Enhanced Service - Repeat Intra-ocular Pressure Measurements

As the principal providers of professional indemnity insurance to optometrists and optical practices, the Optical Confederation has issued the following advice to accompany the LOCSU pathway; glaucoma referral refinement pathway.

Recommended Practice
The best model of care is for repeat intra-ocular pressure tests to be carried out at the time of the sight test on a practitioner’s own patient and, where necessary, for the measurement to be repeated a few days later. This minimises risk whilst ensuring continuity of care for the patient, professional satisfaction for the practitioner and reassurance about practice systems for both practitioner and practice.

Accepting a referral from another practitioner with a request and funding to repeat the pressures, check the optic nerve and, where appropriate, check the visual fields and refer is also safe practice and benefits both the patient and the NHS.

Minimising System Risk
Similarly, accepting a request from another practitioner or a referral centre to measure the pressures and report back is also acceptable. This is because the practitioner/practice carrying out the repeat pressure tests is not put in the undesirable position of making a decision about whether or not to refer without having carried out a full sight test.

Nevertheless the movement of patient and reports can increase the risk of patients not attending or information going astray. Appropriate failsafe procedures should therefore be in place at the referral centre or 1st practitioner to ensure that results are received and appropriate action taken, and this should be stipulated in the local enhanced services contract.

(NB The 1st practitioner/practice should also note that the sight test will not be complete and a GOS1 should not be submitted until the result of the pressure measurement is received and a decision on the outcome of the sight test reached.)

To protect both patients and themselves, practitioners/practices should only participate in such an arrangement if they are satisfied that failsafe procedures are in place. A good model is one that puts on hold the final outcomes of the sight test until the results of the repeat test(s) have been considered, acted upon and the action noted.
Unsafe Practice
Accepting a referral from another practitioner with a request and funding solely to repeat pressures and make a decision on referral creates unnecessary risk. This is because the 2nd practitioner will not personally have observed the optic nerve and may have no certainty that the visual fields were checked, yet may be asked to make a decision not to refer purely on the basis of pressure measurement.

The Optical Confederation advises against the acceptance of such referrals. In the unlikely circumstance that a practitioner or practice is asked to provide such a service, they should contact their professional indemnity insurer for further advice.

Optical Confederation
February 2012