Introduction/purpose: Diabetic retinopathy is the second most frequent cause of registrable blindness in working age people in the UK having been overtaken by hereditary retinal disorders. This may be partly due to the introduction of nationwide diabetic retinopathy screening programmes in England and Wales. Early detection of the condition and its treatment is critical in reducing the risk of sight loss. Because of this, the Department of Health set an ambitious target of 100% screening for diabetic retinopathy of those diagnosed with diabetes by 2007. Notably, black and Asian populations have a greater risk of developing diabetic eye disease compared to white populations. Walsall has an ethnically mixed population (19.5% of the usual resident population are from ethnic minority groups). People of Indian, Pakistani and Bangladeshi background form the largest minority ethnic groups in Walsall. Of the 9 NICE recommended care processes for patients with diabetes, screening for diabetic retinopathy is one of them. The purpose of this initiative was to establish the effectiveness of the Digital Diabetic Retinopathy Screening Service (DDRSS) in Walsall.

Methods: An analysis of the data available on DDRSS from the National Diabetes Audit for Walsall Clinical Commissioning Group for 14 quarters from q3 2009-10 to q4 2013 was conducted. Additionally, the locations of accredited DDRSS providers in Walsall were plotted on a “heat map” of the resident population density, 60 years and over, to gauge coverage and accessibility (Fig 1).

Impact: According to the National Diabetes Audit 2011-12, there were 16,536 diabetics in Walsall. This would require that about 1650 patients per accredited DDRSS practice per annum would need to be screened for retinopathy. The DRRSS accredited practices in Walsall manage to screen on average 1150 patients per practice leaving invariably a significant shortfall every year. There was a 67.6% (q4 2012-13) performance level for digital diabetic retinopathy screening based on an examination of the National Diabetes Audit data for the diabetics registered in Walsall (Fig 2). Relative to other Primary Care Trusts (PCT), this performance places NHS Walsall of the National Diabetes Audit data for the diabetics registered in Walsall (Fig 2). This would require that about 1650 patients per accredited DDRSS service starting sometime in June 2014. As a result of this work, a number of recommendations have emerged including:

• The need to work with focus groups to better understand the barriers to the uptake of DDRSS in Walsall
• The importance of raising the DDRSS uptake level to 80+% of diabetics in Walsall quickly:
  • This may well require commissioners to include specific requirements in a capability contract with milestones to make this happen,
  • The need to embark on an effective social marketing programme to promote DRRSS in Walsall
• Consideration should also be given to introducing further locations for DRRSS at Streetly, Pheasey and Darlaston and review the merit of having two DRRSS service providers in Willenhall, versus the need to cover a greater catchment area of Walsall.

Conclusion: The current provision of DRRSS in Walsall is unsatisfactory and has been the case for a significant period of time. Digital diabetic retinopathy screening in Walsall is conducted within the NHS Diabetic Eye Screening Programme (NDESP) for DRRSS at 10 accredited sites which in 2012-13 supplied 11512 patients’ retinal photographs for grading. There are two sites next to each other in Willenhall, versus the need to cover a greater catchment area of Walsall.

Discussion: At the time of writing, the DRRSS service in Walsall was being retendered for; the bid is to be awarded in spring 2014 with a view to the new service starting sometime in June 2014. As a result of this work, a number of recommendations have emerged including:

Acknowledgement: Hughes, David - Public Health Intelligence Analyst, Public Health Walsall for Figure 1

References:
5. Walsall JSNA 2013

References Continued:
5. Walsall JSNA 2013

Fig. 1 Location of DRRSS providers in Walsall

Fig. 2 Source: National Diabetes Audit 2011-12

Fig. 3 NHS Atlas of Variation in Healthcare 2011

Walsall Council