National Ophthalmology Database Steering Group Chair Application Pack

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Overview

The National Ophthalmology Database Audit (NOD) is internationally renowned as an exemplar of high quality audit that produces results in positive outcomes for patients and the profession. It is internationally renowned as an exemplar of high quality audit that produces results in positive outcomes for patients and the profession. Ophthalmology is the highest volume outpatient specialty delivering 8% of all NHS surgery. Since 2010, the National Ophthalmology Database (NOD) National Cataract Audit managed by The Royal College of Ophthalmologists has analysed the outcomes of cataract surgery, the most commonly performed operation in the NHS.

The NOD plans to expand its activity to cover a national audit of Age-related macular degeneration services in 2021 and is currently working to secure funding to develop the new audit.

The Chair will provide strong strategic leadership, effective governance and direction to ensure the NOD Steering Group fulfils its duties and responsibilities.

NOD is a clear example of a large-scale audit that delivers system transformation that improves the quality and safety of cataract surgery, reduces unwarranted variation and makes savings for the NHS by reducing risks and supporting continued professional learning.

• Since its launch in 2010, NOD has helped drive a 38% overall reduction in cataract surgery intraoperative complications (equates to ~3,400 fewer complications annually across the NHS)
• Represents an estimated financial saving of £2million for the NHS per year by avoiding complications and associated costs of postoperative visits and further treatment
• Identifies patients at high risk of complications, ensuring that they are operated on by appropriately experienced surgeons
• Enables surgeons to compare their performance against that of their peers nationally, promoting learning and best practice
• Allows poorly performing eye departments and individual surgeons to reflect on and modify their practice
• Drives the NHS digital agenda and use of ‘big data’ in the move toward electronic working
Job Description and Person Specification

Post: National Ophthalmology Audit Steering Group Chair

Responsible to: President

Date Agreed: 21/12/2020

Duration of Appointment 3 years not renewable

Background information

The Royal College of Ophthalmologists (RCOphth) champions excellence in the practice of ophthalmology and acts as the voice of the profession. We are the only professional membership body for medically qualified ophthalmologists and for those who are undergoing specialist training to become ophthalmologists, with over 4,000 members worldwide. Ophthalmologists are at the forefront of eye health services because of their extensive training and experience in the area.

The National Ophthalmology Database Audit (NOD) is internationally renowned as an exemplar of high quality audit that produces results in positive outcomes for patients and the profession. The NOD is a national audit of cataract surgery that prospectively collects, collates and analyses a standardised, nationally agreed dataset from all centres providing NHS cataract surgery in England, Northern Ireland & Wales.

It is a powerful quality improvement tool that enables benchmarking of standards of care, consistent with NICE guideline NG77 cataract surgery in adults: management, and allows detailed audit of clinical outcomes with clinicians having to undertake additional burdensome data entry. The NOD plans to expand its activity to cover a national audit of Age-related macular degeneration services in 2020/2021 subject to securing funding to develop the new audit.

The Chair will provide strong strategic leadership, effective governance and direction to ensure the NOD Steering Group fulfils its duties and responsibilities. The Steering Group reports to the RCOphth Executive and Trustee Board.

The Chair is expected to have board experience, a knowledge of policy and commercial enterprise, building successful relationships with high level stakeholders that will contribute to the success of NOD.

Leadership and Strategy Development

Enable and lead the Steering Group to support RCOphth’s Executive in delivery of the NOD strategic aims and objectives:

• Lead the Steering Group in setting the strategy and goals of the Steering Group in accordance with the aims of the NOD programme
• Support the engagement with primary stakeholder groups that decide commissioning and policy in healthcare, including trusts’ senior leadership
• Build relationships with industry supporters, patients and public bodies Government, ministers at a local and national level to facilitate fundraising and engagement with NOD

**Governance and Accountability**

Promote the highest standards of governance, propriety and conduct in all business dealings:

• Secure assurance on financial rigour of the NOD
• Oversight of risk, performance management and reporting to the Trustee Board
• Secure assurance on appropriate utilisation of RCOphth resources to support business priorities, strategic objectives and organisational performance
• Secure assurance that, as Chair, you and your Group are sufficiently informed to hold NOD teams to account for the implementation of decisions
• Work with key stakeholders to meet the requirements of the Gender Representation on Public Boards (Scotland) Act 2018 in relation to recruitment of Board members.

**Administration**

• Work with the RCOphth team to ensure new Group members receive appropriate induction and assessment of their performance on request e.g. if considered for re-appointment to the Steering Group or appointment to another public body
• Effective chairing of the Steering Group and facilitate discussion involving all members in discussion and decisions and encourage all members to express their views
• Ensure the RCOphth and NOD governance arrangements are adhered to
• Ask for Declarations of Interests from members at each meeting, identify any conflicts and handle these as they arise in line with RCOphth policy
• Ensure that the meetings are productive and achieve the aims set out in the agenda
• Assist in resolving concerns or disagreements between Steering Group members

**Key Working Relationships**

• President and Trustee Board
• Chief Executive
• Head of Professional Support
• NOD Project Manager
• Head of Communications and Engagement
• Stakeholder and Engagement Coordinator
• Department of Health and Social Care and equivalent in the devolved nations
• NHS England
• Organisations representing other eye care professions e.g. College of Optometrists, British and Irish Orthoptic Society (BIOS), Royal College of Nursing
• Care Quality Commission (CQC)
• National Institute for Health and Clinical Excellence (NICE)
• Medicines and Healthcare products Regulatory Agency (MHRA)
- Voluntary or charitable organisations with an interest in eye care
- Healthcare commissioners and Clinical Council for Eye Health Commissioning
- Health Quality Improvement Partnership (HQIP)

### Person Specification

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<th>Criteria</th>
<th>Details</th>
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<td><strong>Impactful Strategic Leadership</strong></td>
<td>A successful record of accomplishment leading eye units and driving change.</td>
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<td>Experience of ensuring and implementing effective governance arrangements at senior management or board level.</td>
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<td>Able to establish and articulate a strong strategic direction and persuasive vision for the future.</td>
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<td><strong>Effective Governance and Accountability</strong></td>
<td>Ability to manage risk and resources to drive continuous improvement.</td>
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<td>A successful track record in overseeing financial strategy, planning, scrutiny and accountability</td>
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<td>Experience of chairing committees</td>
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<td>Ability to communicate and engage effectively; to successfully influence a wide range of stakeholders, including building influential networks.</td>
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<td>Develop relationships with organisations that inspire common purpose.</td>
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<td>Commitment to a sustainable Steering Group that reflects the interest and values of the organisation; and has an appropriate diversity of skills to fulfil its responsibilities</td>
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<td>Acts with honesty and integrity</td>
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<td><strong>Other requirements</strong></td>
<td>Commitment to equality and diversity and understanding of how this applies to the work of the Steering Group</td>
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<td>Occasional requirement to work evenings or weekends or travel within the UK</td>
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<td><strong>Legal, regulatory and compliance responsibility</strong></td>
<td>Compliance with health and safety procedures, including prompt reporting of any defects, risks or potential hazards</td>
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<td>Compliance with the RCOphth’s data protection and privacy policies</td>
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**Introduction**

Ophthalmology is the highest volume outpatient specialty delivering 8% of all NHS surgery. Since 2010, the National Ophthalmology Database (NOD) National Cataract Audit managed by The Royal College of Ophthalmologists has analysed the outcomes of cataract surgery, the most commonly performed operation in the NHS.

NOD is a clear example of a large-scale audit that delivers system transformation that improves the quality and safety of cataract surgery, reduces unwarranted variation and makes savings for the NHS by reducing risks and supporting continued professional learning.

- Since its launch in 2010, NOD has helped drive a 38% overall reduction in intraoperative complications (equates to ~3,400 fewer complications annually across the NHS)
- Represents an estimated financial saving of £2million for the NHS per year by avoiding complications and associated costs of postoperative visits and further treatment
- Identifies patients at high risk of complications, ensuring that they are operated on by appropriately experienced surgeons
- Enables surgeons to compare their performance against that of their peers nationally, promoting learning and best practice
- Allows poorly performing eye departments and individual surgeons to reflect on and modify their practice
- Drives the NHS digital agenda and use of ‘big data’ in the move toward electronic working
- Demonstrates the benefits of simulation training in reducing surgical complications and resulting costs associated with training

The NOD data provides patients, carers with comprehensive information to make informed decisions about their cataract surgery – they can view information on location and surgeon and review the performance and quality of cataract surgery their local area or nationally.

The RCOphth NOD national cataract audit is an essential tool for monitoring the quality of work of cataract surgeons. Previously published feasibility studies have shown the RCOphth NOD can include other eye diseases such as age-related macular degeneration (AMD), retinal detachment and glaucoma.

Patient safety is one of the most significant concerns for the NHS and with the ever-increasing demand on services, focusing on the safety and quality of services is preeminent. The continuation of, and future expansion of the RCOphth NOD can aid ophthalmology services in providing the care they strive to offer their patients.
Purpose

- Provide extensive and reliable national data to inform and enable ophthalmologists, commissioners and regulators to improve the quality and safety of patient care and services.
- Provide reassurance to patients and the public that the hospital eye service is of a good standard and drives continuous quality improvement within the profession.
- Support the routine collection of data in a standardised format to inform patient care and ensure data collection requiring no additional data entry to participate.
- Work in partnership with stakeholders to support the development of safer cultures and systems with patient-centred collaborative working to ensure improvements in patient safety and the quality of care in ophthalmology.

Objectives 2020 - 2025

1. Extend to include other clinical topics such as AMD, Glaucoma, retinal surgery.
2. Extend coverage of the audit to include all 4 jurisdictions and secure funding for the expansion of NOD to cover new ophthalmology national clinical audits across the UK.
3. Expand the RCOphth NOD to cover new ophthalmology national clinical audits across the UK.
4. Develop strong and transparent relations with stakeholders ensure maximum impact on patient safety and quality improvement.
5. Translate NOD data into research that informs practice to improve patient outcomes.

Strategic objective 1: Secure funding for the expansion of NOD to cover new ophthalmology national clinical audit clinical topics across the UK

- Establish agreement on funding and support for the expansion of NOD for first AMD and then glaucoma services from stakeholders
- Liaise with stakeholders to form agreement on and funding to support the development of national clinical audit for AMD and glaucoma services building on the feasibility studies published in January 2017
- Develop the ability to link securely to other data sets to undertake additional analysis, e.g. NHS Digital

Strategic objective 2: Expand the range of centres contributing to, and improve the outputs from the national cataract audit

- Include providers of privately funded cataract surgery
- Include all four UK Nations in the NOD audit
- Incorporate the collection and analysis of patient reported outcome measures (PROMS) in the national cataract audit building on the feasibility report published in February 2020
- Improve the public reporting on outcomes to be more patient friendly
- Undertake additional analysis on cataract surgery and provide centres with options on the audit website to generate bespoke reports that can be of use with planning services, monitoring performance and assessing trainee surgeon progression
Strategic objective 3: Develop strong and effective relationships with contributors, funders and health decision makers

- Develop regular stakeholder communications to ensure stakeholders are kept up to date with audits
- Develop an annual programme of engagement and events to expand the audit’s profile
- Develop regular media and stakeholder briefings
- Measure impact on patient safety and quality improvement through the Operational Plan

Strategic aim 4: Use the NOD data to translate research into practice to improve patient outcomes

- Encourage the incorporation of the case complexity models of posterior capsule rupture and loss of visual acuity (measured through the Operational Plan) into real time use in EMR systems.
- Investigate the feasibility of a case complexity adjusted audit metric for post-cataract cystoid macular oedema
- Collaborate with stakeholders on agreed research projects to maximise the quality improvement potential of the NOD
Governance Structure

The Trustee Board is the RCOphth’s final decision-making body. It will take ultimate responsibility for the NOD and take an overview of the risks inherent in the project and the mitigation thereof.

The Executive is responsible for reviewing and agreeing the NOD strategic direction as recommended by the Steering Group, some high-level decisions and risks will be referred to the Trustee Board for final decision e.g. resource allocation requirements. Council members act as regional ambassadors and liaisons for the NOD and advising on risks to the NOD.

The NOD Steering Group provides leadership and strategic direction for the NOD. It oversees the work of the topic specific national audit management groups and is directly responsible to the Council.
The topic specific **national audit management groups** are responsible for advising the RCOphth in specialist or technical issues and are responsible for the management of the relevant national clinical audit e.g. cataract, AMD. They are formed as a ‘work group’ of the NOD Steering Group.

The NOD **Delivery Team** is the main channel for communications with RCOphth senior management, commissioners, stakeholders, subcontractors, purchasing, sales, marketing, legal, finance, procurement for the audit. It is responsible for operational delivery, led by the Head of Professional Support Department and includes NOD project managers, NOD staff seconded from and physically based in the Gloucestershire Hospitals NHS Foundation Trust (GHNHSFT) – the statistical analysis team, and RCOphth national clinical audit leads. Fortnightly meetings will ensure effective project initiation and a close monitoring of subcontractors and project milestones.

The **Professional Standards Committee** (PSC) advises the RCOphth on matters relating to improving and maintaining quality ophthalmic care for patients. The NOD national audits are markers of national standards of the quality of care. It is therefore key that the Professional Standards Committee and the Audit Management Groups liaise to ensure the NOD is responsive to changes in RCOphth recommended standards. The current outliers’ policy (which relates to any individual or provider performance giving rise to concern) needs to be updated and interpretation of the updated policy could reasonably fall to the PSC. Where such issues are identified the Chair of PSC would be required to submit a report to the Steering Group, Executive and Council.

The **Informatics and Audit Sub-committee** is responsible for the development and review of RCOphth clinical data sets. The data sets specify the minimum clinical information that should be collected on patients with ophthalmic conditions. The datasets ultimately serve as the template for national audits. The NOD is a key stakeholder for the Informatics and Audit Sub-committee, and it is vital the NOD Management Groups and the Sub-committee maintain internal communications within the RCOphth.

The NOD **delivery team** should facilitate internal communications between internal stakeholders.
A bit about The Royal College of Ophthalmologists...

Strategy

We launched our new Strategic Plan 2020-2022 in October 2019.

Our vision is ‘That everyone should have access to high quality eye care’. Our core aims are:

1. To carry out ‘Our Purpose’ as defined in our Charter
2. To define, provide guidance and support for the ‘Workforce’
3. To ‘Lead’ in maintaining high standards and speak out where care falls short
4. To ‘Evolve’ and continually assess our work in the most efficient and effective way

Priorities and campaigns

The RCOphth campaigns for change that meet our strategic aims, for and on behalf of members. Some of these priorities are:

1. AQPs/Independent Treatment Centres: impact on the HES, training, conflict of interest
2. Commissioning: influencing the commissioning of services in regions, using case studies to highlight best practice
3. Workforce: well-being, career attrition, capacity to meet demand, multidisciplinary teams
4. Hospital space and technology: developing community hubs, joined-up technology and IT infrastructure
5. Professional leave: influence trusts to release consultants for assessing, examining and training of the workforce
6. National Ophthalmology Data Audit (NOD): funding to sustain the NOD, raise awareness of the impact of audit on patient care, reduction in intraoperative complications by 38% and potential £2m savings for the NHS (briefing note attached)

We launched our Manifesto in 2019 in response to the election and set out some of the above campaign call to actions.

Most recently we have responded to the COVID-19 pandemic in the following ways

Set up a responsive COVID-19 group of College officers and staff. We have published guidance on our website. Working across other sub-specialty groups and in collaboration with partners, such as NHSE and the College of Optometrists. COVID-19 has accelerated ideas and new practice thinking, we have:

- Developed guidance to support resetting of services
- Developed interim guidance to support the recovery of services
- Will continue to work with partners to promote new learnings, new models of care pathways, the use of new technology, such as video consultations
National Outpatient Transformation Programme (NOTP)

In the last quarter of 2019, NHSE had recognised Ophthalmology as the first specialty to be piloted as part of the NOTP, working with the RCOphth as a partner.

- The aim is reduce outpatient appointments by 30%
- COVID-19 has accelerated innovation and NHSE has a strong desire to make the new ways of working across the primary and secondary care pathways sustainable
- NHSE have recruited clinical leads to this work. We are pushing for a restart of the programme as quickly as possible

We work across a number of partner organisations in health and government

- Chairs and committees identify areas of strategic importance and input into our services with highly-valued clinical expertise and knowledge
- Staff work in partnership with our chairs and committees to advice, recommend and facilitate the development of activity within resources and funding available to achieve agreed objectives and set policy
- We all work with counterparts in the health sector such as NHSE/I and nation health services, AoMRC, other medical royal colleges, GMC, HEE, academic institutions
- The Policy & Communications team works across those same organisations as well as government and parliament

Keeping in touch

We send Eyemail, our bi-weekly e-newsletter out to all members on a Thursday (check your spam folder)

We publish and post out College News quarterly and invite members to contribute to news about colleagues, successes and activities around the four nations

We will be launching a new website in 2021.