



# Dudley Optical Practices Leading Preventative Health – Alcohol Screening in Healthy Living Optical Practices

---

This case study highlights the integration of alcohol screening and brief interventions (IBA) within Healthy Living Optical Practices (HLOPs), as demonstrated in the Dudley HLOP pilot. The initiative successfully positioned optical practices as health and wellbeing hubs, offering opportunistic alcohol screening carried out by optical assistants/dispensing opticians as part of routine eye care visits.

---

## Introduction

With the UK Government's increasing focus on preventative healthcare, the role of Healthy Living Optical Practices (HLOPs) in delivering early interventions is becoming increasingly recognised. The Dudley Local Optical Committee (LOC), in collaboration with the Dudley Office of Public Health, were the first in the England to launch the HLOP initiative to incorporate public health services within optical practices. This approach aimed to extend beyond traditional optometric services by providing alcohol screening, smoking cessation, and NHS health checks, and introducing preventative care in optical practices.

Alcohol consumption is a major public health concern, contributing to conditions such as dementia, cardiovascular disease, liver disease, cancer of the mouth and throat, breast cancer, cancer of the bowel and stomach and fertility issues. Identifying harmful drinking behaviours early can significantly reduce long-term health risks.

---

## What Was Done?

**Training and Implementation:** Optical practice staff, including optical assistants and dispensing opticians, were trained to deliver Alcohol Identification and Brief Advice (IBA), ensuring they could engage patients in brief interventions and refer high-risk individuals to specialist alcohol services where necessary.

**Referral Pathways:** Patients identified as high-risk were offered referrals to specialist alcohol services, ensuring they had access to the necessary support.

**Patient Awareness & Engagement:** Optical practices used public health messaging, displays, and trained Health Champions to promote awareness of alcohol-related health risks.

## Early Implementation and Initial Outcomes (2015–2017)

In its initial phase (May 2015 to August 2017), the HLOP initiative successfully screened 12,345 patients for alcohol use.

Of these:

- 1,697 patients (13.7%) were identified as harmful drinkers and received brief interventions
- 49 patients received formal follow-up at four weeks, with 45% reporting reduced alcohol consumption
- The average age of patients was 55, with 42% being male
- Feedback highlighted high levels of patient acceptance and appreciation for receiving public health messaging in an optical setting

The programme demonstrated that optical practices are ideally placed for delivering brief interventions. Given the average 25-minute consultation time and the trusted role optometrists play, practices could engage patients effectively, particularly during pre-screening and dispensing stages.

## Service Interruptions

The programme was paused due to the Covid-19 pandemic, which impacted service delivery and routine public health initiatives across primary care settings.

## Relaunch and Recent Audit (July 2024 – February 2025)

In response to renewed interest in preventative health and collaborative care, the alcohol screening service was relaunched in July 2024 as part of a revitalised HLOP pilot. Over this 7-month period:

- 746 patients were screened for alcohol use.
- 124 individuals (16%) were identified as harmful drinkers and received brief interventions.

---

## Results, Benefits and Outcomes

**Significant Reach:** The relaunch highlighted the continued value of optical practices in delivering public health interventions with 746 individuals screened within a 7-month period.

**Positive Behavioural Change:** The 45% reduction in alcohol consumption among those followed up in the initial audit indicates the effectiveness of the intervention. Patients from the latest audit will also be followed up to assess whether similar outcomes are observed.

**High Patient Acceptance:** Patient feedback showed strong support for receiving public health services in an optical setting, with many reporting that the intervention had a positive impact on their awareness and behaviour.

**Integration with Primary Care:** Optical practices were able to identify at-risk individuals and ensure timely referral to General Practice or specialist alcohol services.

**Support for Prevention Agenda:** The initiative aligns with the broader NHS strategy to shift from sickness to prevention and emphasises the role of primary eyecare providers in delivering public health interventions.

## Optometrist Feedback

“The alcohol screening service is a valuable tool, straightforward, confidential, and essential for guiding my patients towards healthier choices.”

“I didn’t realise optical practices offered this service; it is eye opening in more ways than one! It really made me think about my drinking habits and the units I consume.”

Optometrist, Stourbridge independent practice.

---

## Conclusion

With the NHS 10-year transformation plan shifting focus from sickness to prevention, it is important to highlight how Healthy Living Optical Practices can provide a unique opportunity for intervention. Not only are these practices ‘making every contact count’ they are delivering services to prevent disease. The integration of alcohol screening and brief interventions (IBA) within optical practices has proven to be a valuable public health initiative. The HLOP pilot in Dudley demonstrated that optical practices can effectively engage patients in meaningful conversations about alcohol consumption, provide early interventions, and refer high-risk individuals for further support.

With a structured framework in place, HLOPs could be scaled across the UK, positioning optical practices as key players in preventative healthcare. This initiative highlights the importance of community-based public health interventions and reinforces the role of optical practices as accessible health and wellbeing hubs.

## LOC Case Study: Dudley Local Optical Committee

Acknowledgements:

Dudley Office of Public Health

Healthy Living Optical Practices (HLOPs)

Author: LOCSU Research Lead

Editorial Oversight: Dudley LOC