

## Issue for consideration of Priorities Panel

**For official use only:**

Issue ID Number: 024

Date received by Operational Director

: \_\_ 19 \_\_ / \_\_ 11 \_\_ / \_\_ 2009 \_\_

Date to Priorities Panel

\_\_ 26 \_\_ / \_\_ 11 \_\_ / \_\_ 2009 \_\_

**Office use:**

Name:

(JJ, RA, KT, All)

Date completed and initials:

Date of referral to LINK	01/11/09
Date issue arose	Unknown_
Title (Headline/short title of issue)	Insufficient quality of Retinal Screening Service
Nature of interest/standing of person in relation to issue:	
Recipient of service	Family      Friend      Advocate/Campaigner X
Other	
If other, please state what their standing is in relation to the issue:	
Is the person raising the issue a:	
LINK participant?	X
Member of the public?	
Priorities Panel Member?	
Governor Group Member	
LINK Development Worker	
Part of an organisation	
If raising issue on behalf of	Swale Patients' Group

<p>an organisation, state name and brief details of what they do</p>	
<p>Summarise issue (no more than 100 words). If necessary, a more detailed account may be submitted on page three with additional pages attached if necessary</p>	<p>Paula Carr Mobile Retinal Screening van has inadequate waiting facilities for people with appointments and has no disabled access.</p>
<p>Please use this space to give a detailed account of the issue to be raised with the Priorities Panel. (N.B: Form will expand to accommodate additional text – other documentation can be appended, as necessary)</p> <p>For people living in Swale the only local facility for people with diabetes to have regular screening of their eyes is a mobile van. The van only has provision for two patients to wait inside; others who arrive early have to sit on plastic chairs in a car park without any protection from the weather. Wheelchair users have no access to the service and have to travel to Maidstone Hospital, which deters some patients from attending due to the cost of travel and length of time for the journey which could take two hours or more if using public transport. Specialist Diabetics Nurses do not attend a clinic in Swale to see those who are unable to travel. No other area in Kent has this issue.</p>	
<p>Is the issue currently under investigation, via a complaint or inquiry or being dealt with by somebody else (this includes being part of a wider campaign on the issue)?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, give details of actions already taken including contact details of others dealing with the issue: The group met with James Ransom commissioner for the service on 09 November 09 but no guarantee was given to improve the facility.</p>	
<p>Is there a timescale/deadline/circumstance affecting this issue which may mean the LINK will have to act quickly, e.g. closure of a unit, change of service, a particular urgency?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, what is that circumstance and what is the timescale by which action has to be taken? N/A</p>	

What expectation does the person raising the issue have of the LINK, i.e. what does that person want the LINK to do/what action does it want it to take?

- Investigate why the specialist diabetic nurse doesn't visit Swale.
- Liaise with Paula Carr and PCT as to options to improve the service

What would be a good outcome from the perspective of the person raising the issue?

- Local facility for Swale people to attend clinic in reasonable travelling distance.
- Disabled friendly facility for those in wheel chairs to access the service
- Specialist diabetic services for Swale.

What evidence does the person raising the issue have to support the case they are putting for the LINK to take action? List or attach evidence and sources, if available.

- Word of mouth from patients
- Observations

How widely does this issue affect other people?

If people with diabetes don not get regular eye sight test in can increase the chances of blindness.

In what ways are other people affected by this issue.

Lack of vision  
Pressure on family and friends

Signed.....Cate Boland LDW .....

Date.....12/11/09.....

**Recommendation proforma  
ID 024**

<b>No</b>	<b>Recommended action</b>	<b>Please tick</b>	<b>If additional information required, please specify</b>	<b>Additional comments, if any</b>
1.	No further action			
2.	Watching brief			
3.	Letter to Trust/Social Care calling for comment before taking any further			
4.	Urgent action as issue concerns patient/client safety			
5.	Further information required, please specify			
6.	Consult/ survey participants to check level of interest/concern before proceeding to any other action			
7.	Start discussion on LINK web site/through LINK Bulletin			
8.	Question to Citizen Jury			
9.	Topic for local meeting			
10.	Urgent unscheduled visit –specify purpose of visit in comments column			
11	Refer to regulator, e.g. Care Quality Commission, Ofsted, Health and Safety Executive, Royal Colleges, etc –please specify			
12	Potential to develop as possible LINK project			
13	Any other recommended actions			