

Evaluating Outcomes of Advanced Clinical Practitioner (ACP)-Led Paediatric Ophthalmology Clinics: A One-Year Audit

Authors:

Bhumika Goel, Stephanie Mindham, Rachel Pilling

INTRODUCTION

The NHS has been facing unprecedented challenges in ophthalmology workforce capacity, particularly in Paediatric Ophthalmology. It is projected that up to 26% of consultant Ophthalmologists will retire within five years¹, lcontributing to staff shortages.

Paediatric Ophthalmology experiences a low uptake as a subspeciality for trainee Ophthalmologists in addition to consultants retiring, exacerbating the issue^{2,3}. In addition, there is a growing clinical demand for Paediatric Opthalmologists due to population and service changes, including increased screening of conditions and therapeutic monitoring.

These pressures have encouraged redesigning the workforce, to include ACPs as contributors to Ophthalmology service delivery. This is part of the NHS workforce plan⁴. Orthoptists, through specialist expertise in paediatric visual assessment and patient communication, are well positioned to expand into ACP-led roles.

This audit evaluated outcomes from the first year of an ACP-led paediatric ophthalmology clinic assessing safety, efficiency, and triage accuracy.

RESEARCH METHODOLOGY

A retrospective audit of patients attending ACP-led clinics between March 2024 and February 2025 was conducted using data from the electronic booking system.

The population was identified from the hospital electronic booking system, reviewing all ACP clinics during the data collection period.

Inclusion	Exclusion
New attendance	Post operative visits
Follow up attendance	Patients who did not attend appointment
Individuals under 16 years age	Individuals aged 16 years and over
	Missing data

Table 1 Inclusion, exclusion criteria

RESULTS

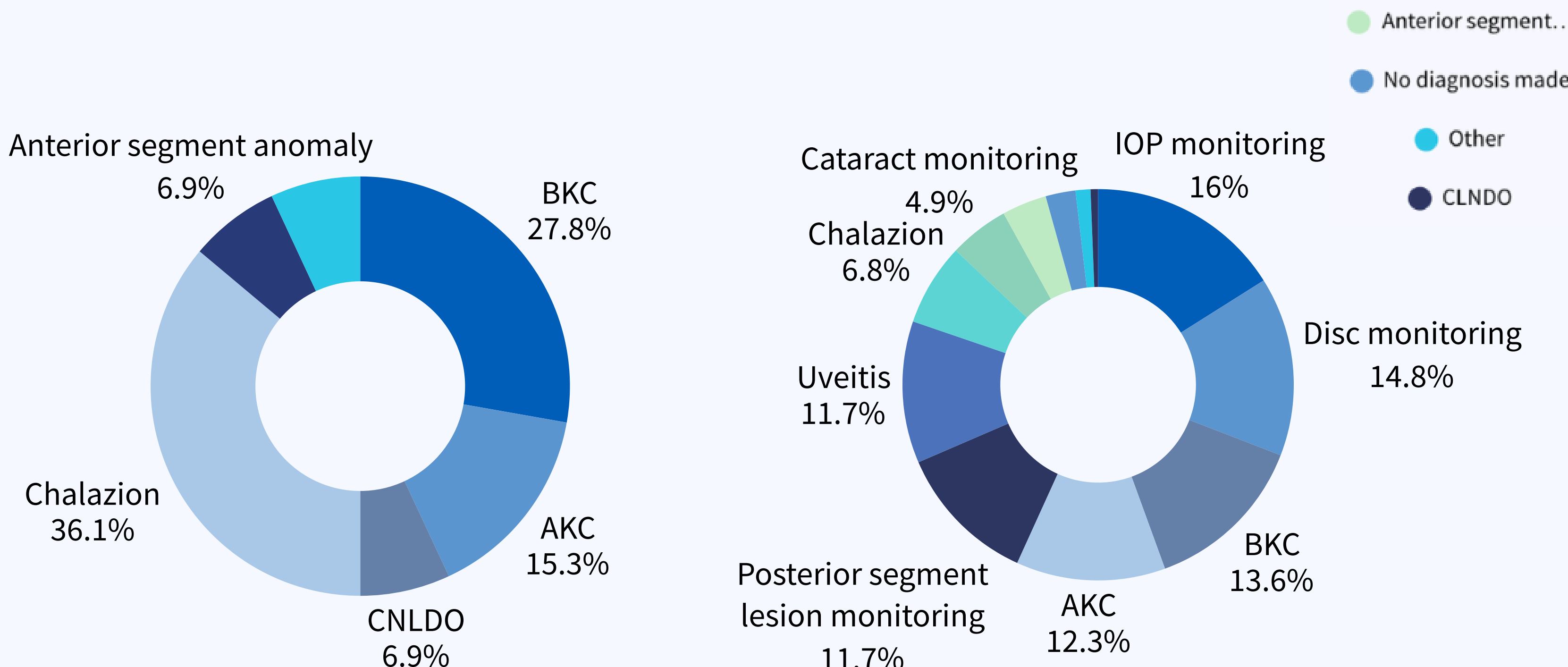
During the audit period, 279 eligible patients attended ACP-led clinics. Independent management rates exceeded target standards across both study periods.

37.6% of patients were discharged during this time period, the patient demographic is shown in figure 1, of these 54.4% without PIFU.

62.4% of patients remained for ACP follow up, mostly due to allergy patients and JIA. The demographic of patients for follow up are shown in figure 2, the majority for screening or monitoring purposes, such as intraocular pressure (IOP) checks and symptom review.

Criterion	Standard (Month 1-6; Month 7-12)	Findings Month 1-6	Findings Month 7-12
New patients are managed without the need for onward referral to a consultant	70%; 90%	84.60%	87.50%
Follow up patients are managed without the need for onward referral to a consultant	70%; 90%	90.20%	92.90%
Patients presenting with chalazion are discharged or offered PIFU	80%; 95%	79.20%	63.60%
Patients presenting for optic disc check are managed without the need for remote result review appointment.	70%; 90%	87.50%	90%
Patients are offered Patient Initiated Follow Up (PIFU)	5%; 5%	18.60%	13.40%

Table 2 Criteria, standards and findings for the two audit periods. Values in bold highlight criteria where the standard was met.



CONCLUSION

The introduction of ACP-led clinics in Paediatric Ophthalmology has been effective at Bradford Royal Infirmary.

ACPs can safely manage most new and follow-up patients without consultant involvement, with patients being triaged appropriately for these clinics. It helps support workforce shortages both sustainably and efficiently, whilst maintaining the high standards of care.

RECOMMENDATIONS



incorporate formally job-planned consultant supervision time



patient feedback on ACP-led clinics



integration of independent prescribing rights for orthoptists

REFERENCES

- The Royal College of Ophthalmologists. (2023a). RCOphth backs independent prescribing responsibilities for orthoptists - The Royal College of Ophthalmologists. [online]
- The Royal College of Ophthalmologists. (2023b). Work to identify capacity challenges and explore solutions in paediatric ophthalmology enters next stage- The Royal College of Ophthalmologists. [online]
- Adhan IK, Sussberg RM, Nelson LB, Lee KE, Lam L (2025). Analyzing Trends in the Pediatric Ophthalmology Workforce From 2016 to 2024. Journal of Pediatric Ophthalmology & Strabismus. 2025;62(5):321-325. doi:10.3928/01913913-20250619-0
- Hex, N., Mahon, J., Wright, D. (2021). Advancing Clinical Practice (ACP) within Medical and Surgical Specialities. Evaluation Framework and Guide (based on UHDB experience). NHS Health Education England.