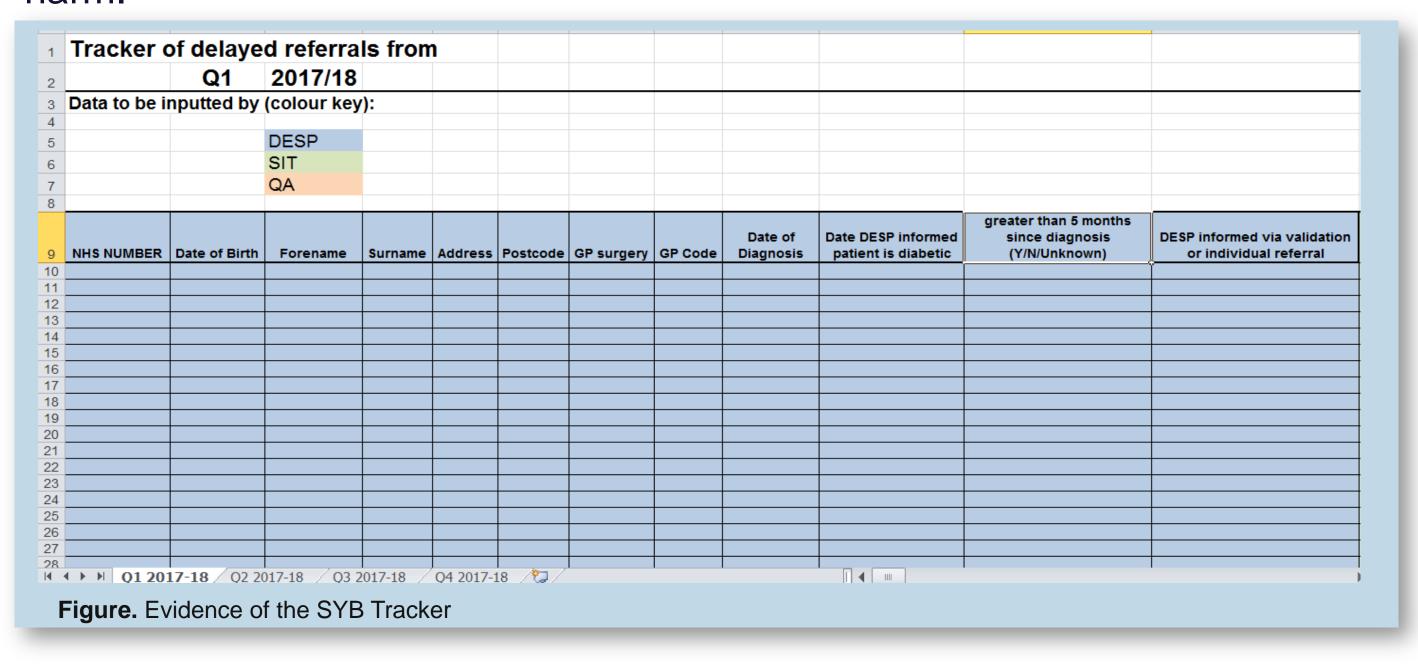
The audit identified significant numbers of patients who had not been referred timely to the Diabetic Eye Screening Programme. A Serious Incident was declared. Reasons why patients were not referred therefore not known to the DESP and not invited in for screening include:.

- Confusion and lack of understanding of the referral process amongst those in **General Practice**
- No systematic robust processes in General Practice to refer patients on diagnosis of Diabetes to the eye screening service
- No Systematic robust process in General Practice to complete quarterly patient (validation) lists and return to the Diabetic Eye Screening

It was identified that harm of increased sight loss had occurred in one patient due to the delay in the referral process.

METHODS

For quality improvement a delayed referral pathway, standard operating procedure and tracker was developed in collaboration with Clinical Commissioning Groups, NHS England/PHE Screening and Immunisation, GP Practices and Diabetic Eye Screening Programmes to ensure patients are identified quickly and delays are investigated to ensure quality improvement between GP practice and Diabetic Eye Programme to reduce risk of patient harm.



RESULTS

SYB Pathway for Managing Delayed Referrals in Diabetic Eye Screening Programme (DESP)

- 1. DESP providers to notify CCG Primary Care Quality Lead and Screening Immunisation Coordinator of practices that have not returned validation list 8 weeks after request.
- 2. DESP providers to identify any referral delays over 5 months from GP validation lists and individual referrals received

3. DESP provider to send patient tracker to Screening and Immunisation Coordinator (SIC-place based). SIT (SIC and SQAS) to agree if programme or primary care

5a.GP-Delay - SICs to manage and send initial delayed referral fact finding form to the GP practice to identify the reason for the delay

4. Patients identified with confirmed delay to be invited to attend for screening within 4 weeks or agreed timeframe if incident.

5b. Programme Delay- SIT (SIC /SIM) & /SQAS to initiate SIAF and follow Managing Incident guidance.

6. GP Practice to return delayed referral fact finding form to SIC within 5 working days identifying the underlying cause of delay

SIC to add findings to the patient tracker SIC to contact the GP practice to review systems and processes and confirm actions have been taken to mitigate

SIC to inform SIM and escalate when: Concerns to non-engagement or failure of practices to address issues identified to CCG

Ongoing concerns re: individual practices knowledge/management of DESP (may include referral to DESP failsafe officer).

7. DESP provider to track all patients identified at step 1 to confirm attendance and outcome on the

Where delay identified as multi provider, practice required to participate in SIT/QA Incident Meetings.

patient tracker. DESP provider to share patient tracker with SIC and SQAS on a quarterly basis or as agreed via incident management process.

8. Programme provider to escalate patients identified with HARM to SIT and SQAS to be managed as a Serious Incident

Figure. Evidence of the SYB Pathway for managing delayed referrals to the Diabetic Eye Screening Programme

The implementation of the pathway has:

- Allowed the Screening and Immunisation Team to reiterate the importance of the Diabetic Eye Screening Programme to Primary Care Colleagues
- Provided effective relationships between the Screening and Immunisation Team, Local Authority, Clinical Commissioning Groups, Diabetic Eye Screening Programme providers and Primary Care Colleagues
- Provided education for General Practice staff on the Diabetic Eye Screening Programme
- Improved communications from General Practices to the Screening and Immunisation Team
- Installed an escalation process to the Clinical Commissioning Group for non response
- Patients referred upon their Diabetes diagnosis
- DESP and practices aware of the cause and effect of incorrect coding of patients
- Practice aware of Implied consent to the Diabetic Eye Screening Programme

DISCUSSION

Patient trackers are produced quarterly by the Diabetic Eye Screening Programme and shared with the screening and Immunisation team for direct follow up with General Practices and supported by all SYB Clinical Commissioning Groups.

T introduction of the process highlighted:

- The practices not following the Diabetic Eye Screening Consent and Cohort Management Guidance.
- The number patients that continued to be delayed into the Diabetic Eye Screening Programme.
- Potential harm to patients identified through delayed referral to the Diabetic Eye Screening Programme
- Practices who continue **NOT TO** follow the SYB pathway for Managing Delayed referral to the Diabetic Eye Screening Programme

CONCLUSIONS

Transformations the Pathway has made:

- Patients delayed to the Diabetic Eye Screening Programme have reduced in numbers by half.
- The amount of practices delaying referral to the Diabetic eye screening programme has reduced
- Emphasized common trends and themes for reason as to why patients are being delayed into the Diabetic Eye Screening Programme.

Recommendations:

- Presentations at Protected Learning Time events by the **Screening and Immunisation Teams and Diabetic Eye Screening Programme, Programme Managers to educate** Practice staff on the Importance of Delayed referral into the Diabetic Eye Screening Programme.
- Regular GP Practice audits should take place to identify patients who have been incorrectly coded

ACKNOWLEDGEMENTS

NHS Doncaster CCG, Doncaster Local Authority, Doncaster GP Practices, Doncaster and Bassetlaw Hospital Foundation Trust NHS Sheffield CCG, Sheffield Local Authority, Sheffield GP Practices, Sheffield Teaching Hospitals.

NHS Barnsley CGG, Barnsley Local Authority, Barnsley GP Practices, Barnsley Hospital

NHS Rotherham CCG, Rotherham Local Authority, Rotherham GP Practices.

REFERENCES

Turner, T and Wakefield, K (2015) SYB Pathway for managing delayed referrals to the Diabetic Eye Screening Programme