

## **Building back better: Improved patient pathway for new glaucoma patient referrals to hospital eye services**

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### **Purpose**

After the initial global pandemic 'lockdown' in July 2020, the Salisbury Hospital Glaucoma Service had over 1200 patients with delayed appointments, with little capacity to see new patients and no option to increase staff. We restructured our patient referral pathway by changing from face-to-face doctor-based clinic appointments to a multi-disciplinary, mixed-mode clinic approach. This included imaging-based screening clinics done by technicians, and results review/treatment plan formulation by a doctor within 4 weeks. Nurse-led phone clinics were used to explain and initiate treatment plans. Treatment effect was then evaluated in face-to-face clinics by a doctor. The aims of this audit were to evaluate if the new patient pathway reduced referral time and sped up initiation of treatment, and whether this approach was acceptable to patients.

### **Methods**

We used our Electronic Patient Record (Medisoft Ltd) to identify all routine new glaucoma patients between May to September 2022 (post-covid 322 patients), and a control group May to September 2019 (pre-covid 175 patients). A random number generator was used to select 50 new referral patients into each group pre- and post-covid. Time from referral to first visit and start of first definitive treatment were analysed. 50 patients from the post-covid group were randomly selected and contacted to complete an online feedback survey on the efficiency, quality of care and communication they received at the different appointments within the new pathway.

### **Results**

Mean patient waiting times from referral to review in hospital eye service halved (169 to 88 days) compared to pre-pandemic with the new pathway. Time from referral to starting treatment was faster, and this included a move to offering laser as first line treatment. Rapid exclusion of non-glaucomatous patient referrals based on initial imaging and risk stratification also increased capacity and reduced demand on clinician time. Patient feedback on the new patient pathway was positive.

### **Conclusions**

The new pathway, now standard care, has helped mitigate the backlog, reduce waiting times, and use clinical staff more efficiently. Patients referred to the hospital clinic for possible glaucoma are seen quicker and treated faster than they were pre-covid. Added benefits include faster initial treatment, improved quality of referrals, better ability to fast track late presentations and improved patient experience. We have built back better to move forward stronger.

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