

Surrey NHS DESP

6 month review of change in DS referral criteria

October 2018

EQA recommendation

By developing the digital surveillance (DS) pathway, it will maximise the benefit of surveillance for R2 and M1 patients

A lack of a well-developed DS pathway was considered a barrier to discharging stable patients from HES

What changed?

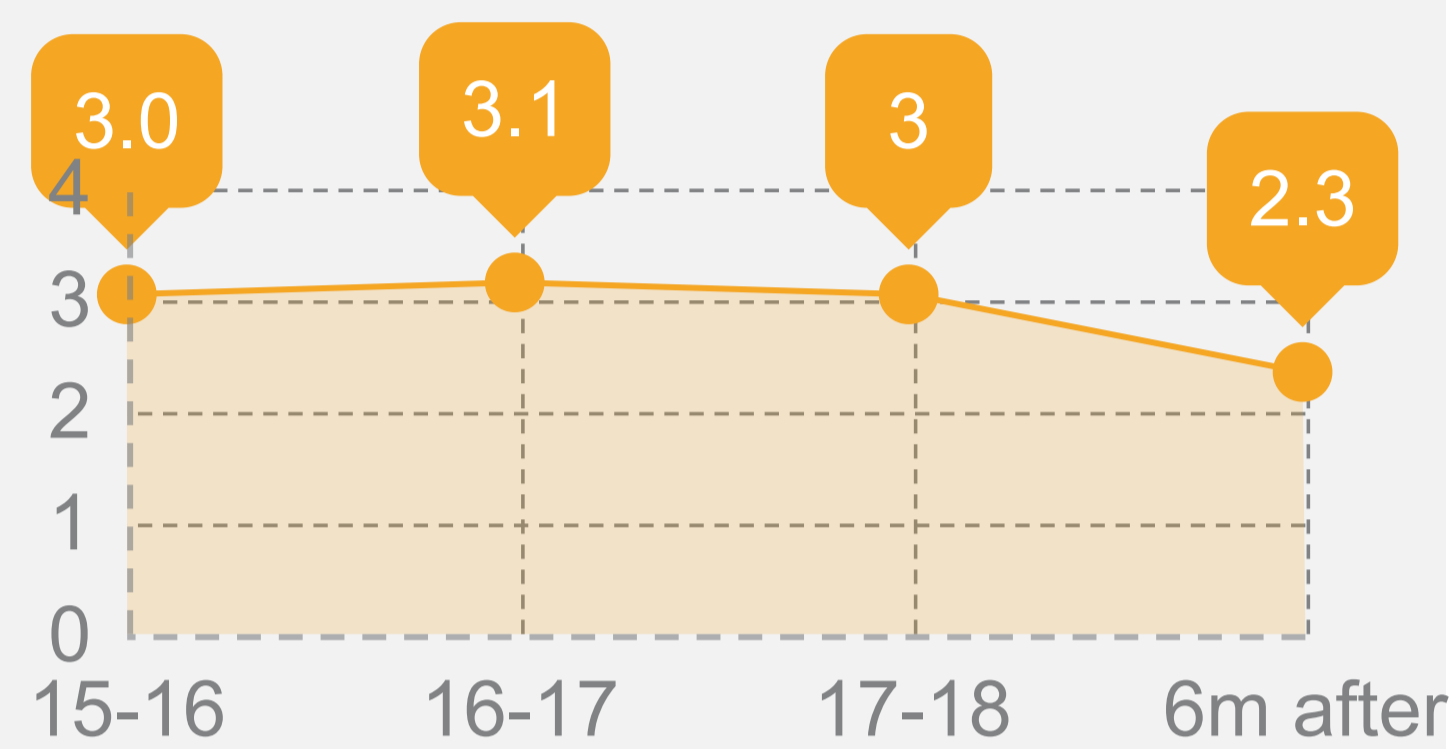
PRESENT Single exudate within 1DD to DS

Single exudates within 1 disc diameter (DD) with a VA of 0.2 logMar or better managed in the DS pathway

2013 - 2018 Single exudate within 1DD to HES

Historically any exudate within 1DD was referred to the Hospital Eye Service (HES)

Routine DR to HES rate



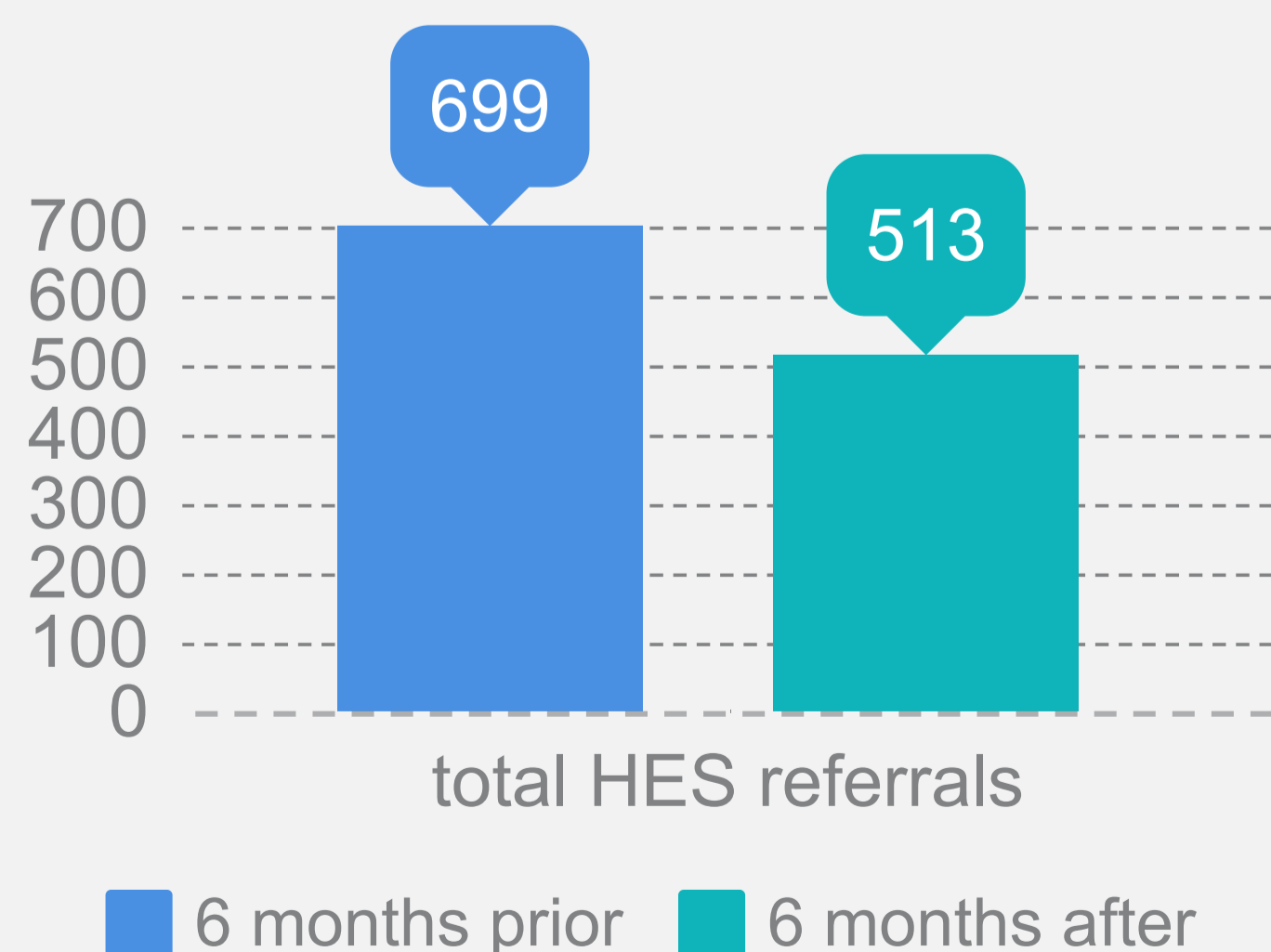
0.7%

Reduction in routine referral rate (6 months after compared to NHS 17-18)

25%

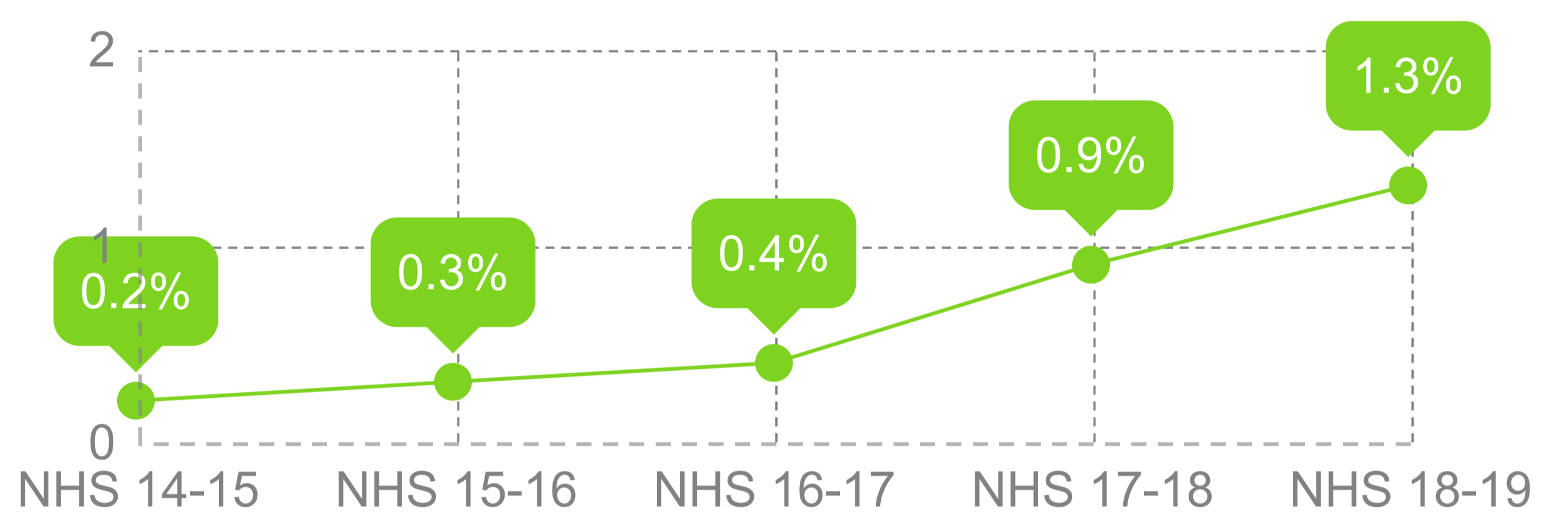
Reduction in number of routine referral to HES (6 months after compared to 6 months prior)

Referrals to HES



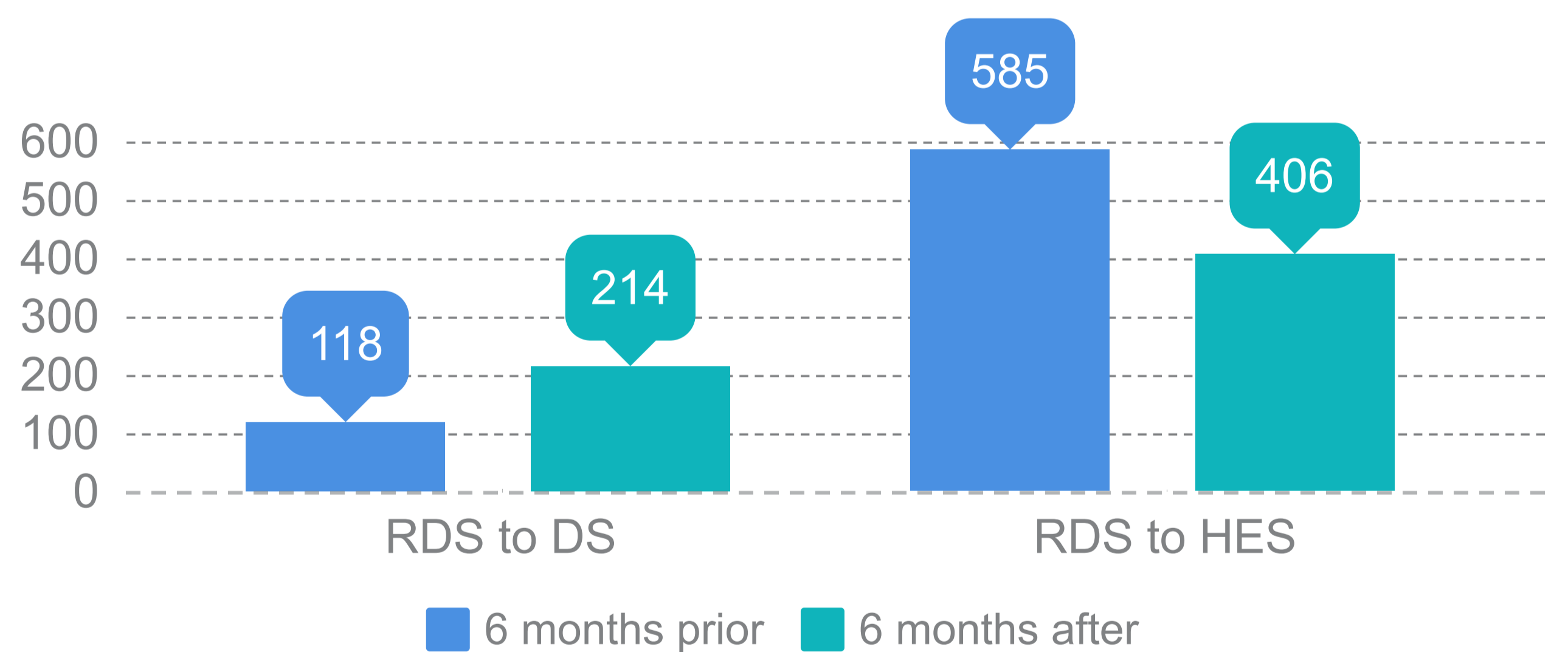
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Percentage of patients in Digital Surveillance



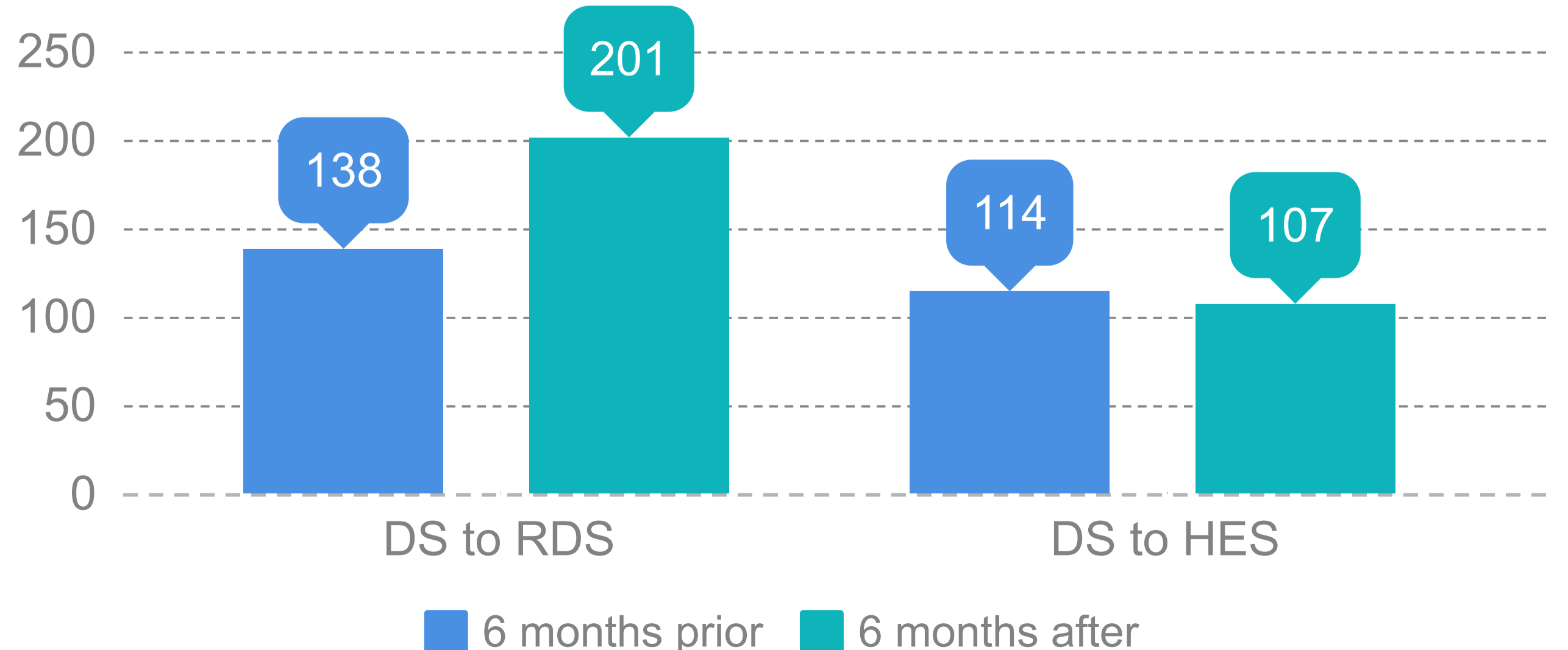
Charts shows the increase in number of patients within the DS pathway as a rate of the eligible cohort

Referrals from Routine Digital Screening (RDS)



Charts shows the increase in referrals to DS and the decrease in referrals to HES

Referrals from Digital Surveillance (DS)



Charts shows the increase in patient returned to RDS and the decrease in referrals to HES