



Warwickshire North
Clinical Commissioning Group

Cataract Surgery

VERSION CONTROL

Version:	3.0
Ratified by:	Governing Body Meetings in Common
Date ratified:	20 May 2020
Name of originator/author:	Joint CCG Clinical Commissioning Policy Development Group
Name of responsible committees:	Clinical Quality and Governance Committees in Common
Date issued:	May 2020
Review date:	May 2023

VERSION HISTORY

Date	Version	Comment / Update
March 2016	2.0	Approved by Governing Body.
May 2020	3.0	Renew with no amendments, approved by Governing Body.

Commissioning Policy: Warwickshire North CCG (WNCCG)

Treatment	Cataract Surgery
Indication	Cataracts
Treatment:	<ul style="list-style-type: none"> • Cataract surgery will be commissioned for patients who, after correction (e.g. with glasses), have 6/12 or worse in their cataract affected eye • Referrals for cataract surgery should not be based simply on the presence of a cataract • Cataract surgery will not be commissioned solely for the purpose of correcting longstanding pre-existing myopia and hypermetropia • In certain situations cataract surgery will be commissioned for patients with a visual acuity better than 6/12, for example, where there are issues associated with significant problems with glare or significant multiple vision. • Cataract surgery will be supported where there is binocular disparity/imbalance (anisometropia) • Treatment will also be commissioned for the second eye where it is not 6/12 or worse but not treating would have a significant effect on the patient's vision • Cataract surgery will also be funded in situations where it is indicated for screening or management of other ocular co-morbidities e.g. for control of glaucoma, or for adequate view of diabetic retinopathy
Quality & Equality Impact	See QEIA attached

Quality and Equality Impact Assessment

Scheme Title:	Cataract Surgery Policy		
Project Lead:	Clive Campton, IFR Manager Kate Cogman, Contracts Manager	Senior Responsible Officer:	Dr Sarah Raistrick, Chair
		Quality Sign Off:	March 2020
Intended impact of scheme:	The Cataract Surgery policy supports the objective to prioritise resources and provide interventions with the greatest proven health gain, within CCG budgetary constraints. The intention is to ensure equity and fairness in respect of access to NHS funding for interventions and to ensure that interventions are provided within the context of the needs of the overall population and the evidence of clinical and cost effectiveness.		
How will it be achieved:	The Governing Body adopts the policy.		

Name of person completing assessment:	Clive Campton Kate Cogman
Position:	IFR Manager Contracts Manager
Date of Assessment:	November 2019

Quality Review by:	Mary Mansfield
Position:	Deputy Director of Nursing and Quality
Date of Review:	March 2020

Stage 1a: High level Quality and Equality Questions

The risk rating is only to be done for the potential negative outcomes. We are looking to assess the likelihood of the negative outcome occurring and the level of negative impact. We are also seeking detail of mitigation actions that may help reduce this likelihood and potential impact.

AREA OF ASSESSMENT		OUTCOME ASSESSMENT (Please tick one)			Evidence/Comments for answers	Risk rating (For negative outcomes)			Mitigating actions
		Positive	Negative	Neutral		Risk impact (I)	Risk likelihood (L)	Risk Score (IxL)	
Duty of Quality Could the scheme impact positively or negatively on any of the following:	Effectiveness – clinical outcome	✓			Policy based on NICE guidance				
	Patient experience			✓	Adopting the policy will not have an impact.				
	Patient safety			✓	Adopting the policy will not have an impact.				
	Parity of esteem			✓	Adopting the policy will not have an impact.				
	Safeguarding children or adults			✓	Adopting the policy will not have an impact.				
NHS Outcomes Framework Could the scheme impact positively or negatively on the delivery of the five domains:	Enhancing quality of life	✓			Policy based on NICE guidance, aimed at preventing ill health.				
	Ensuring people have a positive experience of care			✓	Adopting the policy will not have an impact.				
	Preventing people from dying prematurely			✓	Adopting the policy will not have an impact.				
	Helping people recover from episodes of ill health or following injury			✓	Adopting the policy will not have an impact.				
	Treating and caring for people in a safe environment and protecting them from avoidable harm			✓	Adopting the policy will not have an impact.				
Patient services Could the proposal	A modern model of integrated care, with key			✓	Adopting the policy will not have an impact.				

impact positively or negatively on any of the following:	focus on multiple long-term conditions and clinical risk factors								
	Access to the highest quality urgent and emergency care			✓	Adopting the policy will not have an impact.				
	Convenient access for everyone			✓	Adopting the policy will not have an impact.				
	Ensuring that citizens are fully included in all aspects of service design and change			✓	Adopting the policy will not have an impact.				
	Patient Choice			✓	Adopting the policy will not have an impact.				
	Patients are fully empowered in their own care			✓	Adopting the policy will not have an impact.				
	Wider primary care, provided at scale			✓	Adopting the policy will not have an impact.				
Access Could the proposal impact positively or negatively on any of the following:	Patient choice			✓	Adopting the policy will not have an impact.				
	Access			✓	Adopting the policy will not have an impact.				
	Integration			✓	Adopting the policy will not have an impact.				
Compliance with NHS Constitution	Quality of care and environment	✓			Policy based on NICE guidance, aiming to improve quality of care and services				
	Nationally approved treatment/drugs	✓			Policy adopts NICE guidance.				
	Respect, consent and confidentiality			✓	Adopting the policy will not have an impact.				
	Informed choice and involvement			✓	Adopting the policy will not have an impact.				
	Complain and redress			✓	Adopting the policy will not have an impact.				

*Risk score definitions are provided in the next section.

Risk rating score definition

Likelihood	Impact
1 – Rare	1 – Negligible
2 – Unlikely	2 – Minor
3 – Moderate	3 – Moderate
4 – Likely	4 – Major
5 – Almost certain	5 – Catastrophic

Consequence	Likelihood				
	Rare (1)	Unlikely (2)	Possible (3)	Likely (4)	Almost Certain (5)
Catastrophic (5)	5	10	15	20	25
Major (4)	4	8	12	16	20
Moderate (3)	3	6	9	12	15
Minor (2)	2	4	6	8	10
Negligible (1)	X-1	2	3	4	5

How will a successful implementation of quality indicators be measured?

Quality Outcome	Measured By
Positive Health Outcome	Triangulation of Incidents Complaint and Patient Experience trends

Stage 1b: Equality Questions

The Public Sector Equality Duty requires us to **eliminate** discrimination, **advance** equality of opportunity and **foster** good relations with protected groups. Consider how this policy / service will achieve these aims.

Other partners/stakeholders involved in scheme:

N/A

Who will be affected by this piece of work?

CCG registered patients

PROTECTED GROUP	Is there likely to be a differential impact? (Please tick one)			Evidence/Comments for answers. Where available please share any baseline data and research on the population that this piece of work will affect. Include any consultations with service users that have been carried out.
	YES	NO	UNKNOWN	
Gender		✓		Adopting the policy will not have an impact.
Race	✓			Cataracts are associated with diabetes, which is more prevalent in Asian and Black populations. Activity to be monitored to ensure treatments carried out and appropriate action to be taken if not.
Disability (including mental impairment, learning difficulty)	✓			Cataracts lead to visual impairment. Activity to be monitored to ensure treatments carried out and appropriate action to be taken if not.
Religion/belief		✓		Adopting the policy will not have an impact.
Sexual orientation		✓		Adopting the policy will not have an impact.
Age	✓			Cataracts are more common in older age groups. Monitor compliance with safe guarding policies. Ref: 1 & 2
Social deprivation		✓		Adopting the policy will not have an impact.
Carers		✓		Adopting the policy will not have an impact.
Human rights		✓		Adopting the policy will not have an impact.
Pregnancy and Maternity		✓		Adopting the policy will not have an impact.

References

1. <http://cks.nice.org.uk/cataracts#!backgroundsub:1>
2. <http://cks.nice.org.uk/cataracts#!backgroundsub:2>

Stage 1c: Post Implementation Review

Use the template below to record outcomes of reviews – if more than one is required cut and paste the box below:

Quality Impact	Has there been a differential impact? (Please tick one)			Evidence/Comments for answers	Mitigations
	YES	NO	UNKNOWN		