NHS Diabetic Eye Screening Programme News

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March 2015

NHS

The second joint national diabetic eye screening conference will be held at the Royal Society of Medicine (RSM), London, on Friday 24 April.

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The conference, hosted jointly by the NHS Diabetic Eye Screening Programme (NDESP) and the RSM's ophthalmology section, will be of interest to all those involved in diabetic eye screening, including local programme managers and clinical leads, screened graders, GPs, diabethologists, paediatricians, pathalmologists, public health professionals and commissioners.

The theme of the conference, which is aim of at everyone involved in diabetic eye screening, will be 'The Bigger Picture'.

Topics will include inequalities in screening, the national diabetes audit and national screening updates.

Speakers will include Dr Anne Mackie, Director of Programmes of the UK National Screening Committee.

For more details, to book your place or register your interest, please visit the RSM website or email ophthalmology@rsm.ac.uk.

Raising awareness: The Diabetic Eye Screening – Five Nations stand at the Diabetes UK Professional Conference

Nations united at DUK conference

NDESP's national team joined forces with the diabetic eye screening programmes in Scotland, Wales, Northern Ireland and the Republic of Ireland at the 2015 Diabetes UK Professional Conference.

Staff from each of the five national teams manned the Diabetic Eye Screening - Five Nations exhibition stand and engaged with delegates from across the UK and beyond.

The first day of the conference included a UK retinopathy: state of the nations session that featured updates from the four UK screening programmes, a summary of their collaborative projects and a question and answer session.

Transfer to helpdesk

All enquiries to the NDESP national programme team will be handled by the central national screening helpdesk team from 1 April 2015.

From that date you should direct your queries to:

E: phe.screening helpdesk@nhs.net

T: 020 3682 0890

The current YPA office phone number will remain in use but callers will be redirected to the helpdesk number after 1 April and the dr.screening@nhs.net email address will be closed down.

Advantages of using the cross-programme helpdesk include the ability to record and analyse queries to identify issues quickly. This will help ensure responses are timely and appropriate.

Website transition

The final stap of the transition of ND of the website co. ten 1 is almost complete.

Information or the public is already live on NHS Choices and information for health professionals is due to move to the government's GOV.UK website within the next two months.

NDESP's current website will remain operational until the transition is complete and pages will redirect to the new sites following transition.

Diabetic eye screening role model is retiring Thanks David

National quality assurance manager David Taylor retires this month after a 25-year career in diabetic retinopathy screening.

David was one of the early screening pioneers as a retinal screener in Exeter, one of 12 local centres involved in the 1990 study, led by Professor Roy Taylor, funded by the British Diabetic Association (now Diabetes UK), and using 35mm and polaroid film to screen people in mobile units.

The cameras were supposed to be mounted in specially converted vehicles but when the delivery of the Exeter vehicle was delayer David put the camera in the back of his estate car and drove between GP surgeries to sceen patients. He also learnt to grade to a high standard and the Exeter Screening Service quickly became very successful.

In 1996 David supported the development of the first networked some potographic screening programme in cloucestershire. And in 2003 he joined the fledgling national programme to support the quality signature of diabetic eye screening in Englin d.

NDESP national clinical director Plofessor Petero anion said: "David excelled in his role as a diabetic retinopativy science, providing a role model for future generations of screeners.

"He subsequently worked to improve the quality of the NHC Diabetic Eye Screening wogramme and hi in depth knowledge, scientific oppoach and personality have been invaluable in the last 10 years in taking the



ewid Taylor: 25 years in retinal screening

process of quality assurance forwards in the most pleasant, charming and supportive way.

"He has been instrumental in setting up the grading college to support the quality of grading in the English programme and has contributed or been first author on a number of research publications where his input has been invaluable.

"He will be missed by many people working in the field of diabetic retinopathy screening and we wish him well in his new life in retirement in the sunshine of the Mediterranean."

New screen positive leaflets launched

NDESP has launched two new national patient leaflets and an information sheet for GPs and other primary care professionals.

The two new leaflets are aimed at people who have positive screening results:

- Your guide to diabetic retinopathy for patients with R1 (background retinopathy) screening results
- Closer monitoring and treatment for diabetic retinopathy – for patients referred to digital surveillance or hospital eye services

The information sheet for health professionals explains how the screening programme works and summarises the role of GPs and other primary care professionals in supporting and advising patients.

NDESP provides the new leaflets, along with the existing **Your guide to diabetic eye screening** invitation leaflet, free of charge to all local programmes in quantities based on the size of their annual screening cohort.

From 1 April, programmes will place leaflet orders directly with national supplier, Harlow Printing, not via the NDESP website. We are contacting local programmes directly to explain how this new process will work.

The 2015/16 national service specification states that all local programmes must use the nationally developed leaflets, which were developed with extensive input from public and professional stakeholder groups.

Progress on new screener qualification

Public Health England is working with Health Education England, Skills for Health and other stakeholders to develop a new national qualification for screeners who work in NDESP, the NHS Abdominal Aortic Aneurysm Screening Programme or the NHS Newborn Hearing Screening Programme.

There will be a generic screener qualification plus separate pathways for the three distinct programmes and the qualification will be nationally recognised. We envisage it will replace NDESP's existing national training provision in 2016 but we will keep local programmes informed of progress.

Staff who have already undertaken City & Guilds qualifications will not have to retake them and they will remain valid following the introduction of the new framework.

All new staff should continue to register and undertake the current qualification until advised otherwise.

Learning from new pathway

More than 150 delegates touched down at Kingsholm, home of Gloucester Rugby Club, to share experiences from the implementation of the new common pathway for diabetic eye screening.

The event, hosted by NDESP, was attended by representatives of 66 of England's 83 local programmes, regional QA staff and software suppliers.

During the morning session, the software suppliers answered queries from local programmes relating to the pathway compliant software.

In the afternoon, S. Harcombe, exucation training and communications lead for the NHS Screening Phognamics, facilitateon workshop for local prognamics and QA. Delegates were divided into groups to share good practice discuss what had gone well during implementation, what could have gone better and what the future of diabetic eye screening should look like.

Feedback was positive with 71% of respondents rating the event good or very good.

National programme manager Lynne Lacey said: "The national implementation of the new common pathway has been a challenging and complex task and I would like to thank all national and local programme colleagues for their hard work and support over the past couple of years.

"It will take a little while for everyone to get used to the changes but the longterm benefits of the new pathway will be considerable. Shared learning: delegates at the pathway event held at Gloucester Rugby Club

"It will lead to better consistency and comparability between services, more reliable and accurate data and improved patient safety. The overall effect will be that we will drive up standards and improve outcomes for people with diabetes across the country."

Common pathway compliant software is up and running in all but one of the programmes in England – implementation in that programme having been delayed due to a procurement exercise.

Test and training

The restructuring of the Test and Training (TaT) system is almost complete.

The restructuring will give may mmes a reliable system for the nen-ormance mon-oring of staders.

A new suite of reports will be launched this year with full guidance for grading managers and clinical leads in how to use hem.

Programmes have already been advised that 200 tests are the minimum to ensure results are statistically valid. Programme managers should ensure that all graders working within local diabetic eye screening programmes are properly registered within the TaT system.

Many staff who no longer use the system remain registered on TaT and there are also a large number of 'trainee' graders who have completed many tests.

Programmes should therefore check that all graders are correctly classified by role and status within the test system.

During the first quarter of 2015/16 NDESP will ask programmes to submit a positive return, signed off at programme board level, to reconcile all staff allowed to grade images in the programme software with those registered on TaT. Regional QA teams can help with any questions.

UK National Screening Committee News

Response to parliamentary committee report published

Following the House of Commons Science and Technology Committee's Report on National Health Screening, the UK Health Departments and the UK National Screening Committee (UK NSC) have developed a response to the key recommendations.

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This response has now been published.

The independent review of the role, terms of reference and membership of the UK NSC is also due to be reported on shortly. These independent reviews will help inform future UK NSC developments with the aim of improving health screening in the UK.

We will share these publications when available.

Preterm labour test not recommended

The UK NSC has recommended against the introduction of screening for preterm labour (babies born prematurely).

Each year in the UK, over 7% of babies are born prematurely. Preterm babies are at risk of short and longterm health issues, the severity often linked to how early the baby is born.

The UK NSC raised a number of concerns over the evidence for screening to identify women at risincluding its timing, the measurement for identifying risk and the treatment.

Recommendations in consultation:

 Fragile X syndrome in pregnancy (closes 9 May)
 Due for consultation soon: Toxor asmosis in orran nev Neuroblastorn in cuil ren Oral cance in avuns

- Stomach can er in adults Ghunsha in adults Fan ilial sypercholesterolaemia in
 - Aucopolysaccharidosis (Hurler's yndrome) in newborns Congenital adrenal hyperplasia in newborns

- Psychiatric illness in pregnancy Hepatitis C in pregnancy Varicella (chicken pox) susceptibility
- in pregnancy
- Congenital Adrenal Hyperplasia in newborns
- Hearing loss in adults
- Prostate cancer in adults

Follow us on Twitter



The Twitter account, @PHE_Screening, is a great source of information on health

screening in England. Please note that our Twitter activity will be limited during the pre-election period.

oher news in brief

Data guidance published

New guidance for the submission of key performance indicator (KPI) and quality assurance standards data for the diabetic eye and abdominal aortic aneurysm screening programmes has been published and can be uploaded from the NAAASP or NDESP websites.

Outreach work on GOV.UK

The NHS Sickle Cell and Thalassaemia Screening (SCT) Programme has published a suite of resources based on 10 years of experience reaching out to black and minority ethnic communities. The key findings of this outreach work are available to download from the GOV.UK website.

New e-learning module

The NHS Newborn Blood Spot Screening Programme's new e-learning module is now live on the CPD website.

PHOF includes screening data

Screening indicators have been published in the Public Health Outcomes Framework (PHOF) for the first time. The PHOF interactive tool is at www.phoutcomes.info.

Updated timeline available

The antenatal and newborn screening timeline has been updated.

It offers a visual reference to optimum times for NHS antenatal and newborn screening tests to take place.

New online search function

The screening services near you function is now live on NHS Choices. You can use it to search for local abdominal aortic aneurysm, diabetic eye and newborn hearing services by postcode or town.