Sir, Patient satisfaction with Peninsula Optometry Community Glaucoma Scheme

Glaucoma patients make up a large proportion of the ophthalmic department's outpatient workload of any Hospital Eye Service (HES). Our shared scheme, the Peninsula Optometry Community Glaucoma Scheme (POCGS), is run by optometrists in the community. Patients are initially assessed in the hospital by a consultant ophthalmologist. There are a large number of shared care glaucoma schemes throughout the United Kingdom. There has however been very little published data as to whether patients like being cared for in shared care schemes. The aim of this study was to evaluate patients' satisfaction with our optometry scheme.

Case report

One hundred and twenty patients were asked via an anonymous questionnaire (Figure 1) to answer nine questions in relation to patient satisfaction with the community service. Patients rated the areas of their care from very dissatisfied to very satisfied. Patients were also asked to compare their community optometry care with hospital-based care as all patients are initially seen in the HES.

Results

Eighty patients replied and overall 57.1% (47.5–66.25%) were 'very satisfied' with their care in the community. Patients that responded that they were 'satisfied' or 'very satisfied' were 90.4%. When asked to compare their care in the community with hospital care, 35 (43.8%) reported that it was 'better' in the community, 34 (42.5%) the 'same' and 3 (3.8%) 'not as good' (Figure 2).

As	pect of your care	Very dissatisfied	Dissatisfied	Neither satisfied or dissatisfied Satisfied	Very satisfied
1.	Convenience of travel to appointment				
2.	Obtaining appointment				
3.	Wait to see optometrist				
4.	Waiting area				
5.	Privacy arrangements				
6.	Thoroughness of examination				
7.	Amount of information provided				
8.	Amount of time spent with optometrist				
9.	Optometrist's general attitude				

Figure 1 Extract from patient satisfaction survey of community glaucoma care.

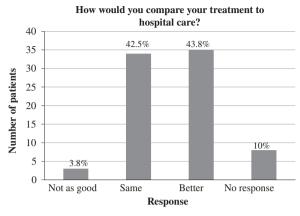


Figure 2 Patient comparison of Peninsula Optometry Community Glaucoma Scheme to the HES care.

Three patients reported that they were 'very dissatisfied' with six of the nine aspects of care due to lack of choice of optometrist and difficulties obtaining an appointment.

Comment

To our knowledge there has only been one other published patient satisfaction survey of community optometrist care of glaucoma patients. Our questions mirrored those used in the Bristol Shared Care study so that results could be compared.

Gray *et al* found 66.9% of patients receiving optometry care were 'very satisfied' compared with 57.1% of our patients. This patient group differed from ours slightly as their patients were randomised to either hospital or community care from the outset.

With growing demands for new patients to be assessed and treated it is likely that community optometry schemes are utilised more in the future. Patients receiving community optometry care in the POCGS are pleased with the service they receive.

Conflict of interest

The authors declare no conflict of interest.

Reference

1 Gray SF, Spencer IC, Spry PG, Brookes ST, Baker IA, Peters TJ et al. The Bristol shared care glaucoma study- validity of measurements and patient satisfaction. J Public Health Med 1997; 19(4): 431–436.

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