

FOI 553-18 – Price – Ophthalmology

	QUESTION	RESPONSE
<b>Intravitreal injections for eyes</b>		
1	Does your Ophthalmology department provide an intravitreal eye injection service?	Yes
2	During 2017/18 financial year what is your total numbers of injections administered?	19,009
3	If patient is indicated for treatment in both eyes do you deliver injections bilaterally at one appointment?	Yes
4	Does your Ophthalmology department provide a one stop service for follow up patient? (i.e. patient has diagnostics, clinician review and an injection if indicated at one appointment)	Yes
5	Does your Ophthalmology department provide a one stop service for a new appointment? (i.e. patient has diagnostics, clinician review and an injection if indicated at their first appointment- 1st loading dose)	Yes
6	Who injects the patients eyes and how many sessions do they deliver on a weekly basis (session is equivalent to 4 hours):  a. Consultant Ophthalmologists? b. Trust Grade or Specialty Doctors (non deanery trainees)? c. Junior (deanery) trainee doctors? d. Nurses? e. Opticians? f. Orthoptists? g. Other (please specify)?	A, b, c, d – yes  E, f, g - no
7	How does your pharmacy department provide the intravitreal injection drugs: a. Specific for each patient i.e. have a patient label attached?	

	<b>b. In batches, not labelled specific for patients?</b>	<i>Batches</i>
<b>8</b>	<b>Do you have an automated system that supplies the drug or is used to restrict access to the drug at the point of injection?</b>	<i>No technology is involved</i> <i>Fridges and storage areas are locked</i>
<b>9</b>	<b>If you do have automation who is your provider of the automation system?</b>	<i>n/a</i>
<b>10</b>	<b>During 2017-2018 financial year have you had any financial losses associated with the loss of these drugs through fridge failures? If so please quantify estimated cost.</b>	<i>No</i>
<b>11</b>	<b>During 2017-2018 financial year have you had any financial losses associated with the loss of these drugs through inability to internally reconcile? If so please quantify cost.</b>	<i>No</i>
<b>12</b>	<b>During 2017-2018 financial year have you had any financial losses associated with the loss of these drugs through inability to reconcile with commissioners? If so please quantify cost.</b>	<i>No</i>
<b>13</b>	<b>Do you use blueteq to get prior approval from the commissioners before administering the drug?</b>	<i>No</i>
<b>14</b>	<p><b>How are you paid for the injection activity?</b></p> <p><b>a. Do you have a locally agreed tariff with commissions that includes the cost of the drug? If so please specify separately the income for one attendance including market forces factor for new 1st injection appointment and follow up appointment.</b></p> <p><b>b. Do you have a locally agreed tariff with commissions that excludes the cost of the drug for follow up appointments?</b></p> <p><b>i. For diagnostic (usually Ocular Computerised Tomography) and clinician review? (Please specify income for one attendance incant? (Please specify income for one attendance including market forces factor)</b></p>	<p><i>Yes – locally agreed</i></p> <p><i>MFT does not have a per injection/attendance tariff</i></p> <p><i>Standard PbR applies – which is publicly available thus excluded from FOI scope</i></p>

	<p>ii. For diagnostic (usually Ocular Computerised Tomography), clinician review and injection delivered at the same appointment? (Please specify income for one attendance including market forces factor)</p> <p>iii. For diagnostic (usually Ocular Computerised Tomography), clinician review and injection delivered bilaterally at the same appointment activity?</p>	<p><i>MFT does not have a per injection/attendance tariff</i></p> <p><i>MFT does not have a per injection/attendance tariff</i></p>
15	How many patients do you have on your waiting list for "follow up" injections that are past their due date?	<i>Zero – we have recently installed a further two injections rooms to eradicate delayed follow-ups.</i>
<b>Virtual OCT</b>		
1	Does your Ophthalmology department provide a “virtual” Optical Coherence Tomography (OCT) clinic for patients. i.e. patient attends for dilation and OCT, with a review carried out by a medic who does not see the patient?	Yes
2	<p>If you do and the patient needs to be seen by a medic are they seen on the same day (one stop) or brought back on a subsequent appointment (different day)?</p> <p>a. If seen on the same day do you achieve the standard OCT tariff or an enhanced locally agreed tariff.</p> <p>b. If locally agreed tariff please can you provide the tariff for new ( 1st) appointments and follow appointments.</p>	<p><i>The virtual clinics are risk stratified, so it is highly unlikely a patient will require a face-to-face review and a rare occurrence. If this does occur a patient will either:</i></p> <p><i>Be directed to the emergency department or a doctor will be called to the imaging department. If not an emergency, the patient will simply be called back to the face-to-face clinic.</i></p> <p><i>In all instances, standard National Tariff rules apply which are public, thus outside the scope of FOI</i></p>
3	What patient pathways do you provide a Virtual OCT for? e.g. R1M1 diabetics, stable AMD (please list as many as are available)	<p><i>Neuro-ophthalmology</i></p> <p><i>Glaucoma</i></p> <p><i>Diabetes</i></p> <p><i>Wet AMD</i></p>