Primary Care Solutions

The role of community optometry

Katrina Venerus, Managing Director Local Optical Committee Support Unit (LOCSU)



What optical practices provide

Health professionals 10,800 optometrists, 5400 dispensing opticians

High street locations 6,000 practices in community settings

Nationwide coverage From city to town to countryside

7-day and extended Many open at weekends at with early and late appointments

Dedicated staff

Passionate about eye health and public health.

Keen to make every contact count.



What optical practices provide

NHS Sight Tests 12.8million

Domiciliary Sight 420,000 Tests

NHS Vouchers 4.7million

Private sight tests 5.8million

Referral to 1million ophthalmology



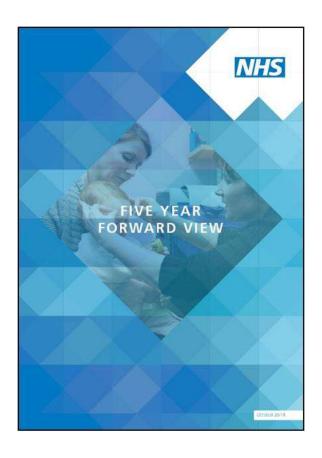
NHS needs to reform







Five Year Forward View



More community services



NHS needs to reform







Five Year Forward View



Vanguards and New Care Models



GPs under pressure







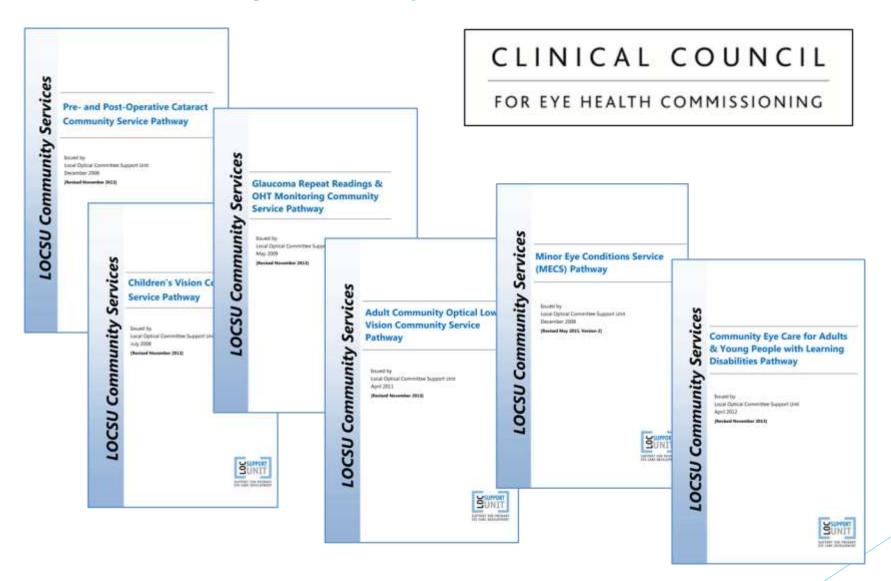


Pathways and accreditation

- Minor Eye Conditions Service
- Glaucoma Repeat Readings and OHT Monitoring
- Pre/Post-Operative Cataract Pathway
- Children's Vision (post screening)
- Low Vision
- Learning Disabilities
- Glaucoma Monitoring



Accredited pathways



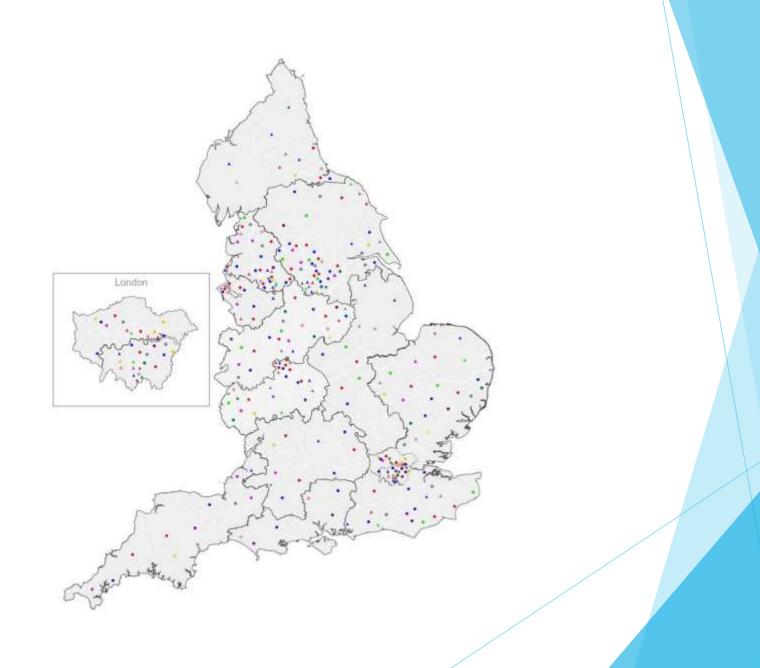


Commissioning Landscape





500+
services
across
England
...but





Piecemeal commissioning results in postcode lottery in primary eye care provision





Benefits of Minor Eye Conditions Service

Manage patients in practice

70-80% patients retained and treated in high street without onward referral

secondary care & A+E

Reduces pressure on 14% - 18% reduction in HES first appointments shown

Overwhelmingly popular with patients

Patient testimony over 90% positive. Convenient, easy to make an appointment, friendly, professional service.

Cost effective

Primary care fees less than ophthalmology outpatient tariff

Quality of care

Robust clinical framework governance and performance monitoring



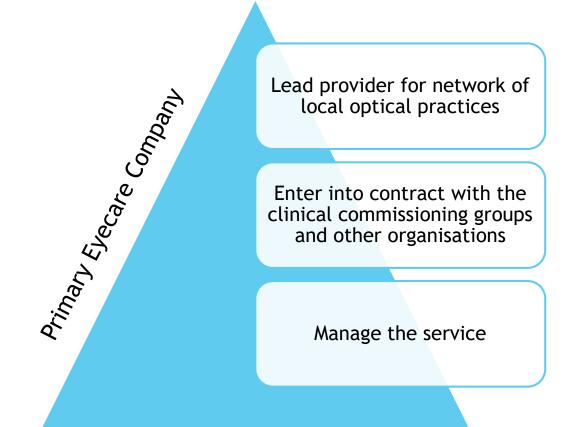
Current coverage

500+ eye services in place

150 in the last year

111 through the LOC Company model

Single Provider Contracting vehicle



Support for CCGs

Commissioners' Guide to Primary Eyecare Companies



The Single Provider Model for NHS Community Eye Health Services

Introduction

The purpose of this Guide is to explain the benefits to commissioners of the single provider model developed by the Local Optical Committee Support Unit (LOCSU).

It describes how commissioners can utilise their local *Primary Eyecare Company*² as the Prime Contractor to allow them to work with all optical practices in their area to give patients the best access to community services and choice of provider, without the complexity or cost of having to manage individual practitioner contracts.

The Guide also summarises how commissioning community eye health pathways can reduce pressure on existing NHS services and help prevent avoidable sight loss.

This is essential information for all commissioners who are involved in planning eye health or ophthalmology services.

Why should commissioners be interested in eye health services?

Eye health services currently have a low profile, yet involve a high volume of patient episodes. Commissioning effective and efficient services is an increasingly important way of reducing avoidable sight loss. Eye health problems and sight loss increase with age ² and with more than 10 million people in the UK currently aged over 65 – with that number predicted to nearly double in the next 30 years – growing numbers of people will be affected. Currently around two million people are living with sight loss in the UK, yet it is estimated that up to 50% of sight loss is preventable. There is a clear economic case for early and effective intervention to prevent vision impairment.²

This rising number of older people living with eye health problems, combined with the availability of new treatments for conditions such as wet AMD has increased demand for hospital eye services. In England, ophthalmology has the second highest number of outpatient attendances for any speciality in the NHS.²

Patients with eye health problems can also create extra pressures on already stretched Accident and Emergency

66

Clinical commissioning groups are able to commission eye care services over and above the sight test where they judge them to be needed in their areas. This could include post cataract surgery reviews, glaucoma monitoring and low vision services which may reduce pressure on hospital eye departments, reduce waiting times and make patient care pathways more accessible in the community. There is scope for further work to be done by community optometrists.

Alistair Burt, Parliamentary Question answer, April 2016



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