


# Hertfordshire LOC: Demonstrating Clinical Need Through Dual-Audit



At a Glance

**Challenge**  
No commissioned MECS or CUES in Hertfordshire despite local demand.

**Objective**  
To provide clinical evidence supporting the need for a minor and urgent eye care service in primary optometry.

**Action**  
Hertfordshire LOC conducted dual audits across primary and secondary care settings to provide evidence of need.

**Result**  
High volume of cases suitable for optometry service identified in both settings, including unmet need.

Background

In Hertfordshire, there is currently no commissioned Minor Eye Conditions Service (MECS) or Community Urgent Eyecare Service (CUES) to manage minor and urgent ocular presentations, resulting in a gap in accessible and clinically appropriate care. Hertfordshire LOC recognised the need to gather local clinical evidence to support commissioning discussions.

A dual-audit approach, spanning both primary care optometry practices and secondary care eye casualty services, was designed to assess patient presentation patterns and management outcomes. The audits aimed to highlight the extent of clinical demand, identify potentially avoidable hospital attendances, and demonstrate the value of managing these cases within primary care optometry

What We Did

To demonstrate clinical need, Hertfordshire LOC ran a dual-audit project between January and March 2025.

**Primary Care Audit**  
Four optometric practices across Hertfordshire recorded non-GOS patient encounters over a four-week period in March 2025. Access barriers were explored such as cost—which may contribute to health inequality.

**Secondary Care Audit**  
A concurrent audit, led by a hospital optometrist and LOC committee member, reviewed eye casualty attendances over a three-week period in January – February 2025.

Both audits captured patient demographics, symptom types and the suitability for management of these cases within primary care optometry under a CUES service.

Outputs and Impacts

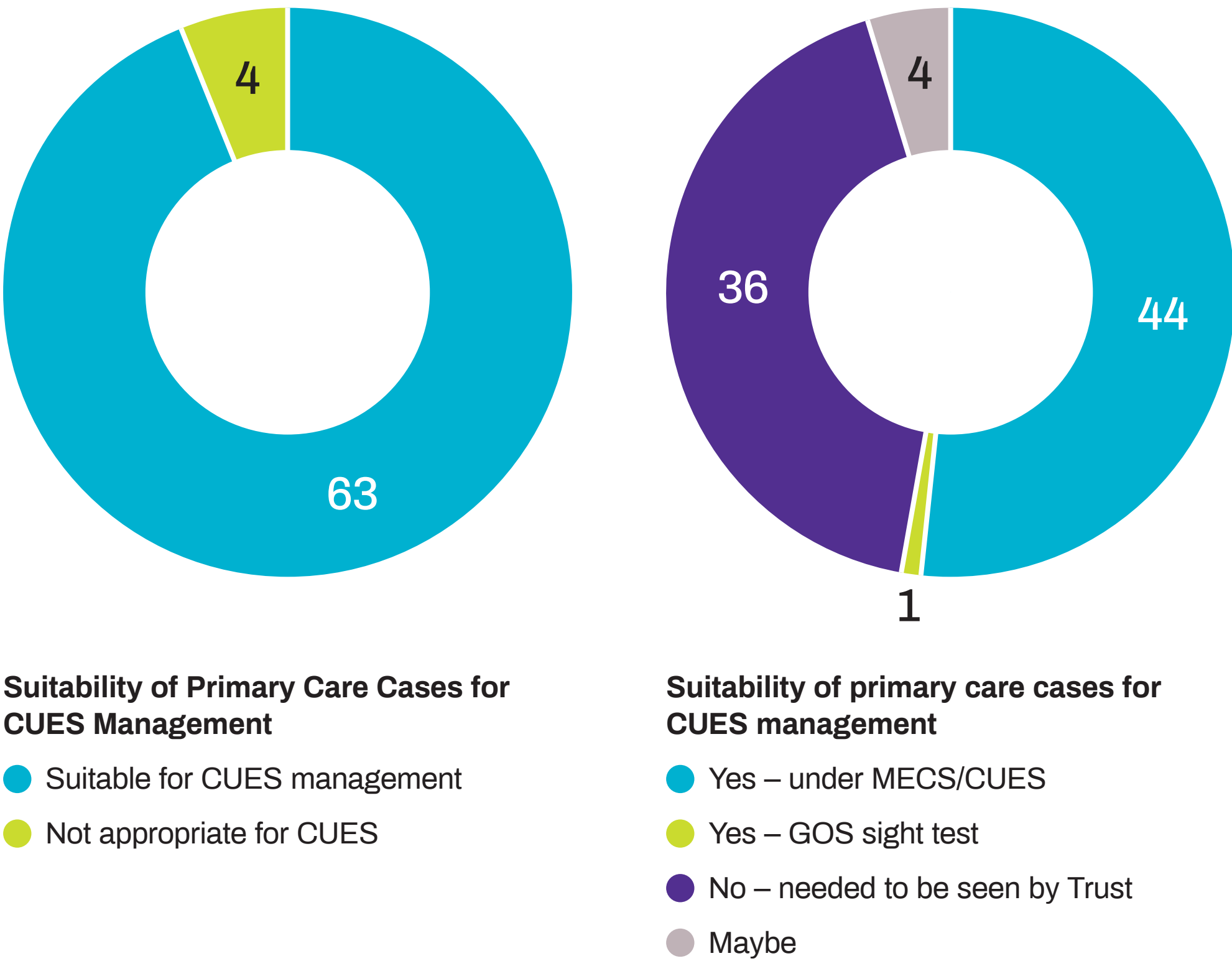
The dual audits provided robust evidence of clinical need and informed Hertfordshire LOC’s ongoing discussions with the ICB.

**Primary Care Audit**

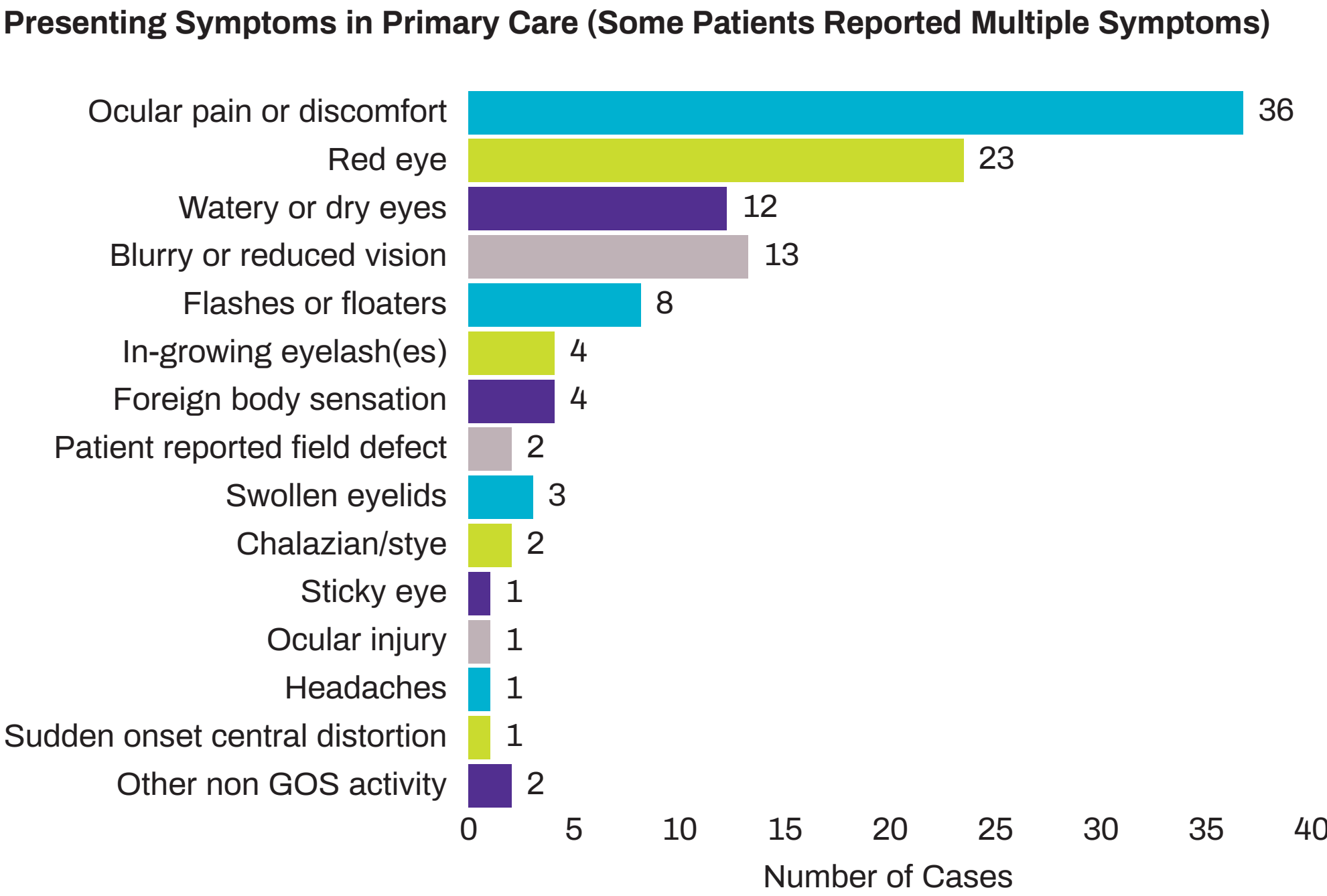
- 67 urgent eye presentations were recorded
- 56 patients paid privately for an urgent optometric assessment in the absence of a commissioned NHS service – raising concerns about access and equity
- 6 patients declined private optometry care and planned to seek the opinion of a GP/pharmacist, attend A&E or try another optical practice. Cost cited as the main barrier for one patient
- Most common presenting symptoms shown in bar graph (right)
- **63 (94%)** of the 67 patients deemed clinically appropriate for management under a CUES service (CUES criteria was met)

**Secondary Care Audit**

- 85 eye casualty cases were reviewed
- Around 50% of patients self-referred directly to eye casualty
- 68 patients (80%) were managed by ophthalmologists
- Presenting symptoms closely matched those seen in primary care
- **44 (51.8%)** of the 85 patients deemed suitable for management within a primary CUES service



The audits provide strong local evidence that a significant number of urgent eye cases can be safely managed within primary care optometry to relieve pressure on HES. As a result, an urgent eyecare pathway within primary optometry is now under consideration for commissioning by Hertfordshire ICB.



Acknowledgements

- Four optical practices
- East and North Hertfordshire NHS Trust
- Hertfordshire LOC Secondary Care Lead (Hospital Optometrist)
- Lecturer in Optometry University of Manchester
- LOCSU

Supporting information

- MacIsaac, J.C., Naroo, S.A. and Rumney, N.J., (2022). Analysis of UK eye casualty presentations. Clinical and Experimental Optometry, 105(4), pp.428-434

Further LOC case studies can be found here

