



The ROYAL COLLEGE of
OPHTHALMOLOGISTS

National Ophthalmology Database Audit

Key Findings Summary 2017-2018

The NOD audit quality assures NHS cataract surgical services for patients. Approximately 414,000 cataract operations were undertaken in England and 20,000 in Wales during 2017-2018. Cataract surgery is the most frequently performed surgical procedure in the UK.

NOD enables a cataract surgeon to compare their performance against their peers nationally. It is a vital safeguard of patient safety and a promoter of best practice, potentially eradicating unwarranted variation in the provision of cataract surgery and patient care. NOD enables informed decision-making and choice for patients.

This third prospective national annual report is a snapshot of the standards of surgical performance and care and continues to clearly indicate that high quality surgery is being delivered to NHS patients.

If you would like to see more in-depth results, please visit the [NOD Audit website](#).

Two primary indicators of surgical quality are audited

1. **Posterior capsular rupture (PCR)** a break in the posterior capsule of the lens, which can occur as a complication of cataract surgery. PCR is the most important, and only potentially modifiable predictor of visual harm from surgery.
2. **Visual Acuity (VA) Loss (visual harm from surgery)** for cataract surgery, the most important outcome is improved vision; this is what matters most to patients.

Key findings

38%

A 38% overall reduction in PCR complications since 2010

1.2%

In the 2017-18 reporting period only 1.2% of operations were affected by PCR

100%

Close to 100% data completeness for PCR outcomes, currently a compulsory field in Electronic Medical Records (EMRs)

37%

A 37% overall reduction in VA Loss since 2010

Observed VA loss was 0.7% for 2017-18, compared to 0.9% used for risk adjustment

Reduction in PCR complications since 2010 equates to

~3,400

fewer complications annually across the NHS

~£2m

Cost saving from avoided PCR complications, per annum

The audit reported on:

~70%

(83) of the 119 eligible NHS trusts in England and Wales are represented in the audit

Three independent providers of NHS cataract surgery have also supplied data for 18 individual sites



60 new EMR implementations achieved as the NOD continue to drive the NHS digital agenda toward electronic working



74,980 (42.6%) patients were men
100,813 (57.3%) patients were women

~217,875

eligible cataract operations were audited which equates to ~50% of operations performed in England and Wales during the audit period



Data collected from **1,992** surgeons



Patients had a median age of 76 years



37,584

patients underwent surgery on both eyes



Operations were performed on **176,019** patients

Recommendations

1. For Patients



1.1 Patients, carers and those with an interest in cataract surgery are encouraged to access information about the quality of cataract surgery and their local services, and can view information online on the [National Ophthalmology Database Audit website](#), the [HQIP website](#) and the [NHS Choices website](#)

1.2 Patients should discuss and understand the risks and potential outcomes of eye surgery with their surgeon

1.3 Patients interested in finding out more about cataract surgery, should access information online from their hospital trusts and health boards, as well as from charity organisations such as [Royal National Institute of Blind People](#) (RNIB)

2. For Providers of cataract surgery



2.1 All providers of NHS cataract surgery should submit data to the audit to publicly demonstrate their commitment to high quality care and good professional practice through participation. Reviewing information and actioning requests sent by the audit provider will allow for ongoing participation in the audit

2.2 Providers should submit complete data to ensure all relevant risk factors required to give credit for case complexity can be taken into account ([UK Minimum Cataract Dataset for National Audit](#))

2.3 In line with the NHS digital agenda, providers should use electronic data collection to improve data completeness and utilise EMR audit tools for continuous real time monitoring of results for early detection and correction of possible issues

2.4 Providers should review patient pathways to maximise the recording of both preoperative and postoperative VA data for every operation

2.5 Providers should use the audit for quality improvement by comparing their results against other surgery providers and their past performance to identify and act on specific areas that may need improvement

2.6 Providers should consider including Patient Reported Outcome Measures (PROMs) before and after surgery to quantify and validate patient benefit from surgery, as advised in the 2019 [NICE Quality standard for serious eye disorders \(QS180\)](#)

3. For Commissioners



3.1 Service specification contracts should require quality assurance and improvement based on national audit outcomes and the 2017 [NICE cataract surgery guideline \(NG77\)](#) for management of cataracts in adults

3.2 Commissioners should establish quality focused service specification contracts with providers which include submission of full data to the RCOphth NOD Audit, including pre- and postoperative VA for visual outcomes reporting

Recommendations

4. For the Regulators



4.1 Regulators should expect NHS services to participate in national audits, with audit results made available to them when inspecting NHS organisations which either commission or deliver cataract surgery services

4.2 Regulators should ensure that all providers of care are positioned to provide quality assurance regardless of whether they are traditional NHS centres or independent providers

Next Steps

- The commissioning arrangement of the NOD audit changed from 01 September 2019 following the cessation of audit funding received from HQIP
- The RCOphth will continue to deliver the NOD audit independently after 01 September 2019
- Part of this transition will require that healthcare providers 'opt in' and sign up to new data sharing agreements to enable the RCOphth NOD to continue to store their historic data, some of which precedes the HQIP contract, and dates from 2010 to 2018
- The RCOphth is actively engaging with NHS England, NHS Improvement, government decision-makers and through fundraising and campaigning (#makemydatacount) to ensure that long term funding is secured to run the national cataract audit after 01 September 2019
- The audit continues piloting the feasibility of collection of PROM (Patient Reported Outcome Measure) data to improve understanding of the impact of cataract surgery on patients

References:

The Royal College of Ophthalmologists #makemydatacount www.rcophth.ac.uk/2019/02/makemydatacount/

The Royal College of Ophthalmologists – Cataract National Data Set www.rcophth.ac.uk/standards-publications-research/audit-and-data/clinical-data-sets/cataract-national-data-set/

NICE guideline (NG77) Cataracts in adults: management www.nice.org.uk/guidance/ng77/resources

NICE Quality standard for serious eye disorders (QS180) www.nice.org.uk/guidance/qs180/chapter/Quality-statement-2-Referral-for-cataract-surgery

National Ophthalmology Database (NOD) Audit www.nodaudit.org.uk

Health Quality Improvement Partnership www.hqip.org.uk

NHS Choices www.nhs.uk/service-search/performance-indicators/organisations/hospital-specialties-cataract-surgery?ResultsViewId=1189

Royal National Institute of Blind People www.rnib.org.uk/eye-health/eye-conditions/cataracts

The full annual report is available on the NOD Audit website www.nodaudit.org.uk/resources/publications-annual-report