



**Sent via email:-
SophiePavlovic@aop.org.uk**

Primary Care Commissioning
NHS England
4E40, Quarry House
Quarry Hill
Leeds
LS2 7UE

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Tel: 0113 825 1943
Email: david.geddes@nhs.net

Dear Mr Shannon, Lord Low, Mr Coyle, Mr Quince, Baroness Hollins

RE: APPG ON EYE HEALTH AND VISUAL IMPAIRMENT

Thank you for your letter to Simon Stevens, copied to the Department of Health and Social Care and other Government Ministers.

You set out a strong case for joined up working across agencies to address the needs of vulnerable groups, for services to improve their access to sight tests and, if required, glasses or other visual aids. This is an area in which we, in NHS England, have a considerable interest, both in our direct commissioning of primary care and in our oversight of the wider English healthcare system. Our Transforming Care programme has been exploring the potential for increasing the availability of appropriate eye health checks for children in special schools with the aim to identify opportunities to improve visual acuity and to improve educational health and social outcomes. We also have a strong interest in improving health outcomes and reducing inequalities in access to healthcare for other vulnerable groups such as the homeless.

As you note, responsibility for commissioning services to identify sight problems and services to provide care for those suffering with ocular illness are split between NHS England which administers and manages the General Ophthalmic Services (GOS) sight test and voucher scheme under an “any qualified provider” model, and Clinical Commissioning Groups (CCGs) which commission specialist eye health services most commonly delivered in hospitals. As well as commissioning hospital eye service, CCGs are increasingly commissioning services which deliver additional local community based services such as those for treating Minor Eye Conditions and the

monitoring of cataract and glaucoma. These services, developed in partnership with Local Eye Health Networks, are helping to reduce the burden on secondary care.

The GOS scheme administered by NHS England is provided under the policy and Regulations set out by the Department of Health and Social Care and approved by Parliament. NHS England ensures the smooth running of GOS but does not have the power to adjust or amend the regulations that govern GOS. We also administer the supporting Regulations on the NHS Low Income Scheme which can assist with the cost of sight tests, glasses and contact lenses. Our management of the GOS system is set out in our Eye Health Policy book optical policy book (available at www.england.nhs.uk/commissioning/primary-care/optometry which we are currently in the process of updating.

Although our room for flexibility is limited in our direct commissioning role, we have been working closely with key partners including Seeability and VisionCare for Homeless People to try and find solutions for many of the issues and problems you identify in your letter including access to care in special schools and homeless hostels. We have recently introduced some additional dedicated capacity to work on optometry issues. The Optometry team recently met Seeability on 6th March to agree next steps in regards to building on their pathways of care for children and seek to demonstrate the delivered outcomes across all sectors for both children and adults

NHS England recognises our duty to reduce health inequalities and we remain committed to working in collaboration with the sector to explore the quantitative benefits for both children and adults with learning disabilities across health and social care. Recognising the dependency on the supporting regulations, we will explore these options further with the Department of Health and Social Care and use the work that SeeAbility has done to date to help set out some of the economic case for change.

Kind regards,



Dr David Geddes
Head of Primary Care Commissioning
GMC no. 3253722