



## **Public Health Indicator Briefing**

### **Preventing avoidable sight loss: a public health priority**

#### **What does the public health outcomes framework mean for the vision sector?**

We spend £2 billion pounds of NHS money on eye care a year in England<sup>1</sup>, carry out 12 million sight tests<sup>2</sup>, screen nearly 2 million people for diabetic retinopathy<sup>3</sup> and get through more than 6 million appointments in hospital eye clinics<sup>4</sup>. But, for all that hard work, how well are we doing? Half of sight loss is estimated to be avoidable but 22,500 people were certified as sight impaired (partially sighted) or severely sight impaired (blind) in 2011 alone<sup>5</sup>.

Recognising the challenge and faced with an ageing population, the Government is making preventable sight loss a top public health priority alongside issues like dementia and obesity. This provides a new focus on eye health and provides opportunities to improve eye health services and outcomes at a national and local level. All the leading patient groups and professional bodies strongly support this first ever national eye health indicator and are pleased to have worked together with the Government to develop it.

#### **What is the indicator?**

The Government will measure the rate of preventable sight loss. It will do that by measuring the numbers of all people who are certified sight impaired (partially sighted) or severely sight impaired (blind) and the numbers of these who have lost their sight from one of the three major causes of preventable sight loss: glaucoma, age-related macular degeneration and diabetic retinopathy.

Tackling these three conditions is the primary public health challenge in eye care. They are the biggest causes of certifiable blindness in England but with the right care, at the right time, in the right place, people can be treated effectively and in many cases their sight saved.

### **Why is the indicator being measured in this way?**

There are many reasons to concentrate on the number of people certified as sight impaired (partially sighted) or severely sight impaired (blind) to measure how well we are doing at safeguarding eye health.

The primary objective in caring for people with glaucoma, age-related macular degeneration and diabetic retinopathy is to minimise their sight loss. While it is not practical at the moment to measure how much sight is saved across the country, the certification process gives us data we can use to measure how many people are losing their sight. All outcomes in the public health framework involve an element of compromise between getting the most accurate measure and the ease and cost of collecting it. The number of people being certified offers the best practical measure of tracking eye health outcomes at this time.

### **What is the difference between certification and registration?**

Certification happens when someone's vision has fallen below a certain threshold and their consultant ophthalmologist completes a Certificate of Vision Impairment form (CVI). This then enables the patient to be assessed by Social Services to find out if they need to receive additional support.

When a CVI is completed, one copy is sent to the Certifications Office at Moorfields Eye Hospital<sup>6</sup> for national monitoring purposes. Another copy of the CVI is sent to the patient's Social Services department which then contacts the patient to offer them a needs assessment and formally register the patient as severely sight impaired (blind) or sight impaired (partially sighted). This leads to two sources of data, certification figures which form the basis of the Public Health Indicator and registration figures which are collected on a triennial basis and are managed by the Information Centre for Health and Social Care.

### **Working to make the indicator a success**

The Government is working closely with experts in the field (including Anita Lightstone, UK Vision Strategy, Parul Desai, Health and Social

Care Information Centre and Catey Bunce, Moorfields Eye Hospital) to understand how to improve the process of certification and how best to collect and interpret the data. As part of this work, the Government is looking at how to encourage all eligible people to have certification, if they wish, so that services and support can be better planned, commissioned and delivered to meet their needs. Local interpretation of information is crucial as for example, an area with relatively few people certified as severely sight impaired (blind) could have a lower risk of eye disease, could be excellent at preventing sight loss or could be poor at helping people to certify. It is important to understand local results to take the right steps.

### **What can we do?**

By working together, there is a great deal we in the vision sector can do to use the new public health indicator to improve eye health of people across England including higher risk groups. We can:

- Encourage Health and Wellbeing Boards, Clinical Commissioning Groups, Directors of Public Health and the new Local Eye Health Networks to tackle preventable sight loss in their Joint Strategic needs assessments, Joint Health and Wellbeing Strategies and commissioning. A UK Vision Strategy JSNA template for Health and Wellbeing Boards and eye care commissioning guidance is available here: <http://www.commissioningforeyecare.org.uk/>
- Raise the issue of preventing sight loss with MPs and councillors so they can make sure their local Health and Wellbeing Board prioritises eye health
- Ensure preventing avoidable sight loss in line with the new eye health indicator is a key message in our media and campaigns work
- Raise awareness of the benefits of certification amongst both patients and eye health professionals involved in this process

### **Further information/references:**

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This briefing was jointly produced by members of the VISION 2020 UK Communications Group which includes the College of Optometrists, Local Optical Committee Support Unit, Optical Confederation, RNIB, Royal College of Ophthalmologists and VISION 2020 UK

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<sup>1</sup> [Department of Health England level expenditure data, available from  
http://www.dh.gov.uk/health/2012/08/programme-budgeting-data/](http://www.dh.gov.uk/health/2012/08/programme-budgeting-data/)

<sup>2</sup> [NHS Information Centre General Ophthalmic Services Activity Statistics - England Year Ending 31  
March 2012, available from http://www.ic.nhs.uk/statistics-and-data-collections/primary-care/eye-care](http://www.ic.nhs.uk/statistics-and-data-collections/primary-care/eye-care)

<sup>3</sup> [NHS Diabetic Eye Screening Programme, available from  
http://diabeticeye.screening.nhs.uk/statistics](http://diabeticeye.screening.nhs.uk/statistics)

<sup>4</sup> [NHS Information Centre, HESOnline, Main Speciality 2010-11, available from  
http://www.hesonline.nhs.uk/Ease/servlet/ContentServer?siteID=1937&categoryID=894](http://www.hesonline.nhs.uk/Ease/servlet/ContentServer?siteID=1937&categoryID=894)

<sup>5</sup> [NHS Information Centre Registered Blind and Partially Sighted People  
Year ending 31 March 2011 England, available from  
http://www.ic.nhs.uk/webfiles/publications/009\\_Social\\_Care/Regblind11/Registered\\_Blind\\_and\\_Partially\\_Sighted\\_People\\_England\\_31\\_March\\_2011.pdf](http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/Regblind11/Registered_Blind_and_Partially_Sighted_People_England_31_March_2011.pdf)

<sup>6</sup> The Certifications Office at Moorfields Eye Hospital operates under the auspices of the Royal College of Ophthalmologists and is currently supported by RNIB and the NIHR BRC for Ophthalmology