

# North Central London Optometry Blood Pressure/Atrial Fibrillation Case Finding Pilot



## Background and Phases

**Phase 1 (Nov 2022):** Four optical practices began offering blood pressure (BP) checks.

**Phase 2 (Oct 2024–Jul 2025):** Expanded to eight more practices (five completed the pilot) for BP and atrial fibrillation (AF) case finding. Phase 2 also included a pilot in dental practices.

## Aims

- Strengthen collaboration between optometry, pharmacies, and GPs for hypertension management.
- Detect undiagnosed hypertension in people aged 40+ and refer for further care.
- Make BP testing more accessible in optometry settings, following NICE guidelines.
- Share learnings to help develop similar services elsewhere.
- Encourage healthy lifestyle changes.

## Implementation

- Each practice appointed a health champion.
- Patients identified proactively (age, posters, digital info, eye exam findings).
- Service offered by trained clinical staff.
- Additional BP readings taken only if initial result is very high; the lowest value was recorded.
- Patients with irregular pulse and symptoms referred urgently; asymptomatic patients advised to contact NHS 111.
- GPs notified of abnormal results via email.
- PharmOutcomes system was considered but not used due to concerns surrounding training/setup delays.
- Training provided by NHS England and Royal Society for Public Health (RSPH).

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Collaboration with David Burns, North Central London Local Optical Committee

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## Operational Details

- Data mainly collected on paper and emailed to the Integrated Care Board.
- Practices chosen for geographical spread, not deprivation.
- Direct contracting between optometry practice and commissioner.
- Service offered occasionally due to time constraints; uptake varied.

Despite this pilot utilising two primary care providers differently to identify people at risk of CVD, the pilot was set up with limited involvement with primary care representative committees and stakeholders. This impacted the confidence from some GPs to recognise optometrists as health care providers.

North Central London (NCL) LOC reported a lack of continued engagement and recognition of the supporting role the LOC plays to optometry practices from the Royal Free Hospital (RFH) Trust project management team. The LOC struggled to obtain ongoing feedback or high-level data regarding the CVD case finding pilot running across their footprint, despite repeated chasing.

## Activity and Outcomes

- BP checks:** over 1,700
- AF checks:** 370. 14 people with irregular pulse were detected.
- Referrals:** 174 (mostly to pharmacies; 12 to A&E same day)
- Patient feedback (25/33 responses):**
  - 100% felt checks were well explained and advice useful.
  - 100% agreed optical practices are suitable for BP checks.
  - 36% would change lifestyle; 32% would not; 32% unsure.
  - 44% would not have had a BP check elsewhere.

## Staff Feedback and Challenges

- Training was clear and valuable.
- Some delays in receiving educational materials and stationery, leading to extra costs.
- Smaller practices struggled with fluctuating activity and staff absences; larger providers coped better.
- Age threshold (40+) questioned; some staff felt screening should be broader.

## Practice Experience

### Boots Opticians, Colindale

"We received overall very positive feedback on providing this service for patients. Patients found this service very helpful as there were many who had not visited their GP for routine check ups for a while."

"We managed to find a good structure in order to carry out these tasks; we had two practice leads, one optometrist and one main pre-screener. We trained shop floor staff to carry out and record these services on our log book and the main pre-screener was in charge of referrals and patient follow ups."

"Overall the CVD pilot did not take up much of our time as we managed to incorporate it into our pre-screening. We found it beneficial in giving patients a more in-depth health check."