

REFERRAL PROTOCOLS FOR THOSE WITH A SOUTH WARCKS GP

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Due to the different surrounding CCG's opinions, we have slightly different referral protocols across Coventry, Rugby, North & South Warwickshire at the moment. Please check where the patient's GP is based and refer as needed. This document is for those patients with a South Warwickshire GP.

All referral letters are sent to Community Health and EyeCare (CHEC) via the CHEC portal for all patients with a South Warks GP. This portal communicates with the GP so please follow the procedure below for all referrals and do not post letters to the GP! You can still refer patients who are under 18 years old via their GP however CHEC will also triage these patients too.

Write your referral letter as normal and then save a copy as a PDF or JPEG. Remember, you do **not** need to print and post a copy of your letter to the GP!

Open the CHEC portal in your internet browser.
<https://system.communityhealthservices.co.uk>

The log-ins & passwords are sent to each individual practice when you register with CHEC.

Please email bridget.m@chec.uk and Bridget will arrange for your log-in and password to be sent to you if you do not have them already.

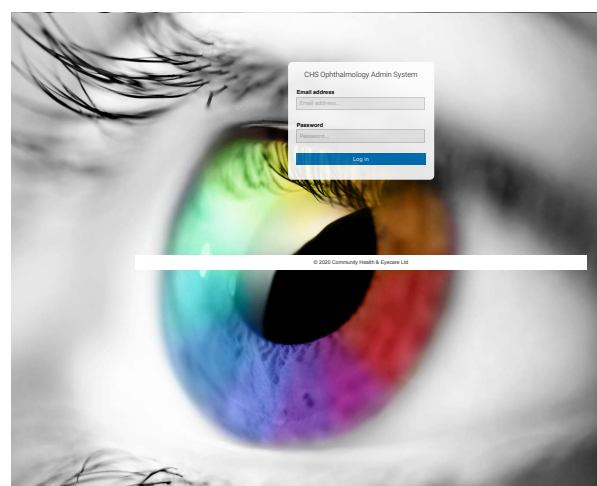
The above link takes you to the referral portal page as shown here.

Fill out all of the boxes needed (NB we probably will not have the NHS number) and upload the referral pdf that you saved earlier but don't forget to name the file on the portal. You can upload 5 files per referral if you wish to add OCT scans or photos etc.

Then click submit. Your referral will then be triaged and referred on as needed, the GP will also be informed at this stage. Should the patient wish to attend a certain provider, then please put this in the referral letter.

Please note, from 1st September, CHEC can also handle Wet ARMD referrals. Please select the correct 'Priority type' under 'Urgency' for your referral.

There are a few exceptions for certain patient referrals:



Exceptions:

The exceptions to this referral procedure are:

- **Emergency referrals** – Please see relevant briefing as this is changing at the time of writing.
- **Direct referral** for Diabetic Macula Oedema, Retinal Vein Occlusion and Wet ARMD can be emailed to Warwick/Stratford eye department (swft) on ophthalmologyurgentref@swft.nhs.uk should you wish to rather than using the CHEC portal.
- **Minor Eye Condition Scheme**

Patients can be seen by an appropriately qualified and accredited Optometrist on point of contact as of 27th January, 2020 for the following conditions:

Tier 2 : Optometrist/Minor eye conditions (High Street/GPwER)

- Systemic disease affecting the eye (comorbidities)
 - Foreign body and emergency contact lens removal
 - Blepharitis
 - Glaucoma referral refinement (IOP)
 - Monitoring of OHT/low risk glaucoma with normal visual fields (following diagnosis and stabilisation by Tier 4)
 - Retinal lesions
 - Amblyopia (Lazy eye)
 - Choroidal Naevus suspicion
 - Chalazion (more complex than tier 1)
 - New onset floaters and flashes
 - Triachisis
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- Low vision services (those currently treated in HES)
 - Epiphora (watery eye)
 - Abrasion
 - Posterior vitreous detachment
 - Episcleritis
 - Cysts
 - Inflammation
 - Pterygium
 - Meibomian gland dysfunction
 - Allergies
 - Cysts
 - New onset flashes and floaters –before 6 weeks (complex)

Please note, you may wish to ask for the patient's consent as these appointments use a different part of the CHEC portal rather than your own practice management system/records.

• **Extended Ophthalmic Service appts**

IOP refinement

If the IOP is found on non-contact tonometry to be over the NICE guideline threshold **without any other signs of glaucoma**, the patient should have Goldmann applanation tonometry performed on them by an accredited Optometrist and enter into the IOP refinement service offered under CHEC.

The NICE guideline threshold is age dependant, and at the time of writing, is as follows:

<80 years > 24mmHg

>80 years > 25mmHg

Glaucoma Referral Refinement Scheme

If other signs of glaucoma are present (ie suspicious discs, OCT, anterior angles or fields) then the patient should be referred into the Glaucoma Referral Refinement Scheme so that an accredited Optometrist can assess the patient. If there is not an accredited Optometrist in your practice, then your patient should be referred via the CHEC portal who will direct the patient to a local accredited provider.

- **Accreditation:**

Please contact Bridget (bridget.m@chec.uk) to arrange accreditation with CHEC to provide the Extended Ophthalmic Services and MECS as above.

Otherwise, you can refer on to a local accredited Optometrist by uploading your referral to the CHEC portal and the referral will be triaged and directed appropriately.