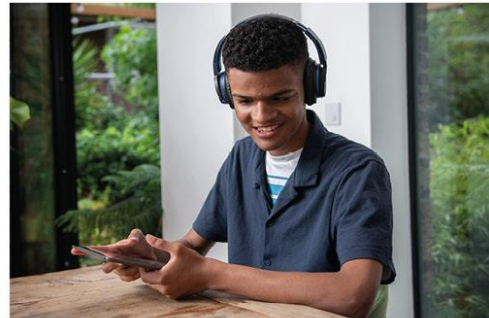


Eye care support pathway professional engagement series



Enhancing the Role of the Eye Care Liaison Officer within the Eye Care Support Pathway



21 November 2024
The Mezzanine at The Grimaldi Building



Enhancing the Role of the Eye Care Liaison Officer within the Eye Care Support Pathway (ECSP)

21st November 2024, The Mezzanine at the Grimaldi Building

Attendees

Corinna Swift	NHS ECLO – St Pauls Eye Unit, Liverpool Hospital
Diva Shah	RNIB ECLO – Western Eye Hospital, London
Eshita Unadkat	RNIB ECLO – Kingston Hospital, London & Hounslow
Community (two)	part-time roles)
Fran Morris	Kent Association for the Blind ECLO
Karen James	RNIB Service Manager
Melissa Shaw	RNIB ECLO – Queens Hospital, Burton-upon-Trent
Justine Jasper	Sight for Surrey ECLO
Renu Walia	RNIB ECLO – Royal Free Hospital
Mary Bortolussi	Moorfields ECLO
Russell Gwebu	RNIB ECLO – Central Middlesex Hospital
Ruth Rhydderch	Sight Life Wales ECLO
Roslyn Munro	RNIB ECLO (Scotland) – National Treatment Centre, Highlands
Terry Quinn	RNIB Locum ECLO
Stevie Johnson	RNIB Clinical Lead
Cathie Burke	RNIB Practice Lead, Eye Care Support
Helen Doyle	RNIB NHS Engagement Manager
Rob Cooper	RNIB Director of Strategic Engagement
Heather Carlin	RNIB Pathway Coordinator /Note taker.

Welcome and Introduction

- Rob welcomed all in attendance and explained that this round table was the fourth in a series of Engagement meetings linked to the Eye Care Support Pathway (ECSP) and how key stakeholders can assist in the delivery of the pathway. In addition, the meeting coincided with the 30th anniversary of the RNIB ECLO Service and a part of the day would be focused on celebrating this important milestone in the service's history.

The main objectives of the round table were:

- An explanation of the Eye Care Support Pathway to highlight the fundamental role of ECLOs in providing support across the pathway.
- To discuss the significant contributions of ECLOs in patient care.
- To reflect on the current reach of ECLOs in stage 1 and stage 2 of the pathway and how this may change.
- To discuss how we ensure that 100% of patients receive full support.
- To share examples of best practice among ECLOs.
- To discuss the NHS consultation and 10-year plan and the move to three key areas – more community-based provision, the shift from analogue to digital and prevention and how would this impact on ECLO provision.
- To reflect on the current challenges faced by the ECLO service.
- To discuss what the next 30 years may look like for the ECLO service.

Understanding the Eye Care Support Pathway

- Rob and Helen outlined the Eye Care Support Pathway, explaining the role of ECLOs in providing support.

Useful links:

- RNIB Eye Care support Pathway website: [The eye care support pathway - eye services | RNIB | RNIB](#) ** audio recordings available on this main web page**
- Link to the Pathway Report: [The Eye Care Support Pathway](#)
- Link to the NHS Endorsement letter for the Pathway: [NHS England » Support for the eye care support pathway](#)

The main highlights of the presentation were:

- A report was published in November 2023 aimed at eye care professionals and this was followed by the production of a patient-facing document.
- The integral role of the ECLO service is referenced in both documents.
- Both documents are endorsed by key sector partners and a range of professional bodies.
- The document is not eye condition specific which was agreed to ensure the broadest capture for the pathway.

- ECLOs are encouraged to share the patient-facing document with all patients.
- The cover page of the patient document will shortly be redesigned to make it more patient friendly.
- Approaches to the pathway in Scotland, Wales, and Northern Ireland.
- Overlay of the Pathway with specific eye conditions is currently being considered.

The highlights from the group discussion were:

- ECLOs can request and order copies of the pathway document from the NHS Engagement Team at RNIB.
- There is also an A5 postcard for the pathway with a QR code and these can be ordered via the NHS Engagement Team.
- That there may be a challenge of possible information overload, but this is a balance as some patients will appreciate the detail and this should be offered where appropriate.
- ECLOs noted that posters are useful for clinics and that if digital notice boards are available in clinic this is also a useful space to advertise the pathway.
- The NHSE endorsement letter for the pathway (linked above) can support ECLOs in promoting the pathway locally.
- ECLOs noted that it would be beneficial to add a QR code to patient appointment letters for the pathway. Rob and Helen explained the Patient Letter pilot with Moorfields, however, across the NHS this will be a challenge as not all areas are digital, and some systems are reliant on older operating models which do not allow for letters to be edited.

Key messages:

- **ECLOs are one of the key ambassadors for the patient-facing pathway booklet and are encouraged to share the document with all patients (where appropriate).**
- **The ECSP has been endorsed by the NHSE Clinical Director for Eyecare, Louisa Wickham, and this letter has been linked in these notes as a useful document to highlight the importance of the patient pathway to all clinical teams to ensure all patients have the information they require at diagnosis and beyond. As a result of the Letter some Health Boards in partnership with RNIB's Partnership development Managers (PDM) have started to form local ECSP**

implementation groups. ECLOs can contact their Local PDM for more information.

- **Key quote: “Information is empowering.”**

Impact of ECLOs in patient support:

The ECLOs discussed success stories and best practice:

- A waiting room presence when working without a designated room, high visibility to patients at all stages is extremely successful for referrals. This example may not apply in all scenarios across the ECLO Service.
- Aligning ECLO support to specific clinics where we know support may be needed – macular injection lists, new patient clinics, glaucoma, diabetic laser, etc.
- ECLOs should become embedded in the department – get to know all staff (advice on this is given to all ECLOs on the RNIB Eye Clinic Support Studies Course – Integration module).
- Importance of relationships with other eye clinic staff – not just consultants – e.g. Optoms, Orthoptists, Nurses, Medical secretaries, and Junior doctors (involvement in their induction).
- ECLOs could get added to booking out/appointment outcome slips or online forms to make the referrals to ECLOs seamless.
- Addition of an ECLO introductory paragraph to appointment letters.
- The ECLO provision could get written into the condition pathways/Standard Operating Procedures – e.g. for DNAs for Diabetic Laser. Also add an ECLO paragraph to the clinic outcome letter wherever possible.
- ECLOs could seek to link with staff outside of the eye clinic – OT, Stroke, diabetes team, Local Optometry Committees.
- ECLOs could present at clinical governance meetings to highlight the service.

The ECLOs discussed Stage 2/3 – what message/question could be used in clinics to ensure 100% of patients get an offer of support:

- ECLOs could request referral to their service for all patients where a CVI has been initiated.
- ECLOs could choose to send a summary of outcomes to the referring clinicians.
- ECLOs could send a Patient Summary Letter to clients.

Action: ECLOs could link up with their Low Vision Colleagues and Ophthalmic Nurses to discuss how to ensure principles of the ECLO are embedded across Eye Departments

The ECLOs discussed how best to promote their role:

- There are approximately 160 ECLOs in clinics and locum roles nationally.
- Staff host ECLO service awareness raising sessions in Team meetings.
- ECLOs accept a slot to present about the service at local teaching sessions.
- ECLOs present about the service to junior doctor inductions.
- ECLOs shadow in clinical environments and ask questions to learn about clinical practice.
- ECLOs aim to host at a central desk at clinic times.
- Ensure the ECLO service is referred to in the main appointment letter.

Key messages:

- **Building relationships is of high importance across all stages for ECLOs.**
- **There is a need for ECLOs to be embedded within the department they are working in and that this needs to be a continual process due to high turnover of staff.**
- **More networking opportunities for ECLOs would be welcomed.**

Current Challenges faced by ECLOs:

The group discussed current challenges faced by the NHS and ECLOs:

- The NHS Transformation plan and consultation will present challenges with the shift to focus on primary care and systems moving from analogue to digital.
- Funding is a constant challenge for ECLO posts.
- There is a need for a regulated, consistent Integrated Care Board /Health Board model.
- A postcode lottery exists for downstream services – some areas have less services to offer.

- Challenges exist in areas for paper notes, digital notes, both – multiple systems, confusion, and inconsistency of recording.
- Wales have full ECLO coverage, but the Ophthalmic waiting list is challenging and there are capacity issues for most clinics and ECLOs.
- Some ophthalmic systems such as MediSIGHT and OpenEyes are linked to main medical records whereas others are not so consistently recording sight loss information/preferred formats, etc. is patchy.
- IT access is hard to get, and NHS systems have poor accessibility.
- Hospital transport excludes a lot of people with sight loss due to the first standardised question being about whether someone is physically able to get in and out of a car.
- Educating Ophthalmic managers who may have no understanding about eye conditions and sight loss is important.
- There are issues regarding banding/career progression for ECLOs and how the role is perceived by NHS colleagues due to the banding level. The NHS system is hierarchical and in some areas banding is inconsistent.
- Access to dual sensory loss support and BSL when needed can be difficult.
- Low Vision provision is inconsistent and not mandated in England.
- Capacity and efficiency are key when using ECLO resource.
- In some areas, appointments are scheduled poorly, and patients valuable time is not respected enough when scheduling.
- The appointment letters are not patient friendly.

The group discussed some concerns in clinics for Glaucoma patients:

- Difficulties securing support for drop administration in the Community.
- Issues exist concerning patient knowledge compliance and adherence to drop regimes.

Key messages:

- **Funding is a major issue for the ECLO service alongside poor access to IT systems which limits the efficiency of ECLOs and wider clinics.**

- **The wider NHS Transformation and consultation could present specific challenges for the ECLO service around the move to primary care.**
- **Transportation has various issues particularly for rural communities and contributes to rising DNA rates in clinics.**

What does the next 30 years look like for ECLOs?

ECLOs discussed what the next 30 years of the service might look like, and the key discussion highlights were:

- The future may involve a mixture of in-clinic and remote based consultation methods for patients.
- Possible expansions into community opticians, private clinics, and other community hubs. This would ensure consistency of support when patients move out of the non-clinical environment.
- The possibility of ECLOs gaining professional qualifications and/or being banded properly with the NHS system. Although it should be noted that experiences vary widely across regions and services.
- Ensuring the ECLO service is referred to more in government guidance.
- Ophthalmology transformation - delivery of services in a unique way/differing locations.
- There will be a necessity for remote support alongside a face-to-face offer to reach all people needing support.
- Increased satellite clinics and Independent Eyecare providers – importance of building and maintaining relationships as services move.
- Primary Eye Care Model – it is not yet clear what it will look like, so it is hard to plan for this but need to be aware and plan as appropriate.
- Primary Care Links and being written into Primary Eye Care Systems for direct referral to support/ECLO support – there has been a challenge with Opera in Surrey.

Action: RNIB Engagement Team to discuss the issue with OPERA and the Surrey team.

- Alignment with Social Care and Sensory services – maintain close links to secure support.

- Eye Care Liaison Officer is a more appropriate name than Eye Clinic Liaison Officer as Ophthalmology provision changes.
- The importance of networking in and beyond the clinic.
- Together we have a bigger voice – the value of bringing RNIB and non-RNIB ECLOs together to network and plan was seen as valuable and something which should be continued.

Key messages:

- **The next 30 years will involve substantial change linked to the NHS Transformation programme and the service will need to adapt to align with new models of delivery.**
- **Key quote: “Embrace and align to new models of care.”**

Celebrating 30 years of ECLOs

- To commence this discussion a patient quote was shared which is in the pathway report:
“When I got to see an ECLO it was like a whole block of concrete came off me.”

Each ECLO then moved on to explain why they are proud of the work they do:

- “I love making a difference in the lives of my patients.”
- “It’s a privilege to hear patients’ stories at a vulnerable time in their journey and I often learn a lot from them.”
- “It’s a privilege and patients trust me.”
- “The early support we provide helps to prevent further deterioration in eye health or mental health.”
- “I love being there to support my patients.”
- “I enjoy being a strong advocate for my patients with clinicians to offer a strong case for support in my area.”
- “We should all be so proud of the new profession we all have created from the 30 years of the ECLO service so far”.

Closing remarks:

Rob closed the meeting commending everyone’s participation in discussions and thanked all for the extremely valuable contributions. The

meeting ended with a celebration marking the 30th anniversary of the ECLO service.

Document ends

Contact us

For further information about the eye care support pathway please contact us:



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Call the RNIB Help line:



0303 123 9999

rnib.org.uk

For a copy of the Eye Care Support Pathway Report, please scan here:



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