

# Tackling Inequalities & Improving Uptake to Screening in North Nottinghamshire

## Paediatric Patients

The North Nottinghamshire Diabetic Eye Screening Programme has a strong link with the Paediatric Diabetic Consultant & her team, within Sherwood Forest Hospitals Trust.

Every 6 months we audit our “under 18’s”, to check whether they are attending for screening. Any who have not attended within the last 12 months are reported directly to the Consultant, who liaises with the patient and their family to encourage attendance as part of their overall diabetic care. These patients will also be contacted by our Team as part of the DNR audit.

As part of our Covid restoration, 25 paediatric patients who came under “Phase 2” were invited earlier than the 24 month recall date in March 2021, and we are pleased to report that patients have so far attended.

92%

In total, 77.9% of our paediatric patients are engaging with annual screening.

## Learning Disabilities and Diabetic Eye Screening

### Introduction

Diabetic eye screening presents a number of challenges for people with learning disabilities. It is important that these challenges are addressed to give these patients the best chance of managing their eye health and prevent serious sight loss. Barriers to diabetic eye screening can include a lack of awareness of the importance of eye screening, problems understanding processing instructions, fear of the process, previous poor experiences and needing to interact with strangers. People with learning disabilities can be reliant on family or support to enable them to attend appointments, which can cause difficulties. Communication is one of the major barriers to people with learning disabilities and this can be helped by speaking directly to the person, using simple language and giving sufficient time. Sometimes it may be necessary to work with the patient or their carer to take time to get to know the person and understand their specific needs.

### Aim

- To establish how this group of patients is engaging with screening by contacting the patient or in some instances their carer/relative.
- To look at the uptake rate in this cohort
- To ensure systems are in place to assess these individuals and appropriate adjustments are made to meet their personal needs.
- To ensure that these patients receive equitable care and achieve the best outcome.

### Methodology

Our new patient registration form asks GP Practices to identify patients who have learning disabilities which is flagged on OptoMize. We also asked each of our GP Practices to send us a list of all their diabetic patients, over the age of 12, who they have coded as having a learning disability.

The programme liaises with the Trust’s Learning Disability team to identify any diabetic patients within their cohort.

The programme sends the National Diabetic Eye Screening easy read leaflet to patients identified as having a learning disability every year with their annual screening invite.

Understandably, referral to an eye clinic may not be the best option for most people with learning disabilities, as these can often be crowded and time-pressured. However, if the patient is under HES, appointments and patient engagement teams are contacted to arrange pre-visits / desensitisation if needed and appointment times adjusted.

This year, the programme has taken the additional step of attempting to contact this group of patients to understand the reason behind non-attendance and to offer any support needed. All other reasonable adjustments have been taken by the programme.

### Results

NNDESP currently has 109 patients registered with a learning disability and at the time of the project, we had the following:

Patients who have attended for screening in the last 12 months	29
Patients who have a screening appointment booked	5
Deceased	1
Patients were identified as phase 2 of Covid restoration	53
<b>Total</b>	<b>88</b>

It was agreed that the phase 2 LD patients should be invited early as they may need more time or assistance with their appointment.

The remaining 21 patients or their carers (109-88) were contacted by phone to try and determine why they haven’t attended for screening, and all were encouraged to attend where possible. These calls were attempted between February and May 2021 and the results are as follows:

Not attending due to Covid	4	
Fear of eye drops	1	Patient’s Dad is diabetic so patient has agreed to go with his Dad to have both their eyes screened.
Unwell	3	
Seen outside of NNDESP	1	This patient had attended an Optom Practice outside of NNDESP and did not want to rebook under our Programme nor did they wish to opt out. Patient will therefore continue to be invited.
Reason not given but agreed to make an appointment	8	
Calls attempted but no contact made	2	
DS patient being monitored by Failsafe	1	Failsafe made several attempts to contact the patient during 2020 and this will recommence this year when the patient’s invitation cycle starts again. The patient’s GP has been sent a letter to notify them that the patient hasn’t attended for screening.
Need to contact GP due to further query	1	This query has now been resolved and the patient has attended for screening and is included in the follow up numbers below.

### Outcome & Conclusion

72.3% of these patients are engaging with and attending for screening.

Undertaking this additional measure of contacting the individual patients/carers and offering advice and support provides NNDESP with a better opportunity to improve screening for people with diabetes and learning disabilities.

## DNR Patients

### Aim

- To understand the reasons behind non-attendance
- To identify any barriers preventing attendance
- To encourage these patients to attend
- To analyse the outcomes for those who attended

### Methodology & Results (based on information taken from July – September 2020 data)

Total no of patients: 947

Since the data was generated there were some patients who had attended for screening, passed away, been excluded, moved out of area or opted out. These patients were removed from the data, leaving a total of 863 patients to work through.

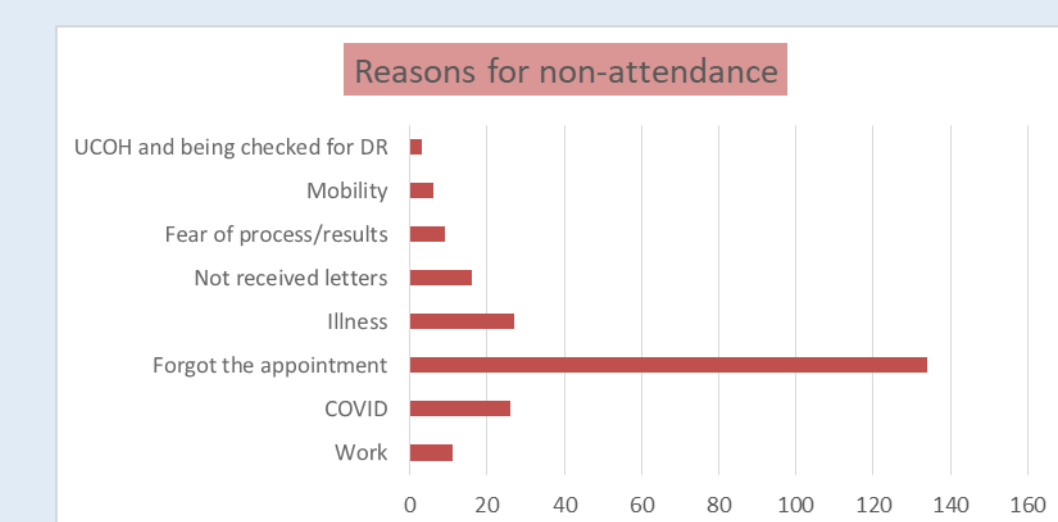
A telephone call was made to each patient to discuss their reasons for non-attendance and to try and offer any advice or assistance

Number of calls attempted	815
Number of patients spoken to	264 (32.4%)

Following the calls, 23 patients chose to opt out and 9 patients were excluded due to being medically unfit to attend screening.

The remaining 232 patients gave the following reasons for non-attendance:

REASON	Number	Actions Taken
COVID	26	
Forgot the appointment	134	Text message reminders are in place for those who have consented for this process.
Illness	27	
Not received letters	16	The address was checked with them and another letter sent.
Fear of process/results	9	Additional time taken to explain & reassure them and went through the process to put them at ease.
Mobility	6	Advised that there are wheelchair friendly Optom Practices and Practices where a car can pull up straight outside.
UCOH and being checked for DR	3	These patients have now been moved to and UCOH pathway and are monitored by Failsafe.
Work	11	Where patients said work was preventing them attending, they were advised that there are late appointments & appointments at weekends



### Follow up

At the end of June 2021, the remaining 229 (232-3 under care) eligible patients whom we spoke to and encouraged to attend, were reviewed to see if any of them had attended for screening/any other outcome.

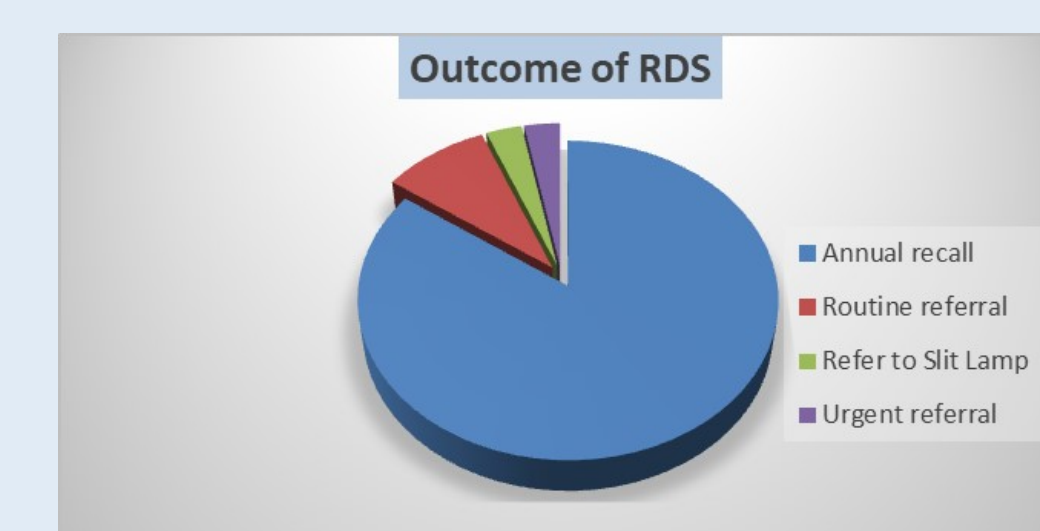
The outcome so far is as follows:

Outcome	No of patients
Attended for screening – annual recall	28
Attended for screening – routine referral	3
Attended for screening – refer to Slit Lamp	1
Attended for screening – Urgent referral	1 – This patient received urgent laser treatment
Opted out	1
Excluded – Medically unfit	10
Moved out of area	2
<b>Total</b>	<b>46</b>

### Referral to eye clinic rate:

33 patients have since attended screening and 1 patient was referred to SLB.

Of the patients who had attended screening,



Annual recall - 28/33 (84.8%)

Routine referral - 3/33 (9.1%)

Urgent referral - 1/33 (3.03%)

### Conclusion

This audit highlights the importance of continuing to engage with those who do not attend screening appointments.

The programme has in this cohort prevented severe sight loss in a patient who had attended the screening appointment following our telephone advice. This patient needed laser treatment following the urgent referral.

This is an ongoing piece of work and therefore some patients may continue to show as DNR. They will continue to be monitored and contacted as appropriate.