From Hospital to Community: Service evaluation of multi-locality community optometry-based Post Vision Screening services for children in England

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Introduction

- All children aged 4-5 in England should receive vision screening as part of the NHS Healthy Child Programme.[1,2]
- The pathways for those children who do not meet the expected vision standard vary across England and include referral to hospital, referral to a commissioned community optometry service and informal signposting for further assessment.
- NHS-funded community Post Vision Screening (PVS) services are designed to provide accessible, high-quality care for children identified through school vision screening as not meeting expected visual standards.
- PVS services are delivered by accredited optometrists in community settings and aim to reduce unnecessary referrals to hospital eye services (HES), minimise travel for families, and improve patient outcomes.
- The outcomes of children entering three Post Vision Screening services provided by Primary Eyecare Services over a three year period were evaluated.

Primary Eyecare

Method

- The service evaluation involved a retrospective analysis of three years (1st April 2022 to 31st March 2025) of routinely collected service data from three PVS services provided by Primary Eyecare Services.
- The three services were selected (two in North East England and one in London) as providing the "full" service pathway; an initial screening appointment followed by 6-week and 18-week follow ups where clinically indicated.
- Children were referred into the PVS service following school vision screening if they did not meet visual standards or were unable to complete the test.
- Accredited optometrists based in community optometry practices undertook comprehensive clinical assessments, including cycloplegic refraction, cover testing, fundus examination, and prescribing of glasses where appropriate.
- Outcomes for children entering the service were evaluated across three time points; the initial community optometry appointment and at 6-week review and 18-week review, if these were required.
- Possible outcomes were discharge, continuing in the service, referral to hospital orthoptics or referral to hospital for consultant opinion (urgent or routine).
- The proportion of children prescribed glasses at their initial appointment is reported.

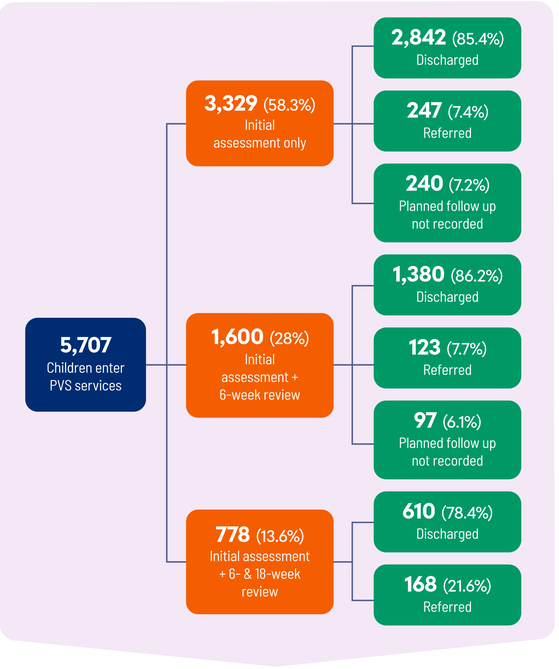
Results

- 5,707 children entered one of the three PVS services between 1st April 2022 and the 31st March 2025.
- 58.3% (3,329) attended one appointment (initial assessment), 28.0% (1,600) attended two appointments (initial assessment and 6-week review) and 13.6% (778) attended three appointments (initial assessment and 6-week and 18-week review).
- 84.7% (4,832) were discharged to routine follow up through General Optical Services sight testing, 49.8% (2,842) at initial appointment, 24.2% (1,380) at 6-week review and 10.7% (610) at 18-week review.
- 9.4% (538) were referred to hospital, 6.8% for routine orthoptic assessment, 2.1% referral for routine consultant opinion and 0.5% for urgent consultant opinion.
- For the remaining 5.9%, completion of the planned pathway was not recorded. 4.2% had an initial appointment but no planned 6-week follow up recorded and 1.7% had a 6-week follow up but no planned 18-week follow up recorded.
- At the initial assessment, 48.1% of children required a pair of glasses to be prescribed.

Conclusion

- Based on the observed outcomes across three PVS services, community optometry plays an important role in supporting hospital eye services for children identified through vision screening.
- Specialist assessment and management delivered in accessible community settings reduce unnecessary hospital appointments and support care closer to home, supporting the NHS 10 year plan shift of moving care from hospital to community. [3]
- Children who do not require further assessment are discharged promptly, while those requiring treatment, such as spectacle correction, receive timely management within the community service.
- Overall, this model illustrates how community eye care contributes to NHS priorities by supporting early intervention, optimising secondary care capacity, and improving the care journey for children requiring follow up after vision screening.

Outcomes for children entering Post Vision Screening (PVS) services



Overall Outcomes	4,832 (84.7%) Discharged	538 (9.4%) Referred	337 (5.9%) Planned follow up not recorded

References

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3. NHS England. 10 Year Health Plan for England: Fit for the Future. https://assets.publishing.service.gov.uk/media/6888a0b1a11f859994409147/fit-for-the-future-10-year-health-plan-for-england.pdf (2025).