

Appendix A

Prior to the launch of the Planned Care Recovery Plan in April 2022, there was a wider Welsh Government recovery plan <https://www.gov.wales/improving-health-and-social-care-covid-19-looking-forward> supported by £100m fund for 2021-2022. Of that fund **£5,669,815 was allocated to ophthalmology (see table below on the slit)**

This was targeted at the following areas to support high risk patients:

- Diabetic Referral Refinement Service (Referrals from DESW and Follow up)
- Wet AMD Service
- Independent Prescribing Ophthalmic Service (IPOS)
- Hydroxychloroquine Screening Service
- Glaucoma (new and follow up)
- Urgent Domiciliary Enhanced Eye Care Service (DEECS)

Health Board	2021/22 allocation
Aneurin Bevan	£1,070,060
Betsi Cadwaladr	£1,258,185
Cardiff and Vale	£902,454
Cwm Taf Morgannwg	£804,674
Hywel Dda	£697,137
Powys	£237,967
Swansea Bay	£699,337

Ophthalmology allocation from Planned care recovery transformation fund.2022- (top date)

- Total allocation for 202-23: **£1,280,813.**
- Current allocation 2023/24: **Q1/2 issued only at this stage: £515,227.**

Health Board	Project	Deliverables	2022/23 funds	2023/24- only Q1/Q2 funding quoted Q3/4 will only be issued on proof of delivery
Betsi Cadwaladr	<ol style="list-style-type: none"> 1. Inter Ocular Pressure (IOP) Primary care Optometrist data gathering pathway for patients with recent medication change. 2. Primary ODTc Diabetic Retinopathy Partnership pathway (expansion) 3. Non-Medic Enhanced skill development for 22-2023 Glaucoma ODTc Service Sustainability 	<ol style="list-style-type: none"> 1. Outcomes: 720 R1 patients/year having timelier, care closer to home and reduced risks from delayed care 2. Outcome: 960 R1 patients/year having timelier, care closer to home and reduced risks from delayed care 3. Outcome: Skill development to enable delivery of a minimum of 8 additional twilight sessions/week: with future benefit to 2,880 patients (2023/2024). Band 5's to acquire Ophthalmology Core competencies during 12months funded period, developing access to a suitably skilled and sustainable workforce for improved future sustainability 	Total £230,104	
Cardiff and Vale	<ul style="list-style-type: none"> • Eye car transformation 	<p>Annual additional activity</p> <ul style="list-style-type: none"> • 1,600 New Glaucoma patient referrals seen in the ODTc's. • 200 "stable" Glaucoma patients with an agreement Treatment Plan seen in Primary care • 1000+ Glaucoma Follow-ups treated at the new Thursday Clinic, that goes operational June 2022 • 1,000 AMD seen in the NHS Wales University Eye Care Centre (NWUECC) Referral Refinement Centre • 1,500 General Medical Retina Patients to be treated in the NWUECC. 	Total £225,000	Q1/2 £112,500

		<ul style="list-style-type: none"> • 1,000+ HCQ Patients to be imaged and screened in the NWUECC. • 300+ Super Saturday AMD Patients • 1000+ various eye pathology patients being treated by the 12 additional training places in UHW. 		
Cwm Taf Morgannwg	<ul style="list-style-type: none"> • Diabetic retinopathy • Wet AMD service • Optometrist Referral Refinement • Eye screening 	<ul style="list-style-type: none"> • Diabetic retinopathy- Each trained optometrist will see 6-8 patients per week. 5 optometrists will be trained initially (and up to 8 optometrists eventually). This will allow the scheme to deliver 30-40 appointments per week (roughly doubling our current face-to-face DR capacity). With 8 optometrists trained, the scheme should deliver >200 appointments per month. Each patient seen is charged by the community practise as £70 per patient. • Wet AMD service- Reduce the false-positive rate for suspected wet AMD referrals. (i.e patients with other pathology should be detected at the referral refinement stage and diverted to other clinics or discharged back to primary care). • This will reduce the demand for new wet AMD appointments. • Optometrist Referral Refinement: will support the development of community optometrists within the hospital eye service to work in medical retina, diabetic retinopathy, glaucoma, unscheduled eye care, paediatric refractions and contact lens services. This will both increase clinical capacity in hospital eye services and allow primary care colleagues to upskill whilst working alongside consultant ophthalmologists and specialist 	<ul style="list-style-type: none"> • Total: £254,170 	<ul style="list-style-type: none"> • Q1/2 £ 92,160

		<p>colleagues to support future shared care services.</p> <ul style="list-style-type: none"> • Screening services commenced in November 2022- 132 total screened 		
Hywel Dda	<ul style="list-style-type: none"> • Virtual Diabetic Retinopathy Service • OPTOM Risk Stratification/Triage 	<ul style="list-style-type: none"> • This pathway will ensure only those patients with the greatest need are seen by a consultant and ultimately treated. • Patients with low-risk Diabetic Retinopathy will be given advice and guidance as part of the pathway. • Only those patients that need to be treated will be given face to face appointments. • Only those patients that need a secondary care follow up appointment will be given one. • Only patients that are clinically identified as suitable and in need will be given diagnostic tests. <p>10 OPTOM sessions is proposed per week, which would result in:</p> <ul style="list-style-type: none"> • 2 sessions a week being utilised for additional reviews (higher level new referrals) with a view to discharging circa 10-15% of patients back to community practices. Anecdotal evidence has suggested that up to 15% of referrals into Secondary care could be managed in primary care but the OPTOMS have not had the required training, which is included in this proposal. • 3 sessions a week to fully risk stratify the remaining Hywel Dda Follow up list. The OPTOMS have (at pace) risk stratified 7,500 records as part of the Glaucoma project and we intend to realise this benefit for the remaining Follow Up cohort of patients. • 1 session a week to keep reviewing new Glaucoma referrals and support any necessary requirements 	Total: £225,300	Q1/2 £112,650

		<p>needed to embed the sustainable Glaucoma Business model. This includes virtual review of ODTC results, or sending patients, following review for an ODTC appointment.</p> <ul style="list-style-type: none"> • 4 sessions a week to Triage (in much the same way as risk stratification) of the Rapid Access Casualty Eye Clinic (RACE). 		
Powys	Outpatient eye care transformation	<ul style="list-style-type: none"> • Increases provision of care closer to home, planned care within Powys, supports repatriation of patients back to Powys. • Positive impact on environment less travel for patients • Supports neighbouring DGHs in terms of demand management and contributes to regional offer transferring patients back for care in Powys, mutual aide. • Positive impact on access times and patient experience • Increases opportunities for employment within Powys and opportunities for training & development via Rural Health Care Academy • Aligns to organisations strategic objectives and recovery/transformation objectives inc North Powys Transformation • Opportunities to fully utilise PTHB facilities and increase provision within County 	Total £123,239.00	Q1/2 £85,417
Swansea bay	Eye care Projects- Diabetic retinopathy and WET AMD service redesign with optometry support	<ul style="list-style-type: none"> • Maintain 100% Wet AMD first appointment within 2 weeks target. • Achieve and maintain 95% eye care measure target for Diabetic Retina waiting list. 	Total: £223,000	Q1/2 £112,500

		<ul style="list-style-type: none">• These established schemes will ensure efficient utilisation of urgent Hospital appointments, increased Optometry pathways and align to the Planned Care Programme 5 Goals		
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