

curriculum does help build a basic level of knowledge and understanding to help us relate to patients. This basic understanding of how patients react and feel, in my opinion, will help us show consideration for their feelings. Empathy may not come naturally to some, but I feel, at the very least, we should always aim to be conscious that the news we have to give may be far worse for that person than we personally perceive, and have much further repercussions on their lives than we realise. After all, a doctor's job is to alleviate suffering, not just cure disease.

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# Topic: Better Care Together – Ophthalmology Service Re-design

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## NATIONAL CONTEXT

In March 2015, NHS England and its national partners announced the first of 29 new care model vanguards. There are nine integrated primary and acute care system vanguards which will join up GP, hospital, community and mental health services.

Better Care Together (Morecambe Bay Health Community) is one of the nine vanguards. The partners of this vanguard are all members of the Better Care Together Programme, working on behalf of the population of Morecambe Bay, which has 365,000 residents. They include four NHS trusts: University Hospitals Morecambe Bay NHS Foundation Trust; Cumbria Partnership NHS Foundation Trust; Blackpool Teaching Hospitals NHS Foundation Trust; Lancashire Care NHS Foundation Trust, North West Ambulance Service NHS Trust (NWS) and two clinical commissioning groups: NHS Lancashire North Clinical Commissioning Group and NHS Cumbria Clinical Commissioning Group. Two Local Authorities, Lancashire County Council and Cumbria County Council, are also in the vanguard, together with two GP provider federations, the North Lancashire Medical Group and the South Cumbria Primary Care Collaborative.

The Vanguard will create a system that will take responsibility for the whole health and social care needs of the population within a single budget. 'The Morecambe bay pound'

Ophthalmology BCT pathway was successfully launched on the 6th September 2016. It is designed to make the Hospital Eye Service (HES) more productive, working hand-in-hand with integrated out of hospital services in optical centres and GP practices, and focusing

the HES on the services only it can deliver. The 4 main work streams focus on providing good quality eye care services closer to residents with greater access at times that suit them. The overall goal is to achieve a 20% shift from HES to community care services. These include, Minor Eye Conditions Service – MECS, Paediatric Repeat Refractions – PRR, Glaucoma Referral Refinement – GRR and Post-op Cataract Assessment.

In the first 4 weeks of contract there were 218 contacts with local optometrists, with approximately 50MECS per week. This is projected to rise to 84 per week or 4,368 planned full shifts from HES into community care per year. The initial review shows that only 20% of MECS are referred to HES. 73% receive advice/treatment at optical centres and discharged. 7% of cases are referred to GP. There was no reported harm or adverse effects. The other work streams have fewer numbers of contacts in the community in the first month but projected to rise steadily in the coming months.

## CONCLUSION

Early indication shows that the launch of the BCT Ophthalmology re-design has been successful. More work is required to increase activities at the community eye care services and obtain feedback from service users.

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