

# My Ophthalmic Nurse Education Journey

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I qualified as a Staff Nurse with a Bachelor of Nursing degree in 2005 from Glasgow Caledonian University and have been a member of the Royal College of Nursing since 2003.

I have worked in ophthalmology for 10 years out of a 15 year nursing career. I fell into the world of ophthalmology by chance and I haven't looked back since. Ophthalmic nursing is an exciting and diverse nursing speciality which is continually evolving and in recent years supported with formal specialist nurse education in Scotland.

I graduated from Glasgow Caledonian University in 2017 with a Graduate Certificate in Ophthalmic Nursing (with merit) after an 11 year break from academic study. I decided that I wanted to continue my studies to MSc level, ideally specialising in ophthalmology. The thought of any form of academic study, particularly towards an MSc can be daunting especially when already working full time and with a busy family life but I decided that it was the best option for my future nursing career. I had surprised myself with how much I enjoyed the graduate certificate so I thought I may as well continue my studies.

Having seen a poster at work advertising the MSc Primary Care Ophthalmology course offered through the University of Edinburgh, I initially thought this course was aimed at doctors and optometrists.

I applied anyway.....

I was accepted!!!

The MSc is delivered fully online which is ideal when working full time as a nurse whilst trying to keep normality at home looking after a young family.

Each semester in year one and two has four courses which run concurrently alongside assessed discussion boards. These courses correspond closely with the guidance in the Royal College of Nursing (2016) document, 'The nature, scope, and value of ophthalmic nursing'.

Graded assessment takes place via grades obtained on the assessed discussion boards, submission of reflective accounts, and a formal end of year examination.

Year 3 focuses on self-directed study towards a final project report submission.

Each course releases weekly content via an online platform which can be accessed on any mobile device or computer which makes it easier to study at a convenient time and place. I often found myself listening to lectures during my lunch break or whilst cooking the family dinner.

It is advised that the student allows 15 hours per week of study time and I found that it is very important to be organised and would write lists of targets to be achieved each week. At times it wasn't easy and I'll admit that I did struggle but support from my family kept me pushing on. Each student is assigned an academic tutor who is invaluable in providing academic assistance and support. The non-assessed discussion boards allowed students to discuss course issues with each other which also proved to be popular.

There was benefit in working within the specialist subject in which I was studying as there was a plethora of resources at my disposal and I found that my medical and optometry colleagues were always eager to answer my questions or explain things which I didn't understand.

The online resources included full access to ophthalmology text books and numerous literature databases. Again, all easily accessed on any computer or mobile device.

Year 3: the year of the project report

Year 3 is self-directed study where at the end the student is expected to submit a project report on a project of their choosing.

I decided to look at ways in which we can improve the glaucoma service in NHS Forth Valley by increasing glaucoma clinic capacity and reducing unnecessary review appointments. The project abstract is displayed on the next slide.

I chose this project topic because there is a continual rising patient demand for ophthalmic services therefore we must look at ways in which to provide safe and timely patient care today and in the future. Having previous experience of managing a glaucoma review project investigating the possibility of shared care services locally between primary and secondary glaucoma care, it seemed only natural to study glaucoma service improvement as part of my year 3 studies.

**Introduction:** With a continual rising demand on glaucoma services, we must look at ways in which to improve the glaucoma service offered in NHS Forth Valley by increasing clinical capacity and reducing unnecessary review appointments.

**Aims:** To assess if review intervals were appropriately requested as set out in the NICE glaucoma guidelines (2017) as a means to increase glaucoma clinic capacity and reduce unnecessary review appointments; audit the outcomes of glaucoma patients treated with SLT within the NHS Forth Valley ophthalmology department; and by looking at the current literature it is necessary to explore the implementation of a virtual glaucoma clinic in NHS Forth Valley thus allowing an increase in clinic capacity and a reduction in patient appointments.

**Methods:** Using quantitative methodology, data was collected to observe the impact of the updated NICE guidance in 2017 on recommended glaucoma review intervals in comparison to the NICE guidance in 2009. A separate data collection was performed to observe if SLT was effective in reducing IOP thereby converting unstable glaucoma patients into stable glaucoma patients. A literature review determined the potential advantages and disadvantages of virtual glaucoma clinics to identify if this would be a beneficial service option in NHS Forth Valley.

**Results:** It is shown that adherence to the updated NICE glaucoma review guidance has significantly improved to 73% in 2019 compared to 18% in 2017. Selective Laser Trabeculoplasty has shown to benefit eligible patients with a decrease in IOP of up to 6mmHg; however the long term benefits have yet to be observed. Virtual glaucoma clinics, despite limitations, have been shown to be beneficial in allowing the review of multiple glaucoma patients per session in comparison to a standard glaucoma clinic. Conclusion: The data collected and evidence researched shows that we can, in the long term, increase glaucoma clinic capacity by reducing unnecessary patient appointments thereby improving the glaucoma service offered by NHS Forth Valley.



My personal ophthalmic nursing career has developed over the course of this period of study and I am becoming a confident specialist nurse with experience in delivering intravitreal therapies, dry eye disease and keratoconus management, ongoing corneal collagen cross-linking surgical training, and more recently (pre-COVID) enquiring about nurse-led uveitis services being delivered at a local level.

Not only has my professional confidence increased but also my self confidence. I have relished in the challenges faced over the course of my MSc studies and also my ability to calmly overcome them.

I would strongly encourage my nursing colleagues to consider this MSc course should they wish to continue their education.

I am extremely pleased to report  
that I graduated with an MSc in  
Primary Care Ophthalmology  
(with Merit) in 2020!!