Enhanced Cataract Referrals

Service Guide for Practices and Practitioners

November 2025

Primary Eyecare

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Introduction

NHS-funded community eye care services are locally commissioned and distinct from the standard General Ophthalmic Services (GOS) sight test. Delivered primarily by accredited optometrists, they offer specialised, accessible care in community optometry settings, reducing pressure on hospitals and improving patient outcomes. Primary Eyecare Services are a not-for-profit provider that work in partnership with Local Optical Committees (LOCs) and community optometry practices to deliver these high-quality services.

This guide is intended for:

- optometrists delivering the service
- support and administrative teams supporting the delivery of the service
- practice managers and owners responsible for service compliance and oversight

Overview

The Enhanced Cataract Referral Service is provided in community optometry practices for patients identified with cataract following a sight test where referral is being considered.

The service allows additional discussion and information gathering to support decision making, ensuring patients referred for surgery are suitable, willing to proceed and have made a fully informed decision about their referral. Additionally, it collects enhanced information to help surgical providers deliver appropriate treatment and care.

The Enhanced Cataract Referral Service will:

- Improve patient experience of cataract referral pathway by:
  - allowing patients to make a fully informed choice about the risks and benefits of cataract referral and surgery
  - reducing unnecessary travel to hospital
  - supporting care closer to home

- Improve the quality of cataract referrals by:
  - providing enhanced lifestyle and health information
  - ensuring only those who want surgery are referred
  - discussing the risks and benefits of surgery

Terminology

Enhanced Cataract Referral Services are also known as the following, and these may still be the service names in some areas:

- Pre-cataract Service
- Pre-operative Cataract Service
- Direct Cataract Referral Service
- Cataract Referral Filtering Service

Local Variations & Local Service Summary One-Pagers

This practice guide outlines the standard and/or most common pathway for this service.

However, local variations in access, service delivery, pathways and protocols may apply. It is important to use this guide alongside the local service summary one-pagers, available here.

Please speak to your Primary Eyecare Services Clinical Lead or email hello@referral.support for further information about your local service.

Variations in the Enhanced Cataract Referral pathway may include:

- inclusion of mandatory dilation
- alignment to local referral pathways and/or policies

Inclusion and Exclusion Criteria

Inclusion Criteria

- Patients registered with a GP in an Integrated Care Board that commissions an Enhanced Cataract Referral Service.
- Patients aged 18 years of age or over.
- Signs and symptoms of cataract identified at sight test.

OR

- Patients referred/signposted to service by health care provider or Eye Care Navigation Service.

AND

- Patient would like to be considered for referral for cataract surgery.

Exclusion Criteria

- Patients registered with a GP in an Integrated Care Board that does not commission an Enhanced Cataract Referral Service.
- Patients under 18 years of age.
- Patients with cataract who do not want to consider cataract surgery.
- Patients for whom cataract is not presenting any significant visual or lifestyle difficulties.
    - patients should continue to be reviewed by routine sight test at the recommended intervals
- Patients who have indicated that they want private referral before entry to the Enhanced Cataract Referral Service.
    - patients should be referred directly or via their GP to their chosen provider and not assessed within this service
- Patients under secondary care management of co-existing ocular condition(s).
    - please refer to Local Service Summary One Pager

Domiciliary Patients

Please refer to local service summary one-pagers to confirm whether domiciliary service provision is specifically excluded.

- To qualify for a domiciliary GOS sight test, the patient must fall into one of the NHS eligibility categories and be unable to leave home unaccompanied.
- The equipment requirements for domiciliary provision remain as stated in the equipment list below.
- Further information on delivering domiciliary services can be found here: Domiciliary Details

Entry to the Service

Self-Presentation

- Patient identified as suitable for service by an accredited optometrist during a sight test.

Intra-Practice Referral

- A non-accredited optometrist refers to an accredited optometrist within the same practice.

Inter-Practice Referral

- A non-accredited community optometry practice refers to a local accredited community optometry practice.

Signposting From Health Care Professional

- HCP considers the need for cataract referral likely and signposts to service.
- Patient contacts accredited community optometry practice of choice to book Enhanced Cataract Referral Service appointment.

Primary Eyecare Services Eye Care Navigation Service

- In localities where all ophthalmology referrals are managed and triaged through a Primary Eyecare Services Eye Care Navigation Service.
- Primary Eyecare Services Eye Care Navigation Service transfers episode to patient's accredited community optometry practice of choice via IT Platform.

Service Delivery

- Where the optometrist is accredited to provide the service, time permits and the patient agrees, the enhanced cataract referral appointment may take place following the sight test.
- The patient may also be booked for a further appointment on another day to complete the enhanced cataract referral.

The Enhanced Cataract Referral Service clinical assessment will include:

- assessment of vision and refraction
- discussion of the relative risks and benefits of cataract surgery and ascertaining the patient's willingness to be referred
- assessment of the impact of cataract on the patient's lifestyle
- completion of medical history, health questions and current medications
- clinical assessment of anterior and posterior eye
    - dilation is generally not mandated but should be carried out where clinically indicated (please refer to "local variations" as dilation is mandated in some areas)
- identify and discuss any co-existing ocular disorders in addition to the cataract which would require different/separate referral or potentially impact the outcome of cataract surgery
- identify whether patient appears suitable for a low complexity cataract pathway
    - guidance on what may constitute suitability for low complexity cataract listing can be found here: https://help.optom-referrals.org/article/667-hvlc-guidance
    - the GP may be consulted prior to referral if further health information is required
- confirmation that patient meets the Integrated Care Board local eligibility criteria for cataract referral (first or second eye) ICB Cataract Policies
- where patient will be referred directly, offer patient a choice of suitable surgical provider
    - patients should be provided with access to the PES Cataract Provider Choice tool for cataract surgery choice

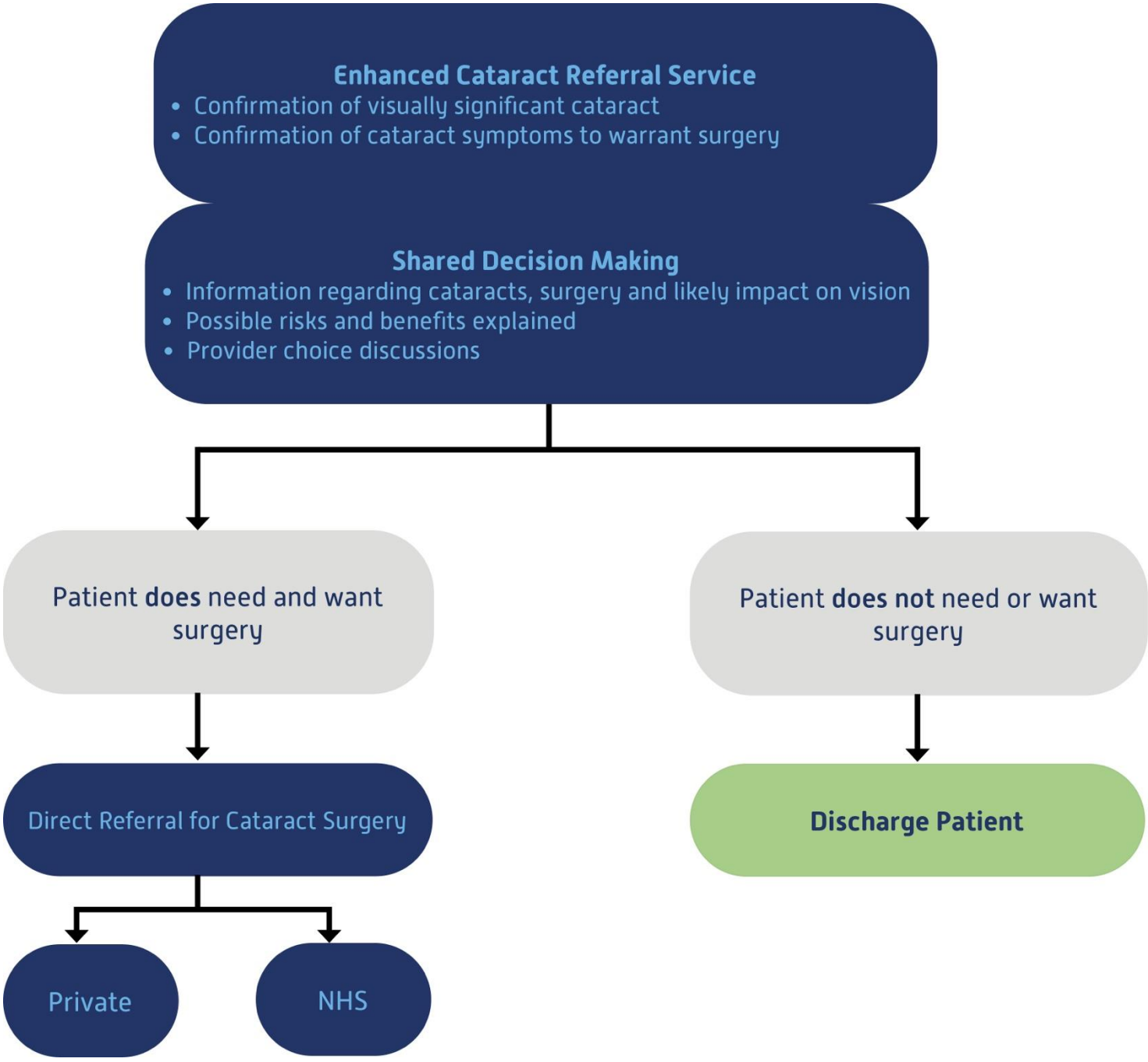
Service Outcomes

Following completion of the service pathway, outcomes are as follows:

- direct referral to patient's chosen surgical provider
  - NHS referrals meeting the ICB cataract referral criteria
  - private referrals should be referred directly or via GP to their chosen surgical provider
- discharge from service as patient does not want or need cataract referral at this time
  - patient should continue to be reviewed by the optometrist through routine GOS or private sight tests at the recommended intervals

The patient should be informed of the outcome and expected next steps and offered sources on further information and support (see Additional Resources) in line with Eye care support pathway principles.

Service Pathway Diagram



Failed to Engage, Did Not Attend, and Was Not Brought Policies

Provision of community eye care services requires practices to manage and record all instances of patient non-engagement or non-attendance to appointments.

For information about Primary Eyecare Services Failed to Engage (FTE), Did Not Attend (DNA) and Was Not Brought (WNB) Policies, please click here.

Patient Feedback and Equality and Diversity Monitoring

- Patient feedback is crucial for our community eye care services to demonstrate the value of services and to enable service improvements.
- Please encourage all patients to complete patient feedback.
- Equality and Diversity information is also requested.
- Feedback is usually collected via text or email and comprises of a few short questions.
- If a patient can't complete patient feedback through SMS or email, you can support them in completing this: Completing PROMS where a patient has asked for support.

Completing an episode through the IT platform

All clinical episodes must be recorded on the Primary Eyecare Service IT platform within 48 hours.

Please note that the service needs to be selected in the Practice Profile in order to complete an episode through the IT platform. My Services - checking, adding and removing services

Please use the following link for a step-by-step guide to completing an episode through the IT platform. This guide can be saved as a PDF and/or printed as required.

The Primary Eyecare Services IT platform requires the recording of data appropriate for service delivery. This does not replace the need to keep a full record of the clinical episode on the Practice Management System (PMS).

Completing the Enhanced Cataract Referral Service module for Primary Care

Audit and Quality Assurance

Primary Eyecare Services has a comprehensive programme of audit and quality assurance in place to ensure that all services are delivered in accordance with national and local standards.

Clinical leads undertake structured service level audits every quarter to monitor performance at a practitioner and practice level to ensure compliance with agreed protocols. Audit reports review activity levels, appointment types, referral patterns, access timeframes, clinical outcomes, and patient-reported feedback (PROMS/PREMS).

Where audit findings highlight outliers or concerns, clinical leads will work with practices and practitioners to identify the cause and to agree any indicated action plan.

Subcontractor Performance Management

Primary Eyecare Services monitors the performance of subcontracted community optometry practices through regular audits and a structured breach process. This supports service quality, patient safety, and contractual compliance. Further details are available here, or in the Primary Eyecare Services Policy Pack.

Requirements for Providing Service

Please find below the equipment and accreditation required for community optometry practice and practitioners to provide community eye care services and access the Primary Eyecare Services IT platform. These requirements should be read alongside the Primary Eyecare Services Policy Pack.

Equipment

All practices providing the service are required to have the following equipment available:

- access to the internet
- means of indirect ophthalmoscopy (Volk/headset indirect ophthalmoscope)
- slit lamp
- applanation tonometer
- distance test chart (Snellen/LogMAR) / Near test chart
- threshold visual fields equipment able to produce either an electronic or printed report
- appropriate ophthalmic drugs (Mydriatic / Anaesthetic / Staining agents)

Clinical Accreditation

Optometrists

All participating practitioners will have the core competencies as defined by the General Optical Council (GOC).

Participating practitioners are expected to keep their knowledge and skills up to date which may include:

- including the provision of community eye care services in GOC personal development plans
- this may be supported Primary Eyecare Services Professional Development webpage

Participating practitioners must complete the WOPEC/LOCSU Cataract Distance Learning modules (there may be some local additional accreditation requirements in some areas).

A code to allow optometrists to complete the WOPEC accreditation can be provided by your Local Optical Committee.

Pre-Registration Optometrists (pre-regs)

As part of the Scheme for Registration, Pre-registration Optometrists (pre-regs) are required to see at least five 'other' patients, with one of the eligible services being Post Vision Screening.

Pre-regs can conduct the patient consultation with appropriate supervision, complete the clinical record on their practice patient management system (PMS), and document findings and clinical decisions made.

The supervisor must physically examine the patient following the pre-reg's assessment, signing off the consultation on the Primary Eyecare Service IT system with notes on the patient record. The supervisor will then complete the final clinical assessment on the Primary Eyecare Service IT Platform. Supervisors maintain full clinical responsibility for patient care.

Practice Requirements

All practices providing the service are expected to have at least one accredited practitioner regularly available to provide the service.

Full practice requirements and onboarding guidance can be found here:

Practice Onboarding

Practitioner Requirements

Full practitioner requirements and onboarding guidance can be found here:
Practitioner Onboarding

Practice and practitioner compliance and practitioner accreditation requirements are continuous and ongoing; should the practice or practitioner no longer satisfy these requirements then they must inform Primary Eyecare Services at hello@referral.support and cease providing this service. Guidance on this process is available on the Service Withdrawal help page.

Failsafe

Effective management of patients requiring optometry enhanced cataract care is essential. It is crucial that all necessary actions are completed to ensure continuity of care and compliance with clinical governance standards.

Primary Eyecare Services has a dedicated Failsafe Team that provides comprehensive support to practitioners, ensuring patients are scheduled and seen within appropriate clinical timeframes.

To ensure the Failsafe Team communications are received, it is essential to keep all contact information up to date . This includes ensuring that designated staff members responsible for the optometry hypertension case finding service are correctly listed and able to receive correspondence.

Community optometry practices are expected to respond to emails from the Failsafe Team, providing explanation for any delays in updating patient episodes within the required timeframe.

If you require Failsafe Team support, please contact the team on pes.quality.pes@nhs.net

Additional Information

Payment Process

For information about invoicing and how to track payments click here. Queries should be directed to hello@referral.support or via the 'blue bubble'.

Service Issues and Complaints

Primary Eyecare Services have a dedicated Quality Team who manage service issues and complaints.

To raise any concerns about this service, please contact quality@primaryeyecare.co.uk

Updating Practice & Practitioner Information

Please refer to the dedicated help page for information on practice and practitioner profiles, updating information and making annual declarations:

Practice and practitioner profiles - IT Platform

Supporting Materials

- Making a decision about cataracts
- Eye Conditions - Primary Eyecare Services
- Cataracts - lookafteryoureyes.orgLook After Your Eyes
- Cataract what you need to know from eyecareFAQ
- Cataracts - Eye health advice
- Cataract information - Look after your eyes
- Patient Choice - Standard Operating Procedure
- Cataract Provider Choice Tool - Find a Hospital Link

Support Pages

- Primary Eyecare Services Policy Pack
- Cataract Help Guides:
    - Cataract Services - (optom-referrals.org)

- Completing the Enhanced Cataract Referral Service module for Primary Care
- Enhanced Cataract Referral Service Local Service Summary One-Pager Variations
- ICB Cataract Policies
- Primary Eyecare Services Cataract Provider Choice Tool - Help Guide
- HVLC Guidance

- Support Pages:
  - My Services - checking, adding and removing services
  - Practice Onboarding
  - Practitioner Onboarding
  - Practice and practitioner profiles - IT Platform
  - Service Withdrawal
  - Changing Email Preferences - IT Platform
  - Practice Invoices and Reconciliation
  - Failed to Engage (FTE), Did Not Attend (DNA) & Was Not Brought (WNB) Policy
  - Domiciliary Details
  - Completing PROMS where a patient has asked for support
- Additional Links:
  - Primary Eyecare Services Professional Development
  - Wales Optometry Postgraduate Education Centre - WOPEC
  - Local Optical Committee
  - Find a Practice - Search for your nearest participating optical practice

Further Information and Support

For further information, click here to view all our help guides.

Further queries should be directed to hello@referral.support or via the IT Platform ‘blue bubble’.