Indicator development programme

NICE indicator validity assessment

IND68: Repeat non-attendance for diabetic eye screening

The proportion of eligible people with diabetes who have not attended for diabetic eye screening in the previous 3 years.

Data currently collected by screening provider and CCG. This proposal assesses the potential as a NICE CCG level indicator.

Indicator type

Clinical commissioning group indicator

Importance

Considerations	Assessment
Priority identified by Public Health England. Diabetic eye screening is one of 11 NHS national population screening programmes available in England. This indicator identifies people with diabetes who do not regularly attend routine digital eye screening appointments. This will enable providers to identify and implement interventions to increase participation in this cohort.	The indicator reflects a specific priority area identified by Public Health England.
The NHS Long Term Plan identifies diabetes as a clinical priority for care quality and outcomes improvement.	The indicator reflects a specific priority area identified by NHS England.
Data is not published relating to repeat non-attenders.	Data is not available to determine whether the indicator addresses variation in practice.
A range of eye problems can affect people with diabetes. One of these conditions is diabetic retinopathy, caused by high blood sugar levels damaging the back of the eye (retina). Diabetic retinopathy can cause blindness if it is left undiagnosed and untreated, however if problems are caught early, treatment can help prevent or reduce vision loss.	The indicator will lead to a meaningful improvement in patient outcomes.

Evidence base

Considerations	Assessment
Repeat annual eye screening is supported by: [NICE's guideline on type 1 diabetes in adults](#) recommendation 1.15.1 [NICE's guideline on type 2 diabetes in adults](#) recommendation 1.7.17 [NICE's guideline on diabetes (type 1 and 2) in children and young people](#) recommendations 1.2.117 and 1.3.52	The indicator is derived from a high-quality evidence base. The indicator aligns with the evidence base.

Specification

Considerations	Assessment
Numerator: number of people in the denominator who have not attended for diabetic eye screening within the previous 3 years (PPR field 3.4.3). Denominator: number of people with diabetes on the diabetic eye screening pathway who have been on the register for at least 3 years [PPR field 3.1.7b]. Performance calculated by dividing numerator by denominator and multiplying by 100 to give a percentage. Rolling 12-month data.	The indicator has defined components necessary to construct the indicator, including numerator, denominator and exclusions.
Data is not published relating to repeat non-attenders. Data currently presented by PHE at national, regional and provider level on screening uptake. NICE CCG level indicators are intended for use where there is an average of 50 or more patients per CCG. [NHS Screening programme KPI reports](#) (Q4 2019/20) show 2,824,305 patients were offered screening in England, an average of 20,921 per CCG. QOF data 2019/20 shows 135 participating CCGs: 2,824,305/135 = 20,921.	The indicator outlines minimum numbers of patients needed to be confident in the assessment of variation.

Feasibility

Considerations	Assessment
Data is collected as part of the [NHS Diabetic Eye Screening programme](#).	The indicator is repeatable.
Details of [data to be submitted](#) are available from gov.uk.	The indicator is measuring what it is designed to measure. The indicator uses existing data fields.

Acceptability

Considerations	Assessment

Previous QOF DM011 was retired in 2014/15, however data is still collected as part of INLIQ: The percentage of patients with diabetes, on the register, who have a record of retinal screening in the preceding 12 months. Concerns were raised previously on the attribution of responsibility and the extent to which attendance is within the control of GPs.	The indicator assesses performance that is partially attributable to or within the control of the audience
A study of a diabetic eye screening service in London evaluated why some patients had failed to attend screening after numerous invitations over at least 18 months. Reasons for not attending included: • other competing priorities, including work and childcare commitments • anxiety about the screening procedure • not realising that diabetic eye screening is not part of a routine eye test with an optician • not knowing where the screening clinic was • attending the hospital eye service for other eye conditions and thinking that was enough diabetes eye care • not believing they had diabetes • not being engaged at all with their diabetes care • incorrect information on GP systems, such as not knowing about death, moving abroad, or being ineligible for screening However, there are examples of services finding ways to tackle these issues and reduce non-attendances for screening. Audit of non-responders/DNA is recommended in the Diabetic eye screening: audit schedule.	The indicator assesses performance that is acceptable to patients and is partially within the control of the audience
Data on diabetic eye screening is published at regional, national and screening provider level as part of NHS Screening programme KPI reports. Data is not published relating to repeat non-attenders, but this could be included to compare practice and assist in quality assurance procedures.	The results of the indicator can be used to improve practice

Risk

Considerations	Assessment
The NHS Diabetic Eye Screening programme operates under published standards and quality assurance frameworks.	The indicator has an acceptable risk of unintended consequences.