

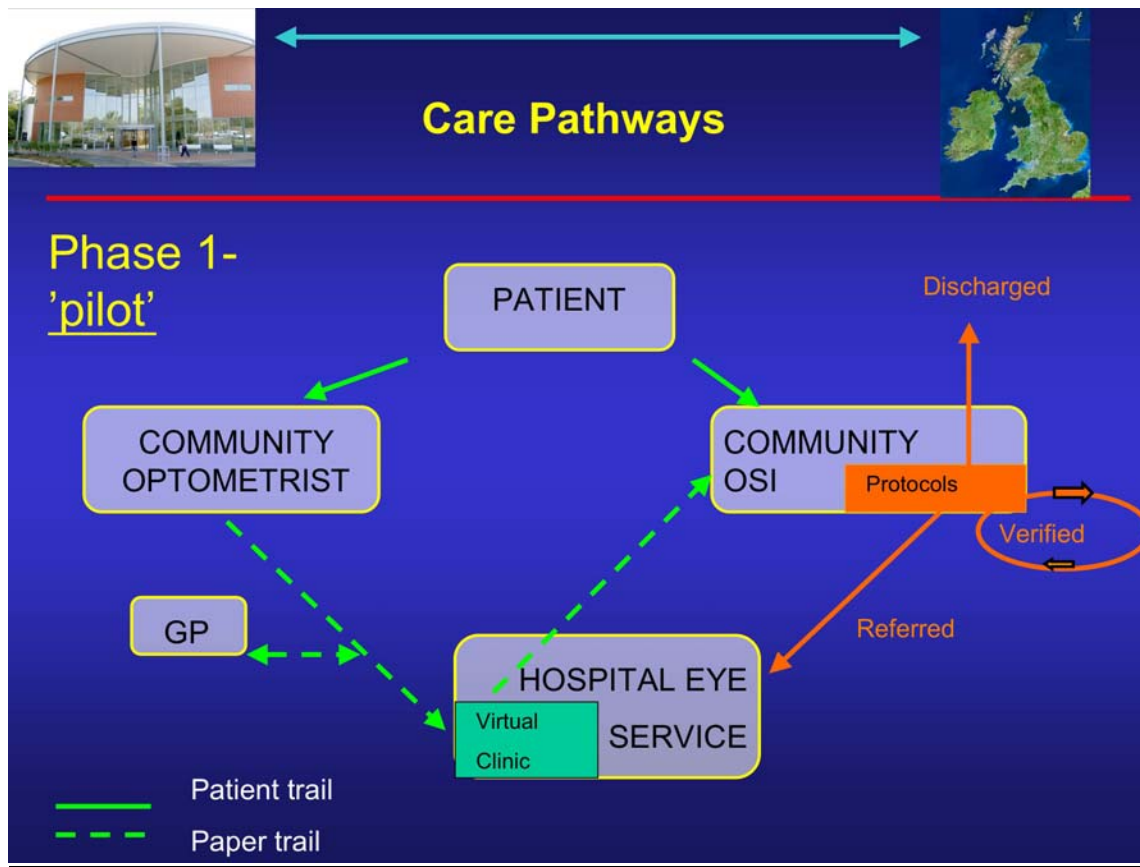
Hinchingbrooke Hospital and Community Glaucoma Scheme Proposed Care Pathways

Please can we draw your attention to the following diagrams which illustrate the 3 phases in the development of the glaucoma scheme. It is hoped that this will serve as a background to the meeting on 22 March, where the pathway will be discussed in detail.

5 community optometrists have already been appointed within Huntingdonshire to be 'optometrists with a specialist interest in glaucoma' or OSI. They have standardized equipment. In addition, a hospital optometrist with a specialist interest in glaucoma (Karen French) has recently been appointed.

Phase 1: the 'pilot phase'

Here, the community optometrist without a specialist interest continues to send a referral letter via the GP to the hospital. This is dealt with in a virtual clinic staffed by the hospital optometrist on a Tuesday (who has access to Mr R Bourne's glaucoma specialist clinic). A database is kept of the types of referral. If there is a high suspicion of glaucoma, the patient is sent an appointment for the Hospital Eye Service directly, however suspect cases are referred to the OSI who then calls up the patient and follows the agreed protocol.

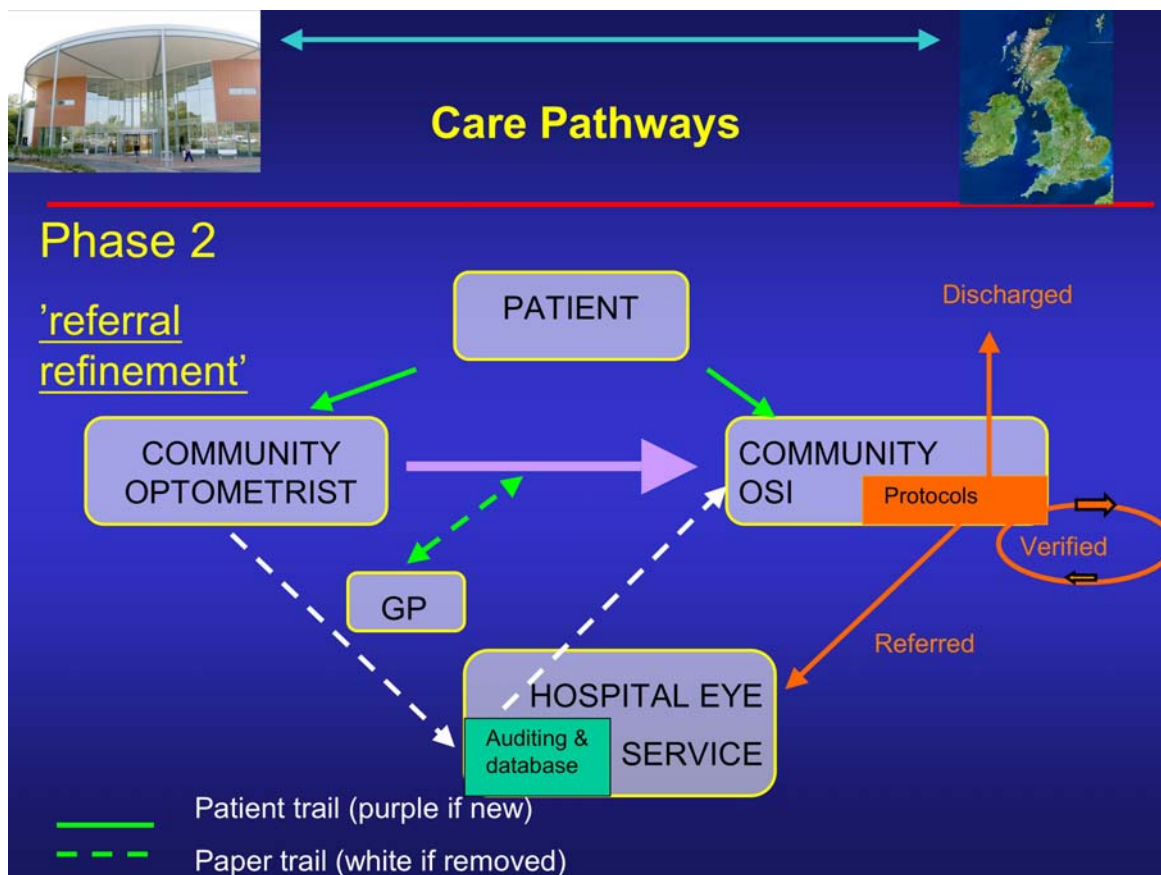


Advantages of having this phase rather than going direct to Phase 2:

- a. Ability to audit the types of referrals coming to the hospital
- b. Direct involvement by the newly appointed hospital glaucoma optometrist (who is also an OSI)
- c. Ability to invite the OSIs from the community to sit in on this virtual clinic and familiarize themselves with the types of referrals the HES receives and the protocols that we will be using in Phase 2
- d. Reducing the initial burden on the OSI before Phase 2 begins.

Phase 2: the 'referral refinement' phase.

This differs from Phase 1 as shown by the purple arrow and the dashed white arrows which are phased out. This phase involves all glaucoma suspects detected by community optometrists being referred to the community OSI. The virtual clinic is transformed into a database centre that tracks the referrals and audits the process.



Phase 3: the 'shared care' phase.

This differs from Phase 2 as shown by the purple arrow. This phase involves selected glaucoma suspects/cases being referred back to the community OSI for monitoring in the community. The database centre will track and audit this process. By this time it is intended that electronic links will exist between the OSI and hospital enabling transfer of images and visual fields

