



The ROYAL COLLEGE of
OPHTHALMOLOGISTS

National Ophthalmology Database Audit

Year 3 Annual Report – The Second Prospective Report of the National Ophthalmology Database (NOD) Audit will be published on 12 July 2018

Outcomes of the cataract data collected in the second year of the prospective audit, 1 September 2016 – 31 August 2017 will be available in the public domain in July 2018. Results of individual consultant surgeons and centres will be made available on the NHS choices website and the NOD audit website.

To receive a copy of the NOD Audit annual report or for more information about the audit, please email noa.project@rcophth.ac.uk or visit www.nodaudit.org.uk

Good news

The NOD Audit has been extended by the Healthcare Quality Improvement Partnership (HQIP) for a further two years from September 2017 to August 2019. The audit will focus on a national cataract audit in England and Wales, as well as a feasibility study for the collection of cataract patient reported outcome measures (PROMs).

What's new?

- The overall rates (benchmarks) for Visual Acuity (VA) loss and Posterior Capsular Rupture (PCR) have been lowered from 1.5% and 2.0% to 0.9% and 1.1% respectively to better reflect the consultant rates in the current period.
- A 30% reduction in PCR complications in cataract surgery since 2010 equates to ~2,500 less complications annually.
- The change in Visual Acuity (VA) time window has been extended to 4 months before surgery for pre-op VA and 4 months after surgery for post-op VA.

Data collection updates

- Data collection is in progress for the third year of the prospective audit period which will run from 1 September 2017

to 31 August 2018. Surgeons and centres are encouraged to continue collecting accurate and complete data for each cataract operation undertaken.

- Contributing surgeons and centres should ensure that traumatic cases are recorded as such; this allows the audit analysis team to exclude these operations from case complexity results.
- The PCR definition will be reviewed and if time allows the case complexity risk models will be updated.
- An alternative metric for public domain outputs will be investigated to replace the % rates for PCR and VA loss. This metric will take into account sample size (number of cases reported) and will avoid the converging funnel plot lines which are unintuitive and potentially confusing when sample sizes vary.
- Free access to the Medisoft cataract Electronic Medical Record (EMR) will cease for all sites on 31 August 2019. Sites adopting the free Medisoft option are encouraged to identify their future electronic data capture needs for cataract service provision and monitoring, and ensure these will be met through locally sustainable arrangements moving forwards.
- Participating centers using an in-house database will be provided with information on how to calculate and submit the index of multiple deprivations for their patients.

A big thank you to all surgeons and centres who contributed data to the second year of the prospective audit. We hope you will continue to contribute data to this important project.



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NOD
NATIONAL OPHTHALMOLOGY DATABASE
AUDIT



HQIP

Healthcare Quality
Improvement Partnership

Key Findings Summary – NOD Audit Annual Report 2017



of the 125 eligible NHS trusts in England and Wales are included in this report



120,722

eligible operations performed in 56 participating centres have been analysed

First treated eye cataract surgery



71,970
(59.8%)

operations performed for first eye cataract surgery

76.1 years
median age at the time of first eye cataract surgery
(range; 18.1 – 114.9)

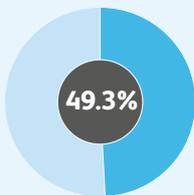
19,935 (27.7%)
patients were recorded as having diabetes mellitus at the time of their first cataract operation

935 (1.3%)
patients were recorded to be unable to lie flat

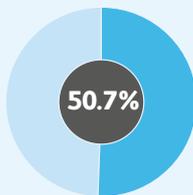
833 (1.2%)
patients were recorded to be unable to cooperate during the operation

Operations performed

59,471
on left eyes



61,251
on right eyes



This sample comprises approximately 30% of all NHS funded cataract surgery in England and Wales

1.5%

of operations were affected by Posterior Capsular Rupture, slightly below the current benchmark of 2.0%

0.81%

Visual Acuity loss rate was considerably lower than expected from previous reports and the current benchmark of 1.5%

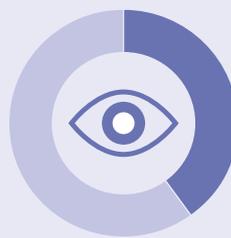


The operations were performed by
1,391
surgeons



NOD have been unable to audit the quality of cataract surgery in independent providers but this will be addressed in the next round of data collection

Second treated eye cataract surgery



48,458
(40.2%)

operations performed second eye cataract surgery

77.2 years
median age at the time of second eye cataract surgery.
(range; 18.3 – 103.7)

13,968 (28.8%)
patients were recorded as having diabetes mellitus at the time of their second treated eye surgery

494 (1.0%)
patients were recorded as being unable to lie flat

431 (0.9%)
patients were recorded as being unable to cooperate during the operation



147
patients had simultaneous bilateral cataract surgery

55,895 (57.1%)
patients were women;
41,830 (42.7%)
patients were men;
gender was not recorded for 183 (0.2%) patients

