GUIDELINES FOR CATARACT DIRECT REFERRAL

June 2010 (updated June 2011)

In Gloucestershire we have been fortunate over the years to have developed excellent relationships between the healthcare professionals and Commissioners involved in the provision of eye care. This has enabled Gloucestershire to be one of the leading areas in the country for pioneering the development of eye care services. Optometrists have also been developing their role as Primary Eyecare Providers. In June 2005 we widened the Direct Referral Scheme for Cataract to cover all referrals where cataract is the major or significant reason for the loss of vision. Please follow these guidelines for the referral process in order to ensure appropriate referral and treatment for our patients. For patients with unilateral Cataract where there is no significant cataract in the fellow eye, a clinical assessment will determine whether NHS funded surgery will be available for that eye.

Criteria for Referral

Patients will be monitored in the community as their cataracts develop until they reach the point where their vision is significantly affected. At this point, to assist in assessing patients for cataract referral the optometrist will complete the Gloucestershire Cataract Assessment Questionnaire Form (CAQ). This needs to be completed for all patients being referred and attached to the Ophthalmology copy of the referral.

The referral criteria are:

1. A CAQ score of ten or greater is eligible for referral. The score needs to be entered on the new referral form in the space provided.

2. If the CAQ score is less than ten but you feel there are VALID REASONS FOR SURGERY the patient may still be referred. The CAQ score should be entered on the form in the usual way and the reasons for referral need to be clearly stated in the box labelled "Further Comment". Referrals of this kind will be seen by a consultant ophthalmologist to ensure that the patient has a carefully considered and expert opinion re possible surgery.

Comments on Refractive outcome

It is recognised that the referring Optometrist may have examined the patient on a number of occasions prior to referral. It will be possible for the Optometrist, having discussed the options available with the patient, to express an opinion as to the preferred refractive outcome post operatively and to give reasons for this opinion. This will be taken into account when the patient is examined by the ophthalmologist in the hospital. If a different outcome is decided at the hospital appointment reasons will be given in the report back to the optometrist from the ophthalmologist.

Guidelines

When the patient is assessed by the ophthalmologist at the hospital following referral, in consultation with the patient a decision may be taken with regard to the care pathway and in many cases whether surgery will be offered for one or both eyes. The following criteria will be used in reaching a decision.

1. Where operating on the first eye would create anisometropia of 2 Dioptres or more surgery will be offered for both eyes.
2. Where patients are keen to have only one eye operated then one eye will be offered and the post operative result matched to the unoperated eye.

The Gloucestershire Referral Procedure

Patient Choice

Under the NHS Constitution patients must be offered a choice of provider once a decision to refer has been made. This can include either NHS or private providers anywhere in the country which are willing to carry out NHS work. The referral thresholds are applicable regardless of the provider since these relate to Gloucestershire patients and not to the location of the provider. The PCT has commissioned a Fast Track referral scheme from GHT (Gloucestershire Hospitals Trust). This is part of its undertaking with its population to offer faster treatment to the national wait time target for cataracts should patients require it.

To help patients to understand their options, the NHS Choices web site at www.nhs.uk/choices provides information on individual hospitals and the experiences of other patients. Although the PCT has not commissioned a fast track service other than at GHT, other providers also have short wait times and patients should also take this information into account when choosing a provider.

Where patients choose to be referred to a provider other than GHT, the procedure for “referral to a general clinic” applies.

Gloucestershire Referral (GHT):

1. Fast track Referral

The Fast Track Referral Scheme will continue to offer an efficient user-friendly pathway for all patients with simple cataract, even when there is co-morbidity. However, expectation for referral must be to proceed with surgery. Patients must sign to say that they agree with referral and to proceed to surgery should it be offered. Fast track referral is available at Gloucester (GRH) and Cheltenham (GCH). A referral fee will be paid. Optometrists must be registered with the PCT to be able to refer directly.

2. Referral to a general clinic

Patients with significant cataract but with significant ocular co-morbidity or complicating secondary issues will also be referred directly but into a general clinic rather than the cataract fast track clinic. Referral is to Gloucester or Cheltenham or any community hospital clinic as requested. However where the appointment is offered is ultimately the decision of the ophthalmologists. A referral fee will be paid.

3. Conventional GLOS1 Referrals

Patients who need to be assessed by an ophthalmologist but where the primary reason for referral is not cataract and surgery might not be offered, please continue to refer via the GP on a GLOS1 or referral letter. No fee will be paid.
4. **Private Referral**

Patients who have private health cover or wish to be seen privately can be referred to the consultants at their private rooms, details of which can be found on the LOC Web site. Where a patient does not qualify for a NHS procedure in the second eye private referral remains an option.

All Direct referral forms, together with a copy of the CAQ form, are to be sent to Gloucestershire Royal Hospital, Central Booking Office, 4th Floor, Victoria Warehouse, The Docks Gloucester GL1 2EL.

A fee will be paid for all direct referrals and claimed in the normal way on the relevant claim form. An audit trail must be kept within the practice. No fee will be paid for non-direct referrals via the GP. Referrals will be audited to ensure that the present high quality of referral is maintained.

### Appeals Process

All patients who have been referred with sub threshold scores will only be listed or discharged back to the referring optometrist on the instruction of a consultant.

If you still have questions with regard to this decision then contact John Ferris by e-mail and he will review the patient’s case. The result of the review will be advised.

John Ferris’ e-mail address is:  
[john.ferris@glos.nhs.uk](mailto:john.ferris@glos.nhs.uk)

**All Cataract Referral is to be via the Community Optometrist.**

It is intended that all referral for cataract will be by the community optometrist. If a patient goes to see their GP having noticed a reduction in their vision and their GP suspects that this is due to cataracts, then the patient will be given a letter of referral and advised to see their optometrist/OMP.

At the point of referral each patient will have the referral procedure explained to them and be given a copy of either the “What is a Cataract“ leaflet produced by the hospital or the RNIB publication “Understanding Cataracts”. Copies of the Hospital leaflet can be obtained via Frances Reilly at a nominal fee and the RNIB booklet can be purchased via [onlineshop.rnib.org.uk](http://rnib.org.uk). Each patient can choose whether they are referred out of county or stay within Gloucestershire. Patients who elect to be referred within Gloucestershire should be given the PCT leaflet, which explains NHS Cataract Procedures within the county. This can be downloaded off the LOC website or copies requested from Jackie Higgins at the PCT on **08454 221666**.

### The Referral Forms

The Direct Cataract Form and the Cataract Assessment Questionnaire can be completed electronically and downloaded from the LOC website ([www.glosloc.co.uk](http://www.glosloc.co.uk)).

The GP is sent a copy of the referral for reference and information only. No response from the GP is required.

Two copies go to the hospital; one for the ophthalmologist and one for audit.

One copy is kept by the optometrist.
Please note the following changes;

1. It is essential to record the Gloucestershire Cataract Assessment Score and attach a copy of the CAQ form to the Ophthalmology referral. Referrals submitted without the score completed will be returned to the referring optometrist.
2. You are now asked to record where appropriate the patients dominant eye
3. Having discussed the possible outcomes with the patient you are invited to advise the preferred refractive outcome, giving reasons if necessary.
4. Any further information which you believe may be of value in determining the most appropriate care pathway for the patient can be recorded in the appropriate box.

The Gloucestershire Cataract Assessment Score Form

This form needs to be completed with every Direct Cataract Referral and Glos1 Referral. Copies can be printed from the LOC Web site or off the CD in the Practice Cataract referral Pack which is available from Frances Reilly on 08454 224736.

- A score of 10 means that the patient qualifies for referral. Two copies are required; one to accompany the referral form to hospital and one to be kept by the optometrist.
- Where the score is less than ten but you feel there are valid reasons for referral these need to be clearly stated in the pretext box on the referral form.

Audit

In order to evaluate the changes made, audit of the cataract care pathway is carried out to determine the efficacy of these referral guidelines and thresholds. Whilst most of the information required for audit is taken from the referral form and hospital records it will be necessary for practices to record when referral was considered and then deferred due to the patient not meeting the referral criteria or not wanting to proceed with surgery.

The Referral Guidelines will be reviewed annually and may be amended in the light of audit results. Any changes will be fully discussed and agreed between all the parties before implementation.

Fee Claim

The Direct Referral Claim form is completed for each referral and submitted to Jacky Higgins at Sangar House 08454 221666. Again, claim forms may be downloaded from the LOC website or from Jacky Higgins direct. The fee per claim is £42.00 (June 2011).

Registration for Cataract Scheme

All optometrists need to be registered to refer directly. This can be done by contacting Kate Barnes at NHS Gloucestershire on 08454 221588. No additional training for registration is required but knowledge of and adherence to the referral guidelines is essential.