



Our ref: WQ88975 & 88976

Natasha Asghar MS
Senedd Regional Member for South Wales East
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20 September 2023

Dear Natasha

Thank you for your recent written questions asking me what steps I have taken to reduce ophthalmology waiting times at Aneurin Bevan University Health Board and what plans do I have to reduce ophthalmology waiting times, on both one-off procedures and chronic ongoing disease management. I am sorry for the delay in my response, and as indicated this letter will be published on the internet.

I remain committed to ensuring all NHS organisations reduce the ophthalmology waiting times for the people of Wales and in doing so reduce the risk of sight loss and irreversible harm. In my Ministerial Ophthalmology Summit in November 2022, I was very clear on my expectations that we cannot do more of the same and expect different results. Health board must look to work differently, making use of the technology available to them and working together across health board boundaries and regions. [The summit report can be found here](#). A follow up summit is being planned.

I was very clear of the actions I wanted to see following the summit. I commissioned a National Clinical Strategy for Ophthalmology to identify how the Pyott report recommendations will be made and sought detail on:

- demand, capacity, activity and backlog positions,
- workforce and training in Ophthalmology,
- Infrastructure and pathways to ensure services become most sustainable and
- Reduction of long waiting times.

[The Pyott report can be found here](#)

While we have seen progress being made in both reducing long waiters and delivering the eye care measures, both remain a challenge.

In Aneurin Bevan over two-year waits for ophthalmology have reduced from 360 in March 2022 to 139, a 61% improvement as of June 2023. Performance against the eye care measures was 50.8% of patients being seen within their due date in June 2023, this is an increase of 2.1% from their June 2022.

Specific investment to the value of £7m has been provided to support regional ophthalmology solutions across the Southeast region. Of this money £2.5m is specific to Aneurin Bevan and their local service development, however it has been agreed that part of the additional capacity in Cardiff and Vale will be used to provide cataract procedures each month for residents from the Aneurin Bevan population.

In relation to your other question about reducing waiting times for one off procedures and chronic management. I have been very clear that transformation has to happen now while plans for the future strategy are being developed.

With the longer-term strategy work focussing on the future model of eye care in Wales, the Ophthalmology Clinical Implementation Network (CIN) is focusing on the shorter to medium term improvements. This work will be supported by the results of the Getting it Right First-Time (GiRFT) reviews of Glaucoma and Cataract to ensure pathways are delivered based on clinical evidence, ensuring safe and efficient practice.

The results of the reviews will link to the optometry reform allowing for the maximum use of total resources freeing up clinical urgency slots for those with the greatest clinical need.

The announcement in September last year of the new optometry contracted terms of service, should start to impact on local services early 2024. The emphasis is on more treatment and care delivered in the community.

The overarching focus of optometry contract reform is centred on alleviating pressure on secondary care hospital eye services. We are increasing the range of services delivered closer to home in primary care optometric practices, where there is a skilled workforce with the capacity to meet the predicted substantial increase in demand. Moving the delivery of some eye care services from hospitals to primary care optometry, represents the most viable and sustainable solution.

Currently my officials are undertaking a deep dive into local plans and progress against them during September. Ophthalmology specific meetings have been escalated within health boards and will focus on addressing the backlogs across the waiting lists, ensuring they are maximising the use of the new ways of working including the optometry reform opportunities.

The key focus of the commissioned plan I requested from my summit is to use the information to set out what the long-term blueprint for eye care looks like, with regional solutions and the case for additional investment where required to ensure services are fit for purpose.

The four clinical leads for this strategy work have been appointed, representing each region in Wales, North Wales, South-East and Southwest. The strategy is aiming to provide the first report and recommendations back to Welsh Government by the end of January 2024, with follow up reports and further work through to March 2024.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'M. E. Morgan'.

Eluned Morgan AS/MS

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services