



# Benefits of Care Closer to Home Within the Children's Vision Service

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## At a glance

### Objectives

To evidence the benefit of the Children's Vision Service, beyond early intervention and management of reduced vision. Specifically, the benefit to families and environment by the reduction in journey distance, travel time and time out of school.

### Outcomes

The service has a lower carbon footprint than the traditional model and minimises missed educational time.

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## Introduction

Gloucestershire Children's Vision Service was established in January 2017. The service provides care closer to home, following the LOCSU pathway,<sup>1</sup> and is delivered with Primary Eyecare Services (PES). Gloucestershire has 40% of its population concentrated in or around Gloucester and Cheltenham. Paediatric ophthalmology services are provided within Hospital settings which are located centrally in both areas.

Optical practices offer appointment flexibility, with availability outside of school hours and at weekends, fitting around other family commitments. Following the pandemic's impact on children's learning, minimising missed education is imperative,<sup>2</sup> as research has shown that school absenteeism has a negative link to attainment.

The NHS has set itself a target of being NetZero for emissions directly controlled by 2040. Urgent and emergency care services believe that 8.5M km of travel could be saved by patients being seen in community rather than secondary care.<sup>4</sup> It is estimated that 9.5 billion road miles each year are from patients, visitors, staff and suppliers travelling to the NHS, with 1 in 20 cars on the road being linked to the NHS.<sup>5</sup> Air pollution is linked to killer conditions like heart disease, stroke and lung cancer, contributing to around 36,000 deaths annually.<sup>6</sup>

<sup>1</sup> [Diagnostic pathway: https://www.locsu.co.uk/wp-content/uploads/Files/Members\\_Area/Clinical\\_Pathways/Paediatrics/Diagnostic-Pathway-following-Child-Vision-Screening-diagram-v2.1-May20.pdf](https://www.locsu.co.uk/wp-content/uploads/Files/Members_Area/Clinical_Pathways/Paediatrics/Diagnostic-Pathway-following-Child-Vision-Screening-diagram-v2.1-May20.pdf)

<sup>2</sup> [Patient information leaflet: https://www.glosloc.co.uk/wp-content/uploads/2020/04/Childrens-Service-Patient-Information-Leaflet.pdf](https://www.glosloc.co.uk/wp-content/uploads/2020/04/Childrens-Service-Patient-Information-Leaflet.pdf)

<sup>3</sup> [Clinical protocol: https://www.glosloc.co.uk/wp-content/uploads/2020/04/Childrens-Service-Clinical-Protocol.pdf](https://www.glosloc.co.uk/wp-content/uploads/2020/04/Childrens-Service-Clinical-Protocol.pdf)

<sup>4</sup> [Ofsted: Children hardest hit by COVID-19 pandemic are regressing in basic skills and learning - GOV.UK \(www.gov.uk\)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/509679/The-link-between-absence-and-attainment-at-KS2-and-KS4-2013-to-2014-academic-year.pdf)

<sup>5</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/509679/The-link-between-absence-and-attainment-at-KS2-and-KS4-2013-to-2014-academic-year.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/509679/The-link-between-absence-and-attainment-at-KS2-and-KS4-2013-to-2014-academic-year.pdf)

<sup>6</sup> [delivering-a-net-zero-national-health-service.pdf \(england.nhs.uk\)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/509679/The-link-between-absence-and-attainment-at-KS2-and-KS4-2013-to-2014-academic-year.pdf)

<sup>7</sup> [NHS Long Term Plan » Air pollution](#)

<sup>8</sup> [Health matters: air pollution – GOV.UK \(www.gov.uk\)](https://www.gov.uk)



While some practices in Gloucestershire offering the Children's Vision Service are located in the two main urban areas, overall coverage is well distributed across the most populated areas of the county. At present there are 22 practices delivering this service, however the post-pandemic return to normality has seen several practices express interest in participating. The number of practices had reduced from pre-pandemic figure due to mergers, practices closing and staff turnover over the last two years. Increased practice participation will provide even greater accessibility, which is especially important for families with multiple children or those who may find travel difficult due to disability or reduced means.

### Distribution of Optical Practices Offering the Children's Vision Service in Gloucestershire



### Care Closer to Home

A key feature of this pathway is improving access and reducing the number of appointments by streamlining care. Delivery in primary care allows sight test and dispensing to be completed at the same visit as the enhanced service appointment. Delivery in primary care also offers easier access to follow up care and spectacle repairs. Dispensing spectacles at the first visit minimises travel, reducing the environmental impact and associated costs. For those children who need to be seen within the hospital many choose to take their prescription to their local practice to dispense to allow easier access for collection and follow-up adjustments or repairs. This patient choice is advocated by the department of health.<sup>7</sup>

<sup>7</sup> OPTICAL CHARGES FOR HOSPITAL EYE SERVICE (HES) PATIENTS ([bipsolutions.com](http://bipsolutions.com))



Offering a sight test and dispensing in one location of the patient's choosing, saves at least one unnecessary journey. As these occur within a short time period, longer travelling distances pose risks to missed schooling and difficulty in access due to family and work commitments. This service allows patients living rurally, to have an equitable service delivered locally within their community, served by parking facilities and good transport links.

The Gloucestershire Children's Vision Service accepts referrals following in-school vision screening.<sup>8</sup> Usually, reception aged children are screened after the Autumn half term. In 2020, this was delayed until Spring 2021 and so data below includes two-year groups. Data from Primary Eyecare Services (PES), for the period Spring 2021-2022, shows that 736\* children were assessed in the optometry service following a failed school screening with over 56% of children being discharged at the first visit. 38.7% of children retained in the service were given a 6-week review with 235 children discharged at this visit. Only 2% of children required a further visit at 18 weeks and only 4.6% overall required a referral to secondary care, with only one child requiring an urgent referral.

Studies show that care closer to home improves patient's satisfaction with healthcare services, as well as improving their attitudes to and knowledge of their conditions and treatments. This is achieved through better access for patients, in terms of the travel distance needed to see a specialist, as well as reduced waiting times.<sup>9</sup>

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## Patient Journey – Time and Distance

Across Gloucestershire, the average travel time each way to hospital services is in line with national figures, approximately 38 minutes without traffic, excluding parking.<sup>10</sup> Journey time increases to an hour if using public transport. The average distance is 11 miles, for the county as a whole, however, for rural locations this increases to approximately 21 miles.

Examples of patient journeys living in a rural area.<sup>11</sup>

Patient A, lives in a rural Cotswolds location GL56, accessing their local practice gives an estimated travel time of 7 mins by car, for a three-mile journey from home. Attending from school, reduces to 3 minutes walking. The nearest hospital is 23 miles and an estimated travel time by car of 40 minutes each way.

Patient B, lives in the rural Forest of Dean, GL14. The access from home to his local practice is 0.3 miles, approximately 1 minute driving and 8 minutes walking from school. The nearest HES service is 15 miles and an estimated travel time by car of 30 minutes each way.

\* This is a higher number than usual due to the delayed screening of the 2020 Reception class

<sup>8</sup> [Child vision screening – gov.uk](https://www.gov.uk)

<sup>9</sup> [Moving healthcare closer to home – gov.uk](https://www.gov.uk)

<sup>10</sup> [jts0102.ods \(live.com\)](https://jts0102.ods.live.com)

<sup>11</sup> (Based on a minimum of 3 appointments, with no traffic or road works. Anonymised patient data and care episodes provided by Primary Eyecare Services)



Patient A attending HES by car, would cost approximately £40 for fuel and parking fees.<sup>12</sup> Attending the local practice has zero costs, as the journey is walkable with no carbon footprint.

Patient B, assuming a HES trip for first appointment, a trip for dispensing at local practice and collection and a 6 week follow up at HES.

Time travelling HES – 1 hour driving  
Time to travel to practice to dispense – 16 minutes walking  
Time to travel to collect spectacles – 16 minutes walking  
6 week check at HES – 1 hour driving  
Total – 152 minutes

Delivery in Children's Service  
First appointment and dispense – 16 minutes walking  
Collection of spectacles – 16 minutes walking  
6 week check – 16 minutes walking  
Total – 48 minutes

#### **Total time saved 1 hr 44 minutes**

Using a CO2 offset calculator, 100 patients from rural areas would create around 3 tonnes of emissions, based on an average of three journeys of 11 miles each way per patient, travelling in an average mid-sized diesel car.<sup>13</sup>

The carbon footprint of patient A is of 30Kg CO2. This means that it would take an average tree over a year to recapture the carbon emitted by these avoidable trips.

The cost of attending non consultant led clinics in ophthalmology outpatients in 2019 was £95 per visit. There are significant savings to the NHS in service delivery locally by primary care optometrists. The total cost of delivering the service in primary care, considering initial visit, a 6 or 18 week check is just less than half of the cost of a non consultant outpatient appointment.

Walking or cycling to local optical practices, is a viable alternative to the use of fossil fuel vehicles, which in turn contributes towards a reduction in CO2 emissions. This in turn brings with it all the demonstrated benefits of regular exercise and a generally healthier lifestyle.

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## **Benefits**

- Increased access and choice for patients
- The “one-stop” service in primary care reduces the number of appointments and so journeys made
- Reduced time spent travelling with reduction in associated costs such as fuel and parking
- Lessen environmental impact with shorter journeys and viable alternatives such as walking or cycling
- Delivery in primary care allows flexibility with appointment times and less time missed from school
- Released capacity within secondary care
- Increased productivity and reduced service costs

<sup>12</sup> (Based on a minimum of 3 appointments, with no traffic or road works. Diesel small car with estimated 50 MPG fuel economy. Fuel prices as of 28/03/2022)

<sup>13</sup> [Car CO2 emissions calculator – Carbon offset car | myclimate](#)



## Conclusion

The implementation of the Children Vision service in Gloucestershire has value beyond the eye health benefits. Reduced travel time and costs for patients and carers, as well as protected learning time for children. The service helps to reduce health inequalities by provision of a more equitable service, offering improved patient choice and enhanced accessibility.

The Children's Vision service has proved over the years to be extremely successful, with excellent feedback from families and the children that benefit from it. A sample of user feedback is offered in Appendix 1.

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## Appendix 1

VERY LOCAL TO US, FITTED US IN VERY QUICKLY + FANTASTIC LEVEL OF CARE.

GREAT SERVICE, VERY CONVENIENT LOCATION, OPTICIAN REALLY PUT US ALL AT EASE.

Quick, easy, appointment at a time that suited us. Less daunting than a hospital visit for the child.

Opticians is local to where I live, appointment time suited and child was happy with appointment.

Local service is much more preferable than the hospital. Much better.

Ease of booking and location ideal.

Much easier to come to a local opticians than the hospital.

Small opticians less intimidating for young child, very friendly staff, lower wait times.

Easy to book, location very close to home. Free parking. Didn't have to wait long.

We were made very welcome. Nice that the children had somewhere to play.

much easier going to an opticians that's closer to home rather than the hospital.

Process was well explained, booking + location were easy.

I have been to the hospital with my daughter on several occasions. It was great to go to my local optician & have a great level of care.

convenient location, close to home. easy to get to from school. Excellent service and treatment

Was convenient and close to the school.

it was a lot easier to come to than the hospital in Gloucester.

Able to select a service close to home, no issues booking an appointment or in the appointment.

It is friendly, local, convenient.

Excellent standard of service. Very convenient location and appropriate for small children

Very good service & care. Local and easy to get appointments.