

QUARTERLY MEETING 13 June 2018

The UKOA held its second quarterly meeting of 2018 on 13th June. Thank you to all who attended.

The agenda was varied and included a number of presentations from UKOA members setting out their own areas of good practice, these presentations were very well received and generated lots of questions from other members and a number of follow up actions identified.

UKOA progress update: First we heard from Melanie Hingorani (UKOA and Moorfields) and Gill Slater UKOA project support about progress of the Alliance. The UKOA website is now live www.uk-oa.co.uk, with the private members' area due to go live around the end of June. Since the first quarter's meeting we have 12 new members, totalling 39 members to date (a full list appears in the presentation provided). Now we are better established, we will invite all UK NHS ophthalmology departments to join us, sending the invitations in waves over the next few months to grow the membership in a manageable manner. If any units do not want to wait and approach us now for membership we will accept them.

We are delighted to announce that we have very recently appointed a nine member multidisciplinary UKOA Board. The Board will meet soon to start working on future strategy, plans for formal terms of reference and longer term financial support model. The first of our UKOA quarterly newsletters was issued in March, with the next due out in July. We have also hosted two successful best practice/management meetings which proved very successful and we aim to hold future sessions regionally which aim to focus on specific subjects as guided by our membership - so if you are interested in hosting/attending in future sessions or indeed if there is a specialist subject you would like the Alliance to develop a workshop for - please let us know by emailing us at uk.oa@nhs.net.

Eyeefficiency app: 'Eyeefficiency' is in pilot for cataract procedures and is a simple standardised way to perform a 'time and motion' study for your cataract operating list. The NHS version is a development of a research app created by the College Sustainability Group. It takes into account your patient case-mix, involvement of trainees at different levels, recording any complications and providing analysis and benchmarking of timings of each phase of the patient theatre throughput, including surgical and non-surgical time. If anyone is interested in testing and reviewing the app this can be downloaded for android and iPhone by searching for 'Eyeefficiency' [in your app store](#). If you do try it, ***please given us feedback***. We will trial this version for usability by theatre staff in a small number of Moorfields sites in July, adjust the app as required, and we will then be looking for volunteers to pilot in their sites. An intravitreal version is also being developed.

Coding: A coding workshop was been held in May with clinicians, coders and managers from a variety of trusts, the National Casemix Office and national coding query staff, and College HRG expert working group lead contributing to developing a best practice guidance document to coding. A draft publication will be shared on the website for your comments/feedback soon – we will let you know when it's in the members' area!

Procurement: IVT Packs: The NHS National Procurement Category Tower has been operating for 6 months. Oleksandr (Alex) Lyubych Category Manager is currently collecting / analysing data to produce high quality lean procurement packs which can be used nationally for common ophthalmic procedures, working with UKOA members. Colleagues are working on IOL procurement for quality, devices and instrument sets. Alex brought with him a large number of IVT pack samples from suppliers which members opened, compared to what the UKOA has requested in the packs and the quality and usability of the contents. The Alliance members identified their preferred product content from the various supplier packs provided and the procurement team are now liaising with suppliers to obtain trial packs which members will be able to try out in their own units. The national procurement team will be able to support units to assess how costs with the new packs will compare with current costs to help decide whether to purchase them for regular use.

We took the opportunity to review our many existing cataract packs and instrument sets currently in use – to commence the same process as we have done with IVT packs to review and refine these to identify an ideal pack content. Initial feedback has been provided from the workshop and Melanie Hingorani will review and develop a proposal from this feedback to share for discussion with the membership – again more will follow on this. This process is also being replicated with IOLs, currently working with a smaller “expert cataract working group”, and instrument sets and consumable packs for other procedures will be addressed over time.

One particular area of interest is the advantages and disadvantages for better environmental/carbon waste products, including disposable trays and packaging, single use instruments and how to assess this including the environmental issues of transporting and sterilising reusable products. This is a complex area to analyse but the College sustainability group are working on this with international colleagues and we hope to look at this at a later stage in this process.

Patient Standards: David Galloway, Head of UK Eye Clinic Support at the RNIB, shared a draft copy of the Patient Experience Survey form for the attendees to discuss and review. Alliance members gave feedback on content which David has taken away to develop a further draft which will be again shared with members for comment to reach final approval – a great opportunity to really evidence engagement with patients about their experience – so please do offer any comments you might have when you receive this! Once the questionnaire agreed we will aim to pilot in member sites and once this is done will aim for the first ophthalmic patient standard full national survey. We also discussed the draft evidence based patient standard, based on the literature search and analysis of current patient guidance from bodies such as the RCOphth, NICE and CQC. This will be sent around shortly for comments.

Scan4Safety: Adam Parsons, from Salisbury NHS Trust has been piloting this national initiative which uses a scanner and bar codes to identify everything involved in a theatre list for each patient from devices, consumables, instruments, drugs and implants to staff and rooms. This is analysed for costing, efficiency, stock management etc to ensure the unit has the ‘right patient, right product, right place and right process’. There is a cost to invest in the equipment, training and software but it has the potential for significant cost savings. Full information can be found in the slide presentation provided. Adam has kindly agreed he can be contacted by email for a discussion if other trusts wish to know more or consider becoming pilot sites for the process Scan4Safety@salisbury.nhs.uk.

Ophthalmology Modelling: High Impact Intervention, Kate Branchett from NHS England National Elective Care Transformation Programme provided information regarding the three-step action plan to ensure the timely assessment and follow up in outpatients of those most at risk of sight loss due to chronic eye conditions. The full specification should be published soon but all CCGs and trusts have received a letter mandating involvement with the actions and this will be managed by the regional NHS England, / NHS Improvement hubs. This is a “must do” for the coming year for English trusts and commissioners.

National Investigation, Keely Galloway works with the Healthcare Safety Investigation Branch (HSIB) which has experts from across fields as diverse as clinical, root cause analysis, human factors, IT and engineering, and investigates incidents at a national level to improve patient safety. Keely explained the criteria they use to evaluate the case of wrong IOL lens implants and the work she and the team have undertaken. Group discussions were held to discuss the best / safest practice amongst the very wide variation in how the guidelines for WHO checks and IOL selection is actually performed. The draft recommendations of their investigation are expected to be released soon.

Our next meeting of the UKOA is on the 20th September to be held again at Friends House in London if you have not already received the invitation to attend please do let us know and we will forward this to you. We do ask members to please accept or decline these so that we know who and how many will be attending (we do have maximum number of seats so need to track numbers). Please also share this invitation with other colleagues in your organisation if they wish to attend – please let us have their contact email so we can add them to our distribution list for future updates/invites. Also please send us the email addresses of any colleagues in your organisation who would like to be involved and to receive our event and email updates so we can add them to our distribution list.

Actions from the meeting

- ✓ UKOA website launch – member access will be emailed once available
- ✓ Procurement – further session with the expert cataract group to develop ideal cataract packs, instrument sets and IOL packs to be arranged – if you are interested in joining any of these do let us know!
- ✓ Please feedback on patient survey
- ✓ Please try out the Eefficiency app if you have time and feedback or volunteer to be a pilot site
- ✓ Further version of the amended Patient Standards Draft to be shared with members for comment/feedback.

Dates for your diary - 2018 Quarterly Meetings

- Thursday 20th September – Friends House, 173 Euston Road, London NW1 2BJ
- Thursday 6th December – Friends House, 173 Euston Road, London NW1 2BJ