Community services

pril this year saw a revolution in the way NHS eye care schemes are commissioned including an increased role in eye care services for GPs, but just how involved are opticians? To gauge the level of understanding and interest in community schemes among English eye care professionals the Local Optical Committee Support Unit (LOCSU) commissioned Optician to conduct a survey of opinions on the issue.

LOCSU has been pivotal in developing enhanced service pathways for conditions such as glaucoma and diabetes. Its accredited pathways give LOCs the tools to use in their negotiations with their local commissioning groups. The research, supported by an educational grant from Novartis Pharmaceuticals UK, was designed to measure the involvement of practices in schemes, determine how decisions to take part are made and establish awareness of the lead bodies involved.

In July of this year 450 respondents in England with an average of 10.5 years of experience completed the questionnaire. Independent practices made up 61 per cent of respondents, multiples 21 per cent, franchises 10 per cent and supermarkets 3 per cent of the sample. Of those taking part optometrists accounted for 68 per cent, dispensing opticians 24 per cent and contact lens opticians 8 per cent.

Positive attitudes

Attitudes towards community eye care services are generally positive with a little over one half of practices already involved in a scheme. The choice not to participate has been made by just 2 per cent of those quizzed. Around 10 per cent said they would participate in a scheme if one existed in their area, another 8 per cent is still waiting to make a decision and 14 per cent admitted to not knowing anything about the community services on offer.

Among those not currently participating in a scheme, half said they would like to get more involved but they were not the decision-maker in their practice. Just under a quarter said they saw no benefit in terms of income or footfall to set up a scheme.

The role of retail optics in primary eye care has been the subject of much discussion. So what effect did this spring's NHS reforms have and what is the future for community eye care services?





Attitudes towards community eye care services are generally positive The proportions not sure why their practice wasn't in a scheme or didn't understand community services both stood at 13 per cent, while the remainder offered other reasons for not taking part in enhanced services.

The decision-maker on the involvement in schemes was the practice owner in 68 per cent of cases, head office in 11 per cent and an optometrist other than the owner in 10 per cent of practices. Dispensing opticians not owning the practice or regional manager made the decision in 3 per cent of cases.

The benefits to the practice of participating in a community service was recognised by 43 per cent as improving the profile of eye care services and the profession, while a quarter saw it as an opportunity to use clinical skills and a fifth saw the benefits as customer retention and

MAIN POINTS OF THE SURVEY

- Around half of respondents are already involved through their practice in community services in their local area
- The main decision-maker on participation in community services is most likely to be either the practice owner or head office
- Around one in six of the respondents were members of their LOC
- In terms of the public health indicator for eye health, awareness was low with two in three respondents unfamiliar with the detail
- The majority (80%) of respondents were aware of the NHS reforms

increased business.

Other benefits suggested by respondents included a faster and better service for patients, a greater variety of work for eye care professionals and its role as a practice building exercise. Less positive comments included the expense of supplying services and being coerced into providing community services for fear of losing patients.

Overall favourable opinion towards community eye care was strong. When asked about eye care in their region 18 per cent were very positive, 36 per cent fairly and 29 per cent neither positive of negative. While 7 per cent didn't know anything about services just 9 per cent were fairly or very negative about them.

Barriers and threats

When asked about the barriers to the development of community eye care the threat of cheaper services being offered by competitors was cited by 36 per cent. Objections from ophthalmologists or other stakeholders was suggested by 34 per cent and lack of interest among commissioners by 31 per cent. A similar proportion saw lack of buy-in from the profession as a barrier while a quarter said lack of interest from practice managers. Lack of skills was suggested by just 16 per cent. Verbatim comments from respondents pointed to issues such as lack of knowledge among GPs or lack of communication.

Understanding of the changes which took place to the way the NHS commissions healthcare and scrapping of the primary care trusts was very strong. An overwhelming eight in 10 were aware of April's reforms to the way in which the NHS commissions community services and most respondents saw these changes as an opportunity. Awareness of the NHS reforms is greatest among practice owners and optometrists but optometrists and DOs saw the potential opportunities brought about by the changes. The pressure on budgets may

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AREDS2

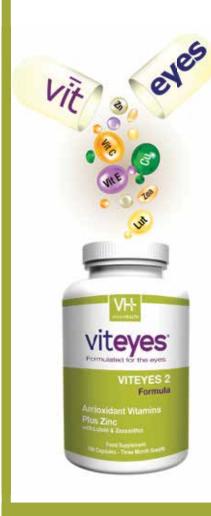
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Primary care

mean more commissioners considering community services said 45 per cent with optometrists holding this view most strongly. Optometrists also lead the 28 per cent who saw the NHS reforms as an opportunity to start fresh negotiations with commissioners. The financial benefits and retention were seen by 22 per cent with a greater number of DOs reporting this view. The same percentage didn't expect any benefits to flow.

Information resources

When asked where they find information about community eye services, half said they would use publications, such as *Optician*, while 39 per cent would look to LOCSU. LOCs were the information source for 35 per cent while 35 per cent would use optical industry websites.

To aid understanding respondents' involvement in their LOC was established and the research showed that of those taking part in the survey 17 per cent were committee members, 80 per cent were not committee members and 3 per cent didn't know what an LOC was. Among committee members most were practice owners, independents and optometrists.

The perception of LOCs showed that 41 per cent considered them inclusive and representative with this view being most prevalent among independents and optometrists. Verbatim comments showed some misunderstanding about the nature of LOCs. Comments suggested that LOCs were considered to be mainly for independent practitioners (34 per cent), a misapprehension more likely to be held by those working in multiples (47 per cent) than independents (27 per cent).

Around a fifth (19 per cent) said they thought LOCs were not for DOs, this was a view much more likely to be held by DO themselves (51 per cent) with just 8 per cent of optometrists suggesting LOCs were not for dispensing opticians.

Those taking part were also asked about their awareness of the public health indicator for eye health which will measure the rate of preventable sight loss for the three main causes of glaucoma AMD and diabetic retinopathy. A sizeable 38 per cent had never heard of it, 31 per cent had heard of it but didn't know what it was and 24 per cent were aware but had no plans to make teams aware. Just 7 per cent were aware of the PHI and were actively involved with their LOC making public health team aware.

A round table to discuss these findings and attitudes towards community services will be held by *Optician* on September 19.

Katrina Venerus, managing director of LOCSU, comments on the survey results

As the first practitioner survey on attitudes towards community eye health services since the NHS reforms, these results are significant for our professions as well as for the NHS and patients. Those who responded told us that they are not only positive about community eye care but also about the impact the NHS reforms will have on the development of local services in their region. Nearly half thought the NHS reforms would bring opportunities for local eye health. This demonstrates that the optical professions are optimistic and ready and willing to embrace some of the biggest changes for the NHS in the past 50 years.

Establishing an infrastructure to enable our professions to continue to deliver community services in the new NHS has been key to LOCSU's strategy in recent times. From setting up LOC single provider companies to developing the Optomanager IT platform as a managed service solution, our approach has been to look to the future and provide the tools required for the job. It is reassuring therefore to see evidence from the survey of the level of interest in community eye care from optical professionals across the country.

While there is great enthusiasm among clinicians, the importance of engaging practice managers and decision makers when rolling out local services is clearly demonstrated in the survey results. LOCSU's work to help reduce the administration and streamline processes involved in delivering services will benefit the whole practice team. In addition, more can be done to communicate the economic and wider benefits to the practice of participating in services through patient retention and recommendation.

Since LOCs are the main drivers in developing more community eye care pathways across England, the readers' views of LOCs are of particular interest. As expected, most respondents recognise LOCs as an inclusive representation of all types of optical practice and practitioner, LOCSU will make it a priority to tackle the misunderstandings felt by some that might deter them from getting involved with their LOC or from participating in local services. The most successful LOCs are without a doubt those that tap into the range of talents and skills held across our professions and it is important that we encourage the very best to get involved.

Finally, the survey shows that there is a lot for LOCSU, the Optical Confederation and the UK Vision Strategy to do to raise awareness and understanding of the Public Health Indicator for eye health. I look forward to the forthcoming roundtable debate on community eye health that will feature in *Optician*.

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