LOCSU

Audit Toolkit

Audit and Research in Optometry

December 2025
Version 1

Audit Toolkit

For the full details, please click on the headline.

LOCSU

Introduction

This guide supports LOCs, Optometrists, and Dispensing Opticians across primary care and secondary care to plan, deliver and share clinical audits, service evaluations and research activities.

It provides:

- Clear steps to plan and run projects
- Templates and tools to make projects easier and save time
- Signposting to further resources and links to training, funding, and professional support

The aim is to help LOCs showcase the enhanced clinical services they provide, demonstrate the impact and value of these services, and identify opportunities for improvement.

By gathering and presenting high-quality evidence, LOCs can strengthen commissioning conversations, inform service development, and demonstrate how primary and secondary eye care improve patient outcomes.

This work is also valuable for individuals who want to develop new skills and gain experience in audit and research processes, supporting their professional growth and engagement in service improvement.

Clinical audit checks that services are delivering care in line with agreed standards and highlights where changes may be needed.

Research generates new evidence to guide clinical practice and inform service development.

Service evaluation measures how well current services meet patient needs, delivers against service aims and identifies areas for improvement.

If you, or your LOC, have conducted a study (service evaluation, audit or research) relating to enhanced eye care pathways, please share your examples with LOCSU by email info@locsu.co.uk.

Getting Started

Differences between audit, research and service evaluation

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Clinical Audit

- A **quality improvement process** that measures care against set criteria to improve patient outcomes.
- Typically identifies areas for improvement and helps refine clinical practice.
- Example: Auditing referrals for a particular ocular treatment to ensure compliance with best practices.

Research

- A systematic investigation to **generate new knowledge** or evidence that informs clinical practice.
- Often requires ethical approval and structured study design.
- Example: Assessing the effectiveness of a new myopia management intervention.

Service Evaluation

- Assesses the quality or effectiveness of an existing service.
- Aims to understand how well the service is performing, without introducing a new intervention. Unlike audits, which assess whether a specific quality standard is being met, service evaluations are designed to understand how well a service is working.
- Example: Evaluating how well a locally commissioned enhanced service meets patient needs.

Key Distinction

- **Audit** asks, “Are we doing what we should be doing?” (comparing current practice to a known standard).
- **Research** asks, “What should we be doing?” (exploring new practices or knowledge).
- **Service evaluation** asks, "How well is this service working?" (focusing on current performance and outcomes).

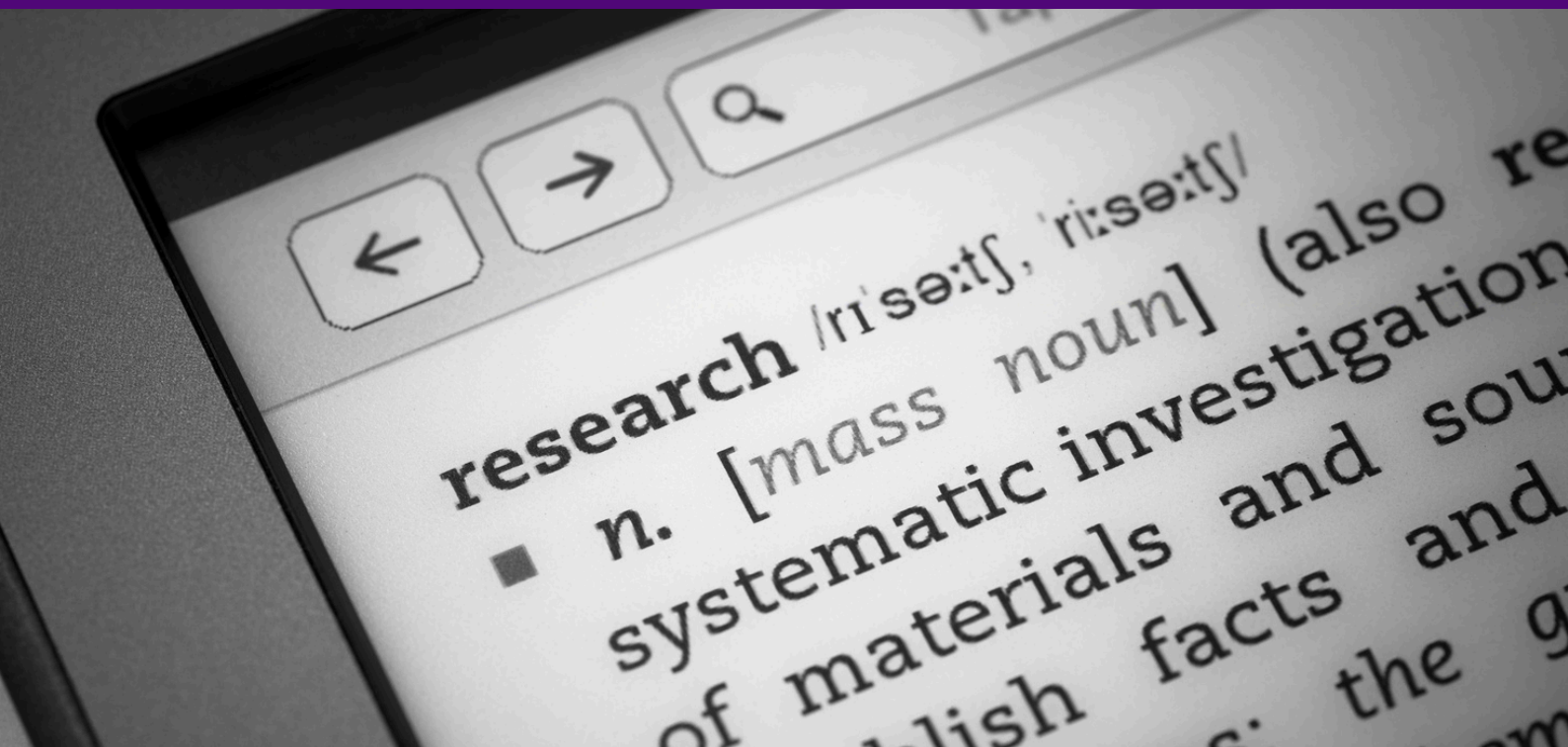
For a more detailed comparison between audits, service evaluations and research, refer to the **Defining Research Table (Oct 2017)**.

Boundary Between Audit and Research

- If your project involves *only routinely collected data* (e.g., existing patient records, standard clinical measurements), it typically falls under the definition of an audit.
- However, if you need to gather **additional** information—beyond what is routinely collected—this may be considered research rather than an audit.
- To help determine whether your project qualifies as research, we recommend using the **HRA Decision Tool**. This tool can help clarify whether your project requires ethical approval and should be classified as research.
- Please note: the tool specifically indicates whether your project requires review by an NHS Research Ethics Committee (REC). You should check what other reviews or approvals are needed for your research irrespective of the result of the tool.

What is a Research Question?

- It's **what you are trying to find out, explore or understand** through your research or audit.
- It defines the **purpose and focus** of your study. (Please note that a *study* is any structured project with a clear purpose and focus. We use the word study or project throughout this document to cover research, clinical audits, and service evaluations collectively).



Key Considerations

Getting involved in audits or research can be incredibly rewarding and valuable for professional development. There is plenty of support available through professional networks, mentors and resources designed to guide you through each step of audit and research.

When starting out, having a mentor can be invaluable. A mentor can help you navigate key early decisions, such as whether ethical approval is required for your project, how to ensure patient data is protected and confirming whether your project qualifies as an audit or should be classified as research.

It is essential to know what you can and can't do within these frameworks to avoid unintended ethical or data governance issues. With the right guidance and a clear process, you will save time and avoid unnecessary confusion.

Top Tips for Getting Started with Audits and Research

Here are some practical tips to help you get started and keep your project on track:

- **Plan realistic timelines** that build in time for approvals and data collection across practices. For LOCs, it may be beneficial to nominate a project lead within the LOC to keep research/audit work on track.
- **Engage stakeholders early**, including commissioners, to ensure support and smooth data sharing agreements. For LOCs, schedule regular meeting dates for both the committee and external stakeholders early on to maintain momentum and avoid delays.
- **Make use of existing templates, guidelines and examples** to reduce workload, such as those included in this toolkit, to save time and build confidence.
- **Collaborate with academic institutions** for valuable expertise, support with research skills and access to additional resources.
- **Look for funding opportunities.** There are grants available to help cover project costs, including time spent out of clinic (**Central Optical Fund**, **College of Optometrists**)
- **Join professional and research networks** like the NIHR Clinical Research Network to receive mentorship in research, training and support. In England, you can attend a local RDN meeting **www.rdn.nihr.ac.uk/about-us**
- **Seek mentorship or guidance** from professional bodies and experienced colleagues. They can navigate individuals and LOCs through the entire process and support with writing up and data analysis.

Having dedicated time and access to a mentor is key—it helps provide clarity, guidance and can save a lot of potentially wasted time.

Clinical Audit

Key Stages, Resources and Templates

Starting an audit may feel a little overwhelming, but using structured **guidelines and templates** can simplify the process.

Reusing or referencing templates from previous audits can be a highly efficient way to get started.

While each audit will naturally differ in its focus or scope, having an existing template offers practical guidance and ensures you capture the necessary data in a structured way—ultimately saving time and effort.

Use an existing template as the foundation for your project, adjusting it as necessary to align with your specific research question.

Your audit does not have to be entirely new. It is often valuable to **repeat audits** to check whether previously achieved standards have been maintained or improved over time.

This process is a key part of the audit cycle and ensures that improvements are sustained in clinical practice.

Above all, consider whether your idea for an audit is **realistic**. Make sure the audit focus is manageable**,** the data is accessible and the project can be completed within the available time and resources**.**

How do I Set Aims and Objectives?

Your **aim** is what you want to achieve with your audit. They should identify the gap between ideal practice (based on evidence, guidelines or standards) and actual practice. Think of the aim as the **overall goal** of your audit project.

Example aim:
To evaluate whether patients referred for cataract surgery are being assessed within the recommended 4-week timeframe.

Your **objectives** outline what you are going to measure in order to assess whether your aim has been met. They should clearly state what your audit will investigate, how you will measure it and how you will make judgements. Your objectives should **relate directly to your standards**.

Example Objectives:

- To measure the percentage of patients assessed within 4 weeks of referral.
- To compare current practice with the national guideline standard of 95%.
- To identify any barriers causing delays in assessment.

Expert Tip

Aims should answer a real-world, relevant question.

Data Analysis in Audits

Analyse your data to provide evidence that addresses your audit objectives.

This can involve quantitative analysis (working with numbers and measurable data such as number of hospital referrals required following a CUES appointment) and/or qualitative analysis (interpreting descriptive, non-numerical information.

Examples of qualitative instruments include process walk-throughs and semi-structured interviews to check understanding of current processes.

David Knight (NIHR) has provided introductory guidance on statistics for those new to audit/research work. This includes what descriptive and inferential statistics are, how to use them and when to use them.

Statistics Primer for Optometrists

Example Spreadsheet

The Clinical Audit Cycle:
Key Stages

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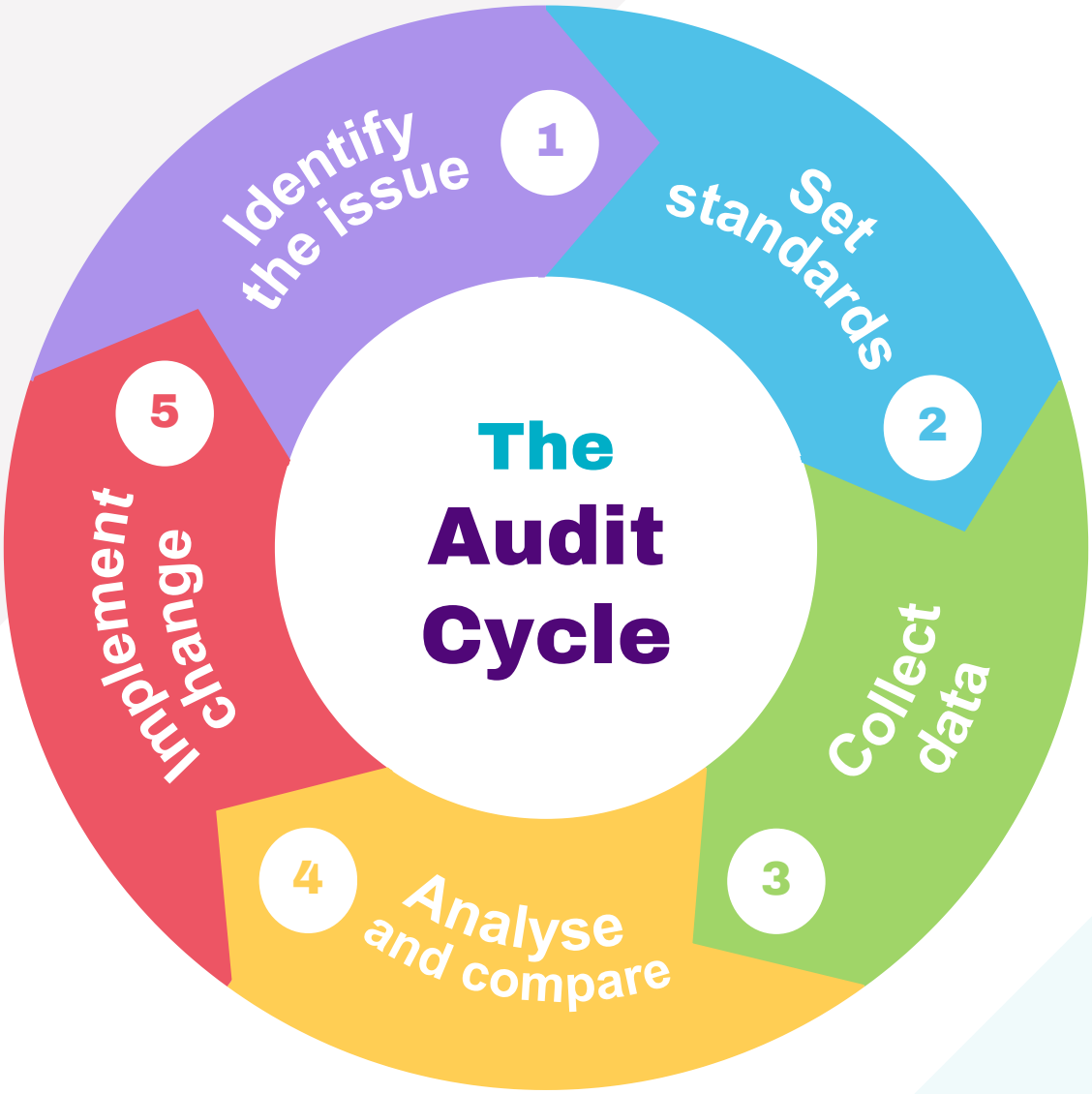

1. Identify the Problem or Issue

What it involves:

- Decide on the focus of your audit. **'Keep it simple' philosophy applies here, it is better to answer one simple question than fail to answer a complex one.**
- Identify an area where there's a need to measure performance or improve patient care.
- Often based on areas of concern, high-risk practices, new guidelines or feedback.

Questions to ask:

- What service/ practice do we want to review?
- Why is this important?
- Are there existing standards or guidelines?
- Can I collect the data?

Consider what question you are trying to answer.

2. Define the Criteria and Standards

What it involves:

- Set criteria (what you will measure) and **standards** (the level of care you expect to meet).
- Use published national, regional, or local standards if available. Can compare against best practice guidelines (e.g., College of Optometrists, NHS standards, NICE guidelines, local service specification).
- If none exist, set a realistic benchmark using evidence or consensus.

Example

- **Criterion**: All patients referred for cataract surgery should be assessed within 4 weeks.
- **Standard**: 95% of patients should meet this standard.

3. Collect Data

What it involves:

- Gather information from **patient records, databases**.
- Decide on your **sample size** and **data collection methods** (manual review or electronic systems).
- **Retrospective** (reviewing existing records) or **Prospective** (collecting data going forward).
- Ensure **confidentiality** and **data protection** throughout.
- Your sample size needs to be large enough to be representative of the population, condition or process you are auditing.

4. Analyse Data and Compare Against Standards

What it involves:

- Analyse the data to see if your practice meets the agreed standards.
- Identify **gaps** or areas where care is not meeting expectations.

5. Implement Changes and Re-audit

What it involves:

- Share results with practice managers and staff, and potentially patients and other organisations.
- Develop an **action plan** to address areas of improvement.
- Make necessary changes in practice, systems or training.
- **Re-audit** after an agreed period to measure if improvements have been made.

Useful Audit Guidance

A great starting point for developing a better understanding of how to plan and carry out an effective audit.

1. Useful information on how to carry out audits in optometric practice: **The College of Optometrists Clinical Audit Guidelines**.
2. **The College of Optometrists Clinical Audit in Optometric Practice Course**
3. The article breaks down the audit process into clear, manageable steps: **CPD Part 4: What is a clinical audit**.
4. **Royal College of Pathologists Clinical Audit Guidelines**
5. Practice based and hospital eye casualty audits in areas without commissioned CUES/MECS services: **Example Audit Templates**, **Example Hospital Eye Casualty Audit (Amended)**

David Knight (NIHR) has provided introductory guidance on statistics for those new to audit/research work. This includes what descriptive and inferential statistics are, how to use them and when to use them.

Statistics Primer for Optometrists

Example Spreadsheet

The below table, developed by the **Royal College of Pathologists,** provides information on standards for a clinical audit.

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Standards for a Clinical Audit

Audits must meet the criteria and standards below in order to be evaluated.

Criteria	Standards
An acceptable rationale for the audit is provided	This must explain why the audit was worth doing.
The audit must be conducted against agreed standards	The origin of the standards must be stated. This must include a reference and state whether the standards are national, regional, network-wide, or local. Justification must be given if there is local variation to other accepted standards (e.g., nationally published).
Sample size and selection	Sample size must be appropriate to the question posed by the audit, considering factors such as the number of specimens or the audit timeframe. The method of sample selection must be described (e.g., random selection).
Data collection	For example: questionnaire, computer search, clinical notes review.
Analysis and interpretation	A brief statement of the method of analysis must be given.
Identification and implementation of any changes required	A completed action plan must be submitted, including a re-audit date. The action plan must contain recommendations, responsibilities, and a timescale for implementing changes, as well as details of who will review the action plan.
The re-audit stage of the cycle must be completed	Reports of both the re-audit and previous audit must be provided.
The audit demonstrates evidence of one of the following: • Benefit to patient care • Benefit to health care professionals • Benefit to the pathology service • Continuing high quality of pathology service • Deterioration in pathology service • Continuing underperforming pathology service • Deterioration in patient care	The evidence should be fully described and supported by data in the audit reports.

Running a Pilot Audit

Running a small pilot audit (collecting data over the course of a single day for example) can help confirm that your data collection process is correct and that your audit template/checklist is adequate.

This “test run” often reveals any gaps or ambiguities in the audit design, allowing you to make adjustments before committing more time and resources to the full audit.

Personal Identifiable Information (PII)/ Patient Identifier:

When handling patient data, ensure that any personally identifiable information is protected and only used in compliance with relevant data protection regulations (GDPR). PII includes any data that can be used, on its own or in combination with other data, to uniquely identify an individual. In a healthcare context, PII may include:

- Full name
- Date of birth
- Address
- Contact details (phone number, email address)
- Gender
- Medical record numbers, NHS number or patient ID
- Any other identifying details that could be traced back to a specific person

When conducting audits or research, it’s essential to anonymise any such information so that no individual patient can be identified.

It is useful to note that age brackets are commonly used to help protect patient anonymity. Instead of recording the exact age or date of birth, you might categorize patients into age ranges (e.g., 20–29, 30–39, 40–49 etc.), thereby reducing the risk of identifying individuals.

Disclaimer

Always include a clear disclaimer or statement indicating that your project is an audit, not a research study. This helps clarify ethical boundaries, data usage and the fact that additional patient consent for research may not be required if only standard clinical data is used. However, if at any point you extend beyond routine data collection or plan to publish findings in a research context, re-evaluate whether ethical approval is needed.

It may be beneficial to include in the audit form itself a disclaimer the purpose of the study. Keep this brief (i.e. Why is this data being collected? Who is going to see this data?). In contrast, research projects generally require ethical approval before commencing and refer to principles like the **Declaration of Helsinki**.

Please also note that universities and hospitals often have their own ethical review committees or processes, which may have additional requirements beyond the Declaration of Helsinki. It's important to check and follow local institutional guidelines.

World Medical Association. (2001). World Medical Association Declaration of Helsinki. Ethical principles for medical research involving human subjects.. Bulletin of the World Health Organization, 79 (4), 373 - 374. World Health Organization. ***https://iris.who.int/handle/10665/268312*** *[Accessed 02/12/2025]*

Is Ethical Approval Required?

A **guide** from the Health Quality Improvement Partnership (2017) outlining how to address ethical considerations in quality improvement and clinical audit projects. *[Accessed 02/12/2025]*

Further guidance can be found **here**. *[Accessed 02/12/2025]*

Studies involving research on identifiable human material (such as blood samples, human tissue) and identifiable data (personal health records), clinical trials (testing new drugs/treatments), studies with potential risks to participants or involving vulnerable groups (children) generally require ethical approval under the **Declaration of Helsinki**.

Approval is required before the research begins.

Clinical audits typically do not need formal ethical approval, as they are considered quality improvement activities rather than research. However, if an audit involves publishing findings beyond internal use, particularly in peer-reviewed journals, or includes interventions outside normal care, ethical review or institutional approval may be necessary.

Confidentiality and consent remain considerations still apply, especially when handling identifiable patient data.

Online Forms

Overall, online forms over paper checklists streamline data collection and analysis, minimise errors and support more rigorous, efficient audit processes.

Logic branching in forms refers to creating dynamic form sections based on a user's previous response. Instead of showing every question to every person, the form will "branch" and display only the relevant questions or sections. For example, if a user selects "No" to a question, the form might skip follow-up questions that only apply to "Yes" responses. This makes the form more efficient and user-friendly, reducing unnecessary questions and ensuring the user only sees what is relevant to them

Qualtrics (recommended) is a well-known online form and survey platform that can streamline data collection for triaging or audits. It offers features like branching logic, automated workflows and real-time analytics, which make it easy to collect and manage patient or practice data. Additionally, you can export data directly into spreadsheets or statistical software for further analysis, making it a flexible tool for audits.

Other tools available:

Microsoft Office

- Ideal for Microsoft 365 users and simple audits.
- Creates surveys, quizzes and forms
- Offers branching where the next question or section depends on the user's previous answer.
- Automatically collects and complies all responses into Excel, making analysis straightforward.
- Easy to share via links or QR codes.

Google Forms

- Free with a Google account.
- Responses flow into a Google Sheet in real time.
- Offers basic question logic, ideal for quick setup and simple audits.
- Also shareable via links or QR codes.

SurveyMonkey

- Robust survey tool often used in larger organisations.
- Offers various question types, logic branching, and analytics.
- Free tier is somewhat limited (e.g., fewer questions, fewer responses).

If you need something free and straightforward then consider Google Forms or Microsoft Forms. For more robust customisation and integrations, SurveyMonkey could be worth exploring.

For audits that go beyond simple data collection, Qualtrics is often recommended due to its more extensive survey design features, branching logic and sophisticated reporting capabilities. Whichever platform you choose, the goal is to streamline your data collection—making it easy to record, export and analyse the information for your audit.

Engaging Stakeholders

Effective stakeholder engagement is essential to the success of any audit or research project. We recommend that LOCs:

- Map all relevant stakeholders from the outset. This could include local optical practices, neighbouring LOCs, local NHS Trusts, Integrated Care Boards (ICB) and prime provider organisations (e.g. Primary Eye Care Company). Consider who needs to be informed, consulted, and involved throughout the audit lifecycle and who should have sight of and/or approve the final write-up.
- Plan engagement strategies early. Identify the most effective methods of communication and collaboration (e.g. one-to-one meetings, virtual briefings, regular emails or stakeholder forums).
- Seek appropriate permissions. Where required, ensure you obtain formal consent for use the of any data, especially when sourced from ICBs or providers such as PES. These organisations should also be given the opportunity to review the final document for accuracy and verify the data before publication or wider dissemination.

Referencing: Why and How

Robust referencing helps to:

- Strengthen the credibility of case studies/reports
- Acknowledge the use of external data and research
- Encourage consistent standards across LOCs

We recommend using existing guidance on referencing such **this helpful guide**.

Where possible, add in-text citations and include a brief reference list at the end of your case study. This supports transparency and traceability.

Acknowledgements

It is good practice to include an acknowledgements section at the end of written reports/case studies. This should recognise:

- Contributors to the project (including LOCs involved, clinicians, optical practices, data analysts, hospital representatives etc.)
- Organisations or individuals providing support and/or data (LOCSU, ICB, PEC)
- Any funding or support received

How to Start a Clinical Audit in Optometry: Summary

- Choose a **specific area/topic to assess** (e.g., referral accuracy).
  - Align with cost-effectiveness, high-risk areas, new procedures, national guidelines or local concerns.
  - Consider what question you are trying to answer
- Set Aims and Objectives
  - **Aim**: High-level goal (e.g., “Improve referral accuracy for diabetic eye screening”).
  - **Objectives**: Measurable targets you will assess to understand if the aim is met.
- Identify or Establish Standards
- Identify and engage stakeholders.
- Confirm whether ethical approval is required. Your mentor can help with this.
- Data Collection Method
  - **Retrospective** (reviewing existing records) or **Prospective** (collecting data going forward).
  - Ensure your sample size is sufficient and that data is captured accurately.
- Pilot Audit
  - A pilot audit collects baseline data and tests the audit process to identify and fix issues before the full audit begins.
- Data Analysis
  - **Quantitative** (numerical data, e.g., referral rates).
  - **Qualitative** (descriptive, e.g., patient feedback on service quality).
- Implement Changes & Re-audit
  - After identifying gaps and areas for improvement, implement changes.
  - Re-audit to measure impact and confirm improvements — closes the audit cycle.

Tip

Keep audits simple. Templates and guidelines can streamline the process and reduce workload.

Signposting

Useful Audit Guidance: A great starting point for developing a better understanding of how to plan and carry out an effective audit.

The College of Optometrists Clinical Audit Guidelines

The College of Optometrists Clinical Audit in Optometric Practice Course

Operational Efficiency and Compliance Audits

This article is an **easily accessible introduction to clinical audits**, specifically tailored for optical practices.

The article breaks down the audit process into clear, manageable steps and includes practical advice on how audits can enhance patient care and service delivery. It covers the **benefits of audits**, the **five-step audit cycle**, and provides guidance relevant to both dispensing opticians and optometrists.

Whether you're new to audits or looking to refine your approach, this resource offers a straightforward and supportive guide.

Royal College of Pathologists Clinical Audit Guidelines

Practice based and hospital eye casualty audits in areas without commissioned CUES/MECS services:

Example Practice Based Audit

Example Hospital Audit

Additional Guidance on Clinical Audits

- A defining research table - A helpful table showing the difference between research, service evaluations and audits.
- A practical guide from The Royal College of Ophthalmologists (2016) outlining the principles and processes of clinical audit and clinical effectiveness in ophthalmology, with examples and standards to support quality improvement in patient care.
- This guidance explains how to use clinical audits to evaluate clinical services that use digital tools or digital health products.
- Visit the Clinical Audit Support Centre *[Accessed 02/12/2025]*
- Principles for best practice in clinical audit. Radcliffe Medical Press (©NICE, 2002) page 51. *[Accessed 02/12/2025].*

Healthcare Quality Improvement Partnership Resources

- This Clinical Audit Teaching Toolkit, supported by the Healthcare Quality Improvement Partnership, offers a wide range of resources designed to develop and strengthen clinical audit skills. *[Accessed 02/12/2025]*
- Healthcare Quality Improvement Partnership: Developing a clinical audit policy and Developing a clinical audit strategy, November 2016. *[Accessed 02/12/2025]*
- Healthcare Quality Improvement Partnership: Documenting local clinical audit: A guide to reporting and recording, November 2016. *[Accessed 02/12/2025]*
- Healthcare Quality Improvement Partnership: Developing a clinical audit policy, November 2016, page 12. *[Accessed 02/12/2025]*
- Healthcare Quality Improvement Partnership: Guide for Best Practice in Clinical Audit May 2020 *[Accessed 02/12/2025].*

Useful Links and Templates

The below links show different types of audits that can take place in an optometric practice. These resources are readily available online.

- NHS England has information on clinical audits that is useful.
- NHS Grampian is one of 14 regional health boards in Scotland and is responsible for the planning and delivery of healthcare and services in the North-East. A General Ophthalmic Services (GOS) practice inspection checklist is here.

Quality in Optometry England

- Offers an overview of audit requirements - **contractor checklist here** (membership may be required for full access).
- **Template** used for legal or mandatory requirements in England.

HSE's Infection Control Audit. Example from **Ridings Opticians** - this can be used as a guideline for infections control.

More **general audits** on practice performance. There is a **paid version**, but some free templates are available to help start practices off.

Also, see the **Specsavers handbook**, which provides advice on how you can use evidence-based optometry in everyday practice.

Guidance on Questionnaires

- Loban A, Mandefield L, Hind D, Bradburn M, **A randomised trial found online questionnaires supplemented by postal reminders generated a cost-effective and generalisable sample, but don't forget the reminders**, Journal of Clinical Epidemiology 2017, doi: 10.1016/ j.jclinepi.2017.08.003. *[Accessed 02/12/2025].*
- PJ Edwards et al, **Methods to increase response to postal and electronic questionnaires**. Cochrane Review, 2009, issue 3 *[Accessed 02/12/2025].*

College of Optometrists Resources

- The College of Optometrists: **Clinical Governance in Optometric Practice** *[Accessed 02/12/2025]*
- The College of Optometrists: **Clinical Audit** *[Accessed 02/12/2025]*
- The College of Optometrists: **Developing Clinical Audit Skills** *[Accessed 02/12/2025]*
- The College of Optometrists: **Clinical Audit in Optometric Practice** *[Accessed 02/12/2025]*
- The College of Optometrists. **Undertaking Practice-Based Research in Optometry** *[Accessed 02/12/2025]*
- The College of Optometrists: **CPD Quality Improvement and Excellence in Optometry** *[Accessed 02/12/2025]*
- The College of Optometrists: **Guidance for Professional Practice, Research and Audit**. *[Accessed 02/12/2025]*

Using the UK Eye Care Data Hub

LOCs may find the **UK Eye Care Data Hub**, launched by the College of Optometrists in May 2025, a valuable resource.

This is a dashboard that models the current eye care workforce and eye disease prevalence or incidence, and future trends of both over time.

It has been designed to support commissioners and designers of eye care services in each of the four UK nations to identify future population eye care needs and optimise the existing eye care workforce.

Ethics Approval Guidance

A **guide** from the Health Quality Improvement Partnership (2017) outlining how to address ethical considerations in quality improvement and clinical audit projects. [*Accessed 02/12/2025]*

Further guidance can be found **here**. [*Accessed 02/12/25]*

For those new to research, the Declaration of Helsinki provides foundational ethical guidelines that ensure the protection of human participants and the integrity of the study. Reading it can be an excellent starting point for understanding the responsibilities and principles governing research **Declaration of Helsinki**.

Professional Standards

- The College of Optometrists. **Guidance for professional practice**. *[Accessed 02/12/2025]*
- General Optical Council. **Standards for optometrists and dispensing opticians** [Accessed 02/12/2025].
- NHS Health Research Authority. **Planning and improving research** [Accessed 02/12/2025].
- **NIHR (National Institute for Health and Care Research)**: Online Training: Training available on website **(Good Clinical Practice and Getting Started in Optometric Research** and **Research in practice programme** online courses)
- College of Optometrists **guidance** on accessing NIHR materials.

Service Evaluation

The **Norfolk and Suffolk Primary and Community Care Research Office** runs training on how to design and conduct **service evaluations**.

The **Evaluation Works toolkit** is a step by step guide to service evaluation.

Training and CPD

For Audit and Research

Optometrists can access online training resources:

The College of Optometrists

Clinical Audit in Optometric Practice - this will show you how to carry out an audit and provides examples.

Undertaking practice-based research in optometry CPD.

A range of courses are available from the Clinical Audit Support Centre.

NIHR Online Training Modules

eLearning modules are available on the NIHR platform (Good Clinical Practice, Getting Started in Optometric Research and Research in practice programme online courses).

These are freely available and there is guidance here by the College on how to access the online material. Access to NIHR modules can also be done via the College of Optometrists CPD Hub.

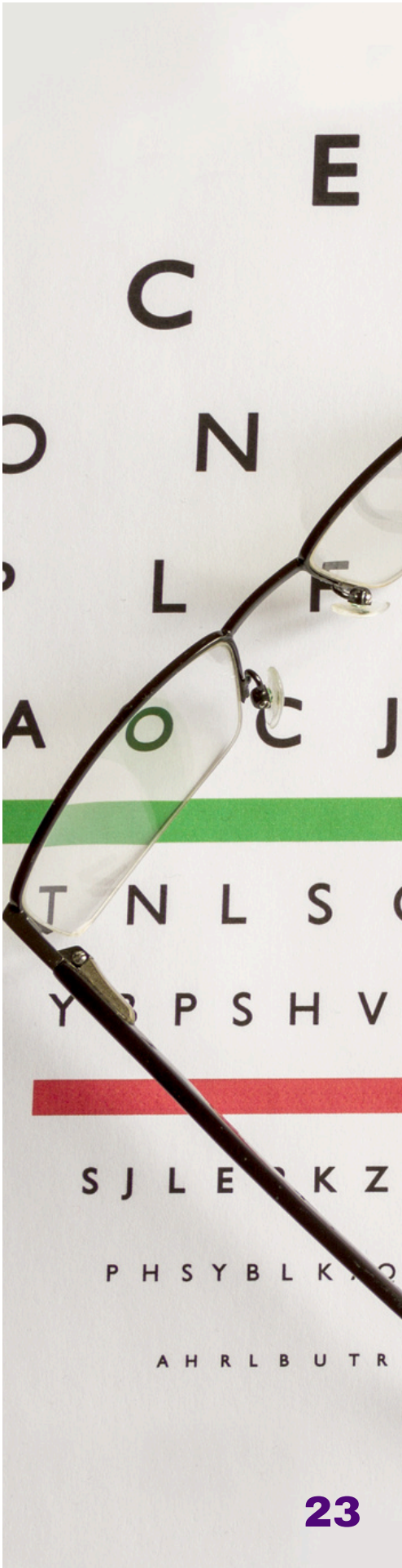
Introduction and guidance on the NIHR materials is available on the College website.

Funding Opportunities

For Audit and Research

Funding is available to support optometric audits and research projects.

Funding cover can renumerate for time spent outside of clinics.



Where to Apply for Research or Audit Grants?

The Central Optical Fund

The Central Optical Fund supports research and audit projects that benefit the optical sector.
Please first read their guidance for applicants page. To be eligible, the project must benefit optometry.

Download an application form and submit with all supporting material to apply@centralfund.org.uk. A PDF Version of the application form is available by contacting apply@centralfund.org.uk

College of Optometrists

- Grants for small practice-based research projects – Funding for early-stage research and audit projects.
- New College research grants have recently been announced

Routes to Research

Funding for research opportunities (typically not for funding audit projects). See Funding and Support - Routes to Research.

Glaucoma UK Research Hub

Fund research into the detection, management and treatment of glaucoma.

Final Steps

How to Take Action

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Pick a topic of interest

(e.g., OCT referrals, dry eye management)

Check if an audit template exists

(College of Optometrists, LOCSU)

Complete training

on audits and research (College of Optometrists, NIHR)

Collaborate and join professional networks

(College of Optometrists, NIHR)

Apply for funding if needed

(Click here)

Complete the Audit or Research Cycle

Collect data → Implement changes → Reassess

Research in Optometry

How to Get Involved

LOCSU

For those looking to move beyond audits into research, consider:

College of Optometrists

Practice-Based Audit & Research support, CPD courses/articles and funding opportunities.

- Practice-based Research Support from the College Research Team.
- Advice and support on designing and delivering clinical audits
- Research Advisors (x 3)
- Statistician Advisor (x 1)
- Small Grant Scheme (SGS) practice-based research grants – normally up to £5,000 / grant.
- eLearning modules on the NIHR platform (CPD points for Optometrists and DOs)
- Clinical Advice Team can also assist with audit advice.

The College of Optometrists: Guidance for Professional Practice, **Research and Audit.** Email researchteam@college-optometrists.org

NIHR (National Institute for Health and Care Research)

The National Institute for Health and Care Research (NIHR) fund, enable and deliver world-leading health and social care research that improves people's health and wellbeing, and promotes economic growth. It is publicly funded by the Department of Health and Social Care and works to improve the health and wealth of the nation through research.

NIHR supports research from early-stage development through to clinical trials and implementation in practice, with a strong emphasis on patient and public involvement.
The organisation operates through **12 Regional Research Delivery Networks (RRDNs)** that coordinate and support the delivery of research across England.

Online Training Modules and Learning Resources
The NIHR offer free online training and development resources accessible to all via their **website**.
These include:

- **Good Clinical Practice**
- **Getting Started in Optometric Research**
- **Research in Practice Programme**

The College of Optometrists have provided guidance on how to access the online NIHR learning:

- **College guidance on accessing NIHR materials.**

NIHR RRDN Study Support Service – What's Available:

- Study wide planning activities (including UK-wide study site & settings placement, site identification)
  - **Scoping Locations for Research** tool
- Recruitment strategies and research delivery support
- Site issue resolution
- Community engagement
- Identifying and overcoming delivery barriers
- Early engagement for study development
- AcoRD and costing support
- Feasibility planning
- Horizon scanning for appropriate studies
- **Support with accessing grants**
- Access to agile delivery team support (NHS & out of hospital settings)

Other Support Available:

- Access to Patient Research Experience Survey (PRES)
- Support accessing Routes to Research website for those in the North East North Cumbria region
- **Be Part of Research** (NIHR-wide official site for patients signing to up research)
- Early Career Investigator support (Associate PI Scheme)
- Opportunities to showcase research
- Signposting to relevant services
- Regular regional research group meetings and support with expressions of interest

This list is not exhaustive, and we would encourage researchers and their teams to contact their local RRDN for tailored support.

Find your **local** RRDN.

Contact Information

- RRDN **Contact Directory** (link to full list of contact details for each region)
- General queries: **enquiries@nihr.ac.uk**
- For advice on practice audits: **nenc.rrdn@nihr.ac.uk** (Please mark FAO Optometry Champion and/or David Knight.

Routes to Research

Research opportunities and funding opportunities available on website.

Academic Institutions

Potential collaborations, access to expertise and statistical support.

Glaucoma UK Research Hub

Glaucoma UK is committed to advancing understanding and improving outcomes for people with glaucoma. They support research in two key ways:

- Funding cutting-edge research into the detection, management and treatment of glaucoma.
- Helping researchers recruit participants by promoting ethically approved studies to their community.

Their Research Hub regularly lists opportunities for people to take part in glaucoma-related research, including clinical studies, surveys, and advisory roles. Glaucoma UK also welcome **submissions** from researchers looking to share their projects with their audience.

Funding Sources

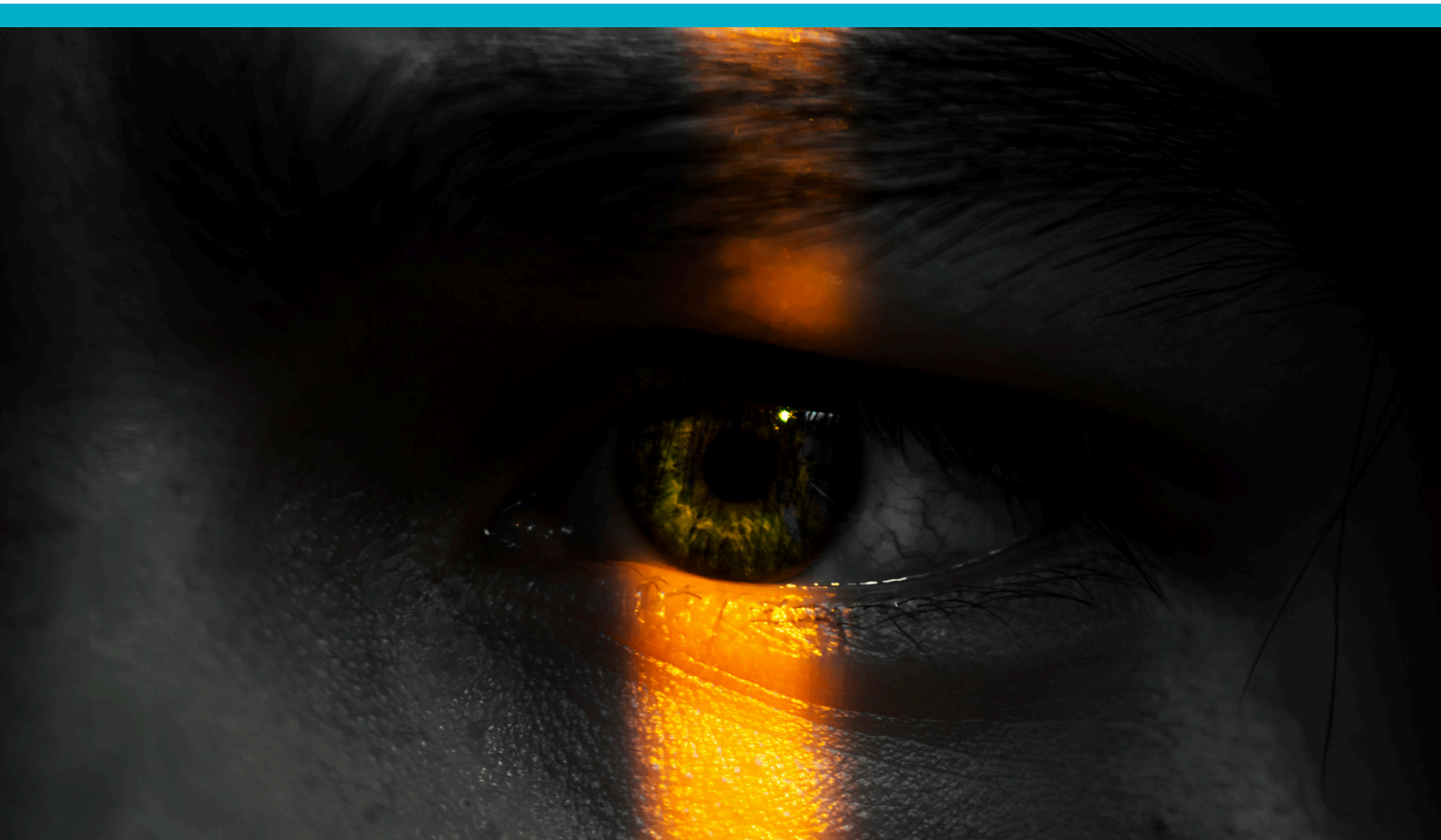
- **Central Optical Fund:** Funds projects that benefit the optical sector.
- **College of Optometrists**: Research Grants for practice-based audits and research.
- **NIHR:** Research funding and support networks.
- **Glaucoma UK:** Fund glaucoma-based projects.

For those new to research, the **Declaration of Helsinki** provides foundational ethical guidelines that ensure the protection of human participants and the integrity of the study.

Reading it can be an excellent starting point for understanding the responsibilities and principles governing research.

Further Support

- **College of Optometrists Research Team** – For funding & support for audits and research. Email **researchteam@college-optometrists.org**
- **NIHR Clinical Research Network** – Mentorship, training, and research collaboration opportunities.
- RRDN **Contact Directory**
- General queries: **enquiries@nihr.ac.uk**
- For advice on practice audits: **nenc.rrdn@nihr.ac.uk** (Please mark FAO Optometry Champion and/or David Knight.
- **LOCSU Team** – for advice **info@locsu.co.uk**.



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This guide is intended as a supportive tool to help LOC members, Optometrists and Dispensing Opticians get started with practice-based audits and research activity. It provides a general framework, examples and signposting to relevant resources. While it offers guidance, it is not exhaustive, and LOCs are encouraged to adapt the content to suit their local context and clinical priorities. Always refer to current national guidelines, ethical considerations and local commissioning requirements when undertaking audit or research.

For further advice or feedback on the content of this toolkit please contact info@locsu.co.uk

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