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DORSET DIABETIC EYE SCREENING PROJECT (DDESP) PROGRESS REPORT – APRIL 2006

Organisation

The Executive Group of the DDESP has continued to meet on a monthly basis, chaired by Mr Denis Elkin, the Project Director and the members have remained the same: Dr Wendy Gatling, Clinical Director; Mrs Lynne Lacey, Project Manager; Mr Rob Dawson, IT Project Manager; Ms Sandra Roberts, Service Improvement Manager and Mr Steve Taylor, Optometric Advisor. A representative of the Dorset and Somerset Strategic Health Authority attends the meeting together with Jo Haxby, the Somerset Project Manager for Eye Screening.

IT

Contracts are now in place with Orion Imaging Ltd (now owned by Clinisys) for the screening software and with Graphnet Health Ltd for the primary care data extraction software. Since December, representatives of both software companies, a representative from Poole Hospital IT (who will be hosting the server) and members of the DDESP Executive Group have been meeting on a monthly basis to progress the software implementation. Additional meetings with Orion are taking place monthly in order to customise the system to fit the needs of Dorset in terms of patient pathways, additional grading features and ophthalmology screens. The DDESP is liaising with clinicians across the county in order to meet local requirements wherever possible.

The server is in place at Poole Hospital and should be operational by mid May. Graphnet will then load the extraction software system on to the server and start installation of extraction software in GP practices with plans to complete by the end of June. The Orion software will be loaded on to the server during June and a working system will be set up in the Poole Diabetic Centre and two or three phase one optometrists for system testing. Current plans are for systems to be installed in Bournemouth Hospital and Dorset County Hospital and the remainder of the phase 1 optometrists during July. Call and recall letters to patients will commence in September.

A letter was sent to all GP senior partners and practice managers in March asking for their consent to install the Graphnet extraction software on the practice clinical system in order to extract the diabetic register. This forms the basis of the central database for the screening programme. There were some issues concerning consent but these had been addressed at a national level and, to date, 86 of the 103 practices in the county have signed the agreement.

PCs and appropriate monitors for grading have been purchased and will be installed at optometry practices in the coming months along with the broadband connections. Each user will access the system using the virtual private network (VPN) through Poole Hospital.

Funding

Capital funding is being held at North Dorset PCT and is being released in staged payments. The Revenue funding for 2006/07 has not yet been announced.

Secondary Care

The Dorset-wide Multi Disciplinary Team (MDT) met in December and discussed progress and pathways for the scheme and undertook some clinical grading for training purposes. The next meeting is scheduled on 8 June 2006 and the meetings will continue to be held six monthly. The meeting is attended by consultant diabetologists and ophthalmologists from the three acute trusts, retinal screener graders and representatives from the nursing, business management and clerical teams from the acute trusts. Two optometrists will attend each meeting – one from the east of the county and one from the west – together with a representative from Public Health.

A second full time retinal screener grader, Rosanna Fong, has joined Charlotte Frickey. Both retinal screener graders are based and trained at Poole Hospital but will work across the three Dorset acute trusts under the jurisdiction of Barry Jennings, the Chief Medical Photographer.

Optometrists

There are currently cameras installed in thirteen practices in the county, five of which are already participating in the interim system using the camera software and screening patients using digital imaging. The images are sent to Poole Hospital by anonymised e-mail or CD Rom for second disease grading. Each practice has to undertake capture training at the practice, grading training at Poole Hospital and submit test images before the practice can “go live”. The remaining practices are at different stages of this training. A grading handbook has been written jointly by the Clinical Director and Chief Medical Photographer at Poole Hospital and is being provided to all participants.

In January 2006, the DDESP wrote to all optometry practices and all optometrists on the Dorset list. As a result of this, a further 29 practices have expressed interest in providing a full diabetic eye screening service as part of Phase 2. This gives a total of 43 practices with a good geographical spread. Each practice is now being asked to commit to the service and agree to purchase a camera by August 2006 in order that training is completed by 31 December 2006. All diabetic eye screening must be undertaken by digital imaging from 1 January 2007.

Additional practices have expressed interest in providing a capture only service and some optometrists would like to undertake grading for other practices and these applications will be evaluated by DDESP. Each optometrist is required to grade a minimum of 500 patient images per annum, 250 of which will be provided through the quality assurance scheme. Some optometry practices purchasing a camera have concerns as to whether they will have sufficient demand to meet this grading requirement and they will therefore need to be given priority on grading images from other practices who need assistance.

Patient and Public Involvement

A Stakeholders meeting was held in January 2006 and the issue of patient information was discussed with the participants, including patient representatives. A patient leaflet will be distributed through pharmacies, optometrists, diabetic centres and GP practices during May and a further leaflet may be issued later in the year. The next meeting of the Stakeholders group is scheduled for Wednesday 21 June 2006 at 6.30 p.m. at Poole Hospital.

Screening Office

Plans are underway for the Screening Office to be based close to the Diabetic Centre at Poole Hospital. Recruitment for clerical staff will be undertaken in May.

Training

A national accreditation and training system is being implemented and the scheme is being set up at pilot sites. It will then be rolled out across the country by July 2006 at the earliest. The qualification – The City & Guilds Diploma in Diabetic Retinopathy Screening - is designed to meet

the learning needs of all personnel involved in diabetic eye screening. The qualification comprises eight core units and an exit examination and is an in-service, work based qualification.

Certificates of unit credits will be issued to learners who are successful in one or more units, but who do not wish or need to complete the full qualification. Optometrists registered with the General Optical Council (GOC) will be exempt from three units. Hospital screeners and optometrists will have to undertake all units and take the exit examination; technicians, nursing and administrative staff will require basic units only. It is anticipated that 105 personnel in Dorset will require all or part of the Diploma. All screener/graders will need to be accredited by the end of 2007. The DDESP has been working with the Dorset and Somerset Strategic Health Authority Workforce Development team to ensure that the Diploma is included in the Investment Plan.

Audit

Two audits have been running for the year to 31 March 2006:

Practice Audit - optometrists have been invited to return details on:

- number of patients on diabetic register
- number of patients screened
- number of patients who failed to attend

Since it commenced, the number of audits returned has increased as the number of diabetic registers held by practices has increased, from 44 practices to 48 (out of 80 optometrist diabetic eye screening practices in Dorset). The main outcome is the DNA rate, which has ranged from 14% to 18%. This will be recorded continuously once the new software is up and running.

Fundoscopy audit – some patients with diabetes may be ineligible for screening because they cannot physically or mentally comply with treatment. Although fundoscopy is no longer an acceptable form of screening, it was agreed that this would continue to be available to this group of patients in order to identify the number of patients involved and the reasons fundoscopy was undertaken. This will help in the development of a clear pathway for excluding patients from the new NHS Diabetic Retinopathy Screening Programme.

Annual Report

There is a national requirement to produce an annual report for the year to 31 March 2007 by October 2007. DDESP plans to produce an outline annual report for the year to 31 March 2006 for local and learning purposes.

Quality Assurance

Further national guidance has been issued and this work will be progressed when the software is in place.

Exclusions from Screening

New national guidance has been issued concerning excluding patients from screening and the Clinical Director is working with two GPs to look at how this guidance can be interpreted in practice. This will be an agenda item at the Dorset-wide MDT meeting in June.

Website

A website has been set up and will continue to be developed. This provides information for everyone involved in diabetic eye screening either as a patient or as a clinician.

www.dorsetdiabeticeyescreening.co.uk

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