

# A guide to NHS eye care publications

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Information and technology for better health and care

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# Introduction

NHS Digital provides accessible, high quality and timely information to improve decision making and help frontline staff deliver better care.

We publish information on NHS eye care delivered through General Ophthalmic Services (GOS). Our publications include facts and figures on NHS sight tests, optical vouchers, vouchers issued for repairs and replacement and the eye care workforce. Our reports are used by national policy makers to help develop future policy and by local NHS managers to help design local services.

Our publications are available on the NHS Digital website, via the following link: https://digital.nhs.uk/data-and-information/publications/statistical/general-ophthalmicservices-activity-statistics

The purpose of this document is to provide a brief introduction to the terms and measures shown in our publications and where applicable, additional contextual information. Should you have an enquiry on this document, or a more general enquiry, please e-mail: enquiries@nhsdigital.nhs.uk

This document is not meant to be a comprehensive source of all NHS eye care information. It does not include information on how to access eye care services in the NHS, the nature of NHS eye care contracts nor does it go into detail on the data collection process. More general information is available from the Department of Health (DH) at: www.gov.uk/government/organisations/department-of-health

The 2017-18 publication was amended on 23 August 2018. Details can be found in the data quality issues section of this document.

# **Collection of eye care data**

The objective of General Ophthalmic Services (GOS) is to provide, through community optician practices, preventative and corrective eye care for children, people aged 60 and over, adults on low incomes and those suffering from or predisposed to eye conditions and diseases.

# Eye care services in England

Eye care services are available "on-demand", largely in the high street from the private sector. In August 2008, the Primary Ophthalmic Services Regulations came into force in England. Full detail on the regulations can be accessed via the following link: www.legislation.gov.uk/uksi/2008/1186/pdfs/uksi\_20081186\_en.pdf

The 2014 amendments to the regulation can be found using the following link: www.legislation.gov.uk/uksi/2014/418/pdfs/uksi\_20140418\_en.pdf

These regulations for Government-funded services cover such issues as patient eligibility for sight tests, how patients apply for a sight test and eligibility for domiciliary sight tests. There are no reporting requirements explicitly set out in the regulations.

Although such data are not centrally collected, a large number of sight tests are delivered on an entirely private basis, with no support from Government funding. Private sight tests are discussed later in this document.

# **GOS forms**

Activity data on NHS sight tests, optical vouchers and repairs/replacement are collected via a series of GOS forms:

- GOS1 NHS sight tests, including information of patient eligibility status.
- GOS2 The optical prescription or statements given to the patient. This form is not used as a basis for reporting.
- GOS3 NHS optical vouchers, including information on patient eligibility status.
- GOS4 NHS optical repair/replacement vouchers including information on patient eligibility status and voucher type.
- GOS5 Private sight tests with partial help towards the full costs.
- GOS6 Domiciliary sight tests.

GOS forms can be completed and submitted on paper, or electronically, for input into the Central Ophthalmic Payments System (COPS).

#### Paper completion and submission of GOS forms

#### To 1 April 2013

The large majority of forms were sent as paper returns to the relevant Primary Care Trust (PCT) or an agent acting on their behalf, who then input the information into COPS. Practice around this input differed from area to area. Some PCTs/agents input all forms into COPS whereas others made batched or aggregate returns which do not have the same level of detail as the full return.

#### From 1 April 2013 – 31 March 2016

Forms continued to be sent by practitioners in the same way to agents or direct to the Area Teams for processing; often these were input into COPS in batched or aggregate returns, yielding limited detail. Additionally, some practitioners' data were sent directly from their systems to COPS, providing greater detail (see 'Electronic data pilot' section below). This variation in reporting means that data quality varied between area teams. Users should therefore refer to the Data Quality section of the reports, where these issues and any means of mitigating their effects are detailed.

#### From 1 April 2016

Forms are no longer processed by Area Teams; instead, they are processed centrally by Primary Care Support England (PCSE). A new provider is due to provide a new system to capture all the data recorded on all submitted GOS forms for input into the Central Ophthalmic Payments System (COPS), but this new system is not yet operational. Therefore, the amount of detail currently available from these forms is reduced, and the quality of the data unknown. For this reason, the amount of information included in the 2016-17 report is reduced as compared with previous years, particularly in respect of patient eligibility.

Owing to the batch or aggregate inputting of data from GOS forms into COPS, it is likely that data fields which do not form part of the payments methodology or are not under regulation (such as patient eligibility fields), suffer from under–reporting or data quality issues.

#### Electronic completion and submission of GOS forms

In May 2007 an electronic links pilot was started, offering practices with accredited systems the ability to submit electronic claims directly to COPS. A small proportion of practitioners use this facility to input GOS1 and GOS6 forms directly into the system. The majority of Area Teams include a practitioner that makes electronic submissions.

The management of these data is less resource intensive than paper-based returns. Figures are subject to a series of automated validation checks that manage the quality of submitted information. Further, these data are individualised, rather than aggregated. Electronic data allow systematic checking of duplicate claims and offer greater scope for widening the content of our publications.

# **Central Ophthalmic Payments System (COPS)**

Information from GOS forms is input into COPS (see 'GOS forms' section above) centrally. All data from electronically submitted forms are input into the system, but 'batch-entry' of paper forms means that only some of the data recorded on the forms are input.

Most data included in our publications are collected through the COPS, an NHS Digital product. The system keeps a record of claims, automates the payments process, generates

necessary statistical returns and provides fraud prevention tools. COPS was designed to manage payments for eye care. Although the system has additional functionality, it was not designed as an information system and is not universally used as such across the sector. There is no obligation for Area Teams to use the system and no requirement to use it beyond its payments function.

More information on COPS is available from the following link: https://nww.openexeter.nhs.uk/nhsia/opthelp/Ophthalmics/eng/index.html

#### Improving data quality – additional samples

Up to and including the reporting year 2015-16, a manual collection of data was made via the OMNIBUS system from those area teams where the availability of data in COPS concerning patient eligibility for sight tests was limited (for example, in Area Teams where few practices submit data electronically). A two per cent sample of data was collected from those Area Teams. Figures were grossed up to estimate local and national sight test volumes for each eligibility status, and provided in both the written reports and the annex files.

# Data quality issues – GOS activity 2017-18

#### **Reduced GOS data availability**

For the 2016-17 reporting year, a new provider was due to deliver a replacement system for collecting all data captured in GOS forms. This new system is not yet available, which means that the amount of information that the data that NHS Digital are able to analyse and publish are limited in scope.

The total numbers of NHS sight tests, optical vouchers and vouchers for repairs and replacements are available via COPS, and are included in this release. These figures have been presented in all releases to date.

Robust breakdowns of optical vouchers and vouchers for repairs and replacements by eligibility (e.g. by age band) are not currently available, and are therefore not included in the report, or the tables and charts.

The available raw data for these breakdowns are provided in Annex B for reference, but these should be interpreted with caution in light of the known issues with the data collection, and the small sample sizes they represent.

#### ONS mid-year population estimates / area team mappings

Population estimates are no longer available at Area Team level, but GOS activity data are still supplied at Area Team level. To enable comparison of Area Team level rates to national level rates, mid-year 2014 population estimates have been used for the reporting years 2015-16 and 2016-17. Users should therefore interpret numbers expressed as rates per 100,000 population with caution.

#### **Removal of National Statistics status**

As a result of the reduced GOS data availability described above, the GOS activity statistics no longer meet the highest standards of trustworthiness, quality and public value; therefore, the National Statistics badging has been removed from this product.

Once the new data source is available, it is anticipated that future publications could be considered for National Statistics status.

#### 2017-18 Amendments

On 23 August 2018 the 2017-18 publication, originally published 23 July 2018, was amended due to data quality issues that meant the figures published originally were misleading. All data that refer to geographical breakdowns or eligibility criteria have been removed due to problems with the accuracy of the data.

Eligibility data has been removed as it was calculated from a small sample of GOS forms and as a result the published figures were potentially inaccurate, and therefore potentially misleading.

Geographical data has been removed as it is impossible to ascertain how many NHS Sight Tests are carried out in each Area Team, therefore the figures published were inaccurate and were misleading.

# **GOS** activity

Our activity publications include information on NHS sight tests and optical vouchers, vouchers issued for repairs and replacement, domiciliary sight tests and private sight tests with partial financial help.

# **NHS Sight Tests**

NHS sight test figures are derived from GOS1 forms. Figures for total sight tests are input into the Payments System by all Area Teams or agents, regardless of whether all GOS1 forms are input into the system or batched or aggregate returns are made.

#### Sight tests per head of population<sup>1</sup>

In the full year report, we also publish information on the number of sight tests per 100,000 of the population, using ONS mid-year population estimates. We include figures per 100,000 of the children aged 0 to 15 population and adults aged 60 or over population. Early years' data are not available for these measures at a local level due to concerns over the quality of some local level patient eligibility figures.

#### Sight test eligibility<sup>2</sup>

Under current guidelines, the following groups are eligible for an NHS sight test. Note that there have been some changes in sight test eligibility over the years, which would have an impact on total sight test time series figures:

- Patients ages 60 and over
- Children under 16
- Students in full-time education, aged 16-18
- Adults receiving<sup>3</sup>:
  - Income Support (and their partners)
  - Income-based JSA
  - Income-based ESA
  - Pension Credits Guarantee Credit (PCGC)
  - Tax Credit
  - Universal Credit<sup>1</sup>
- Patients holding a HC2 (full help) or HC3 (partial help) certificate
- Patients registered as sight-impaired, partially sighted or blind
- Glaucoma and diabetes sufferers
- Patients who have been advised, by an Ophthalmologist, they are at risk of glaucoma

<sup>&</sup>lt;sup>1</sup> Mid-year population estimates used in 2016-17 and 2015-16 are subject to data quality issues – please see Data quality issues – GOS activity 2016-17

<sup>&</sup>lt;sup>2</sup> Eligibility breakdowns are not reported for the year 2016-17 due to data quality issues – please see Data quality issues – GOS activity 2016-17

<sup>&</sup>lt;sup>3</sup> Universal Credit is being implemented to cover these types of benefit. This is now being introduced to the GOS reports but has not been fully rolled out, so the detailed split of types of benefits is still included.

- Close relatives (e.g. parent, son, sister), aged 40 and over, of a glaucoma sufferer
- Prisoner on Leave (PoL)
- Patients requiring complex lenses.

Where Area Teams input batched or aggregated data into COPS, information on NHS sight tests by patient eligibility is based on a sample collected via our OMNIBUS system.

Note that patients may qualify for a NHS sight test on more than one criterion. However, they would only be recorded against one criterion in the Payments System. This has an impact on categories that typically overlap, e.g. glaucoma sufferers aged over 60.

It should be noted that patients are not charged if the sight test is carried out at a hospital eye department, or at the request of the hospital, as part of a management plan for eye conditions.

#### Sight test frequency

Adults are advised to have their sight tested every two years. However, ophthalmic practitioners may suggest more frequent visits if a patient is:

- a child wearing glasses
- a diabetic
- close relatives aged 40 and over of a glaucoma sufferer
- 70 and over
- If a patient is concerned about his or her sight, they are entitled to request an earlier test. If the ophthalmic practitioner agrees, for clinical reasons, then they will be entitled to an NHS sight test, providing they meet the eligibility criteria.

# **Domiciliary Sight Tests (NHS-funded mobile sight tests)**

The majority of NHS sight tests are conducted at practitioners' premises. A small proportion of tests are conducted away from ophthalmic premises. These include sight tests carried out at people's homes, residential homes and day care centres. These data are collected via the GOS6 form, which, as for GOS1 forms, are not fully input into the Payments System.

Domiciliary sight tests are reimbursed at two rates:

- Higher rate the patient is the first or second to be seen at an address
- Lower rate third and subsequent patients visited at the same address.

All patients eligible for an NHS sight test are also eligible for a domiciliary visit if they are unable to leave home unaccompanied

#### **Private Sight Tests**

NHS Digital typically report on NHS funded activity only and as such we are not necessarily remitted to report on the private eye care sector. However, it is important that policy makers and local managers can accurately gauge public demand for eye care or to make a full assessment of the state of eye health across the nation.

Reports based only on NHS funded activity are not likely to be representative of the population as a whole given the greater usage of NHS treatment by people living in socially deprived neighbourhoods or by the elderly population. We are unable, for example, to report

on the number of sight tests taken up by regular visual display unit (VDU) users, funded through their employers.

The latest available information on private eye tests is that collected through the Sight Tests Volume and Workforce Survey, last carried out in 2005-06, available at the following link: http://content.digital.nhs.uk/pubs/sighttestvolandwforce

# Private sight tests with partial help

Patients with HC3 certificates as part of the low-income scheme are entitled to varying degrees of financial help with private sight tests. Data are collected via the GOS5 form.

# **NHS Optical Vouchers**

The NHS optical voucher scheme was introduced in July 1986. Under the scheme, patients who had previously been eligible to have NHS spectacles were given NHS optical vouchers to put towards buying their own choice of spectacles, or having new lenses fitted to their existing frames. From April 1988, NHS optical vouchers could also be put towards the cost of contact lenses. Patients may receive a voucher for more than one pair of spectacles.

Optical voucher data are recorded via GOS3 forms, which are then input into the COPS.

#### **Optical voucher eligibility<sup>2</sup>**

Eligibility for NHS optical vouchers differs to that for NHS sight tests. The following groups are eligible for NHS optical vouchers. Note that there have been some changes in voucher eligibility over the years, which would have an impact on total voucher time series figures:

- Children under 16
- Students in full time education, aged 16-18
- Adults receiving:
  - Income Support (and their partners)
  - Income-based JSA
  - Income-based ESA
  - Pension Credit Guarantee Credit (PCGC)
  - Tax Credit
  - Universal Credit
- Patients holding a HC2 (full help) or a HC3 (partial help) certificate
- Prisoners on Leave (PoL)
- Patients requiring complex lenses

As most GOS3 forms are input into the COPS, voucher eligibility statistics are more robust than the sample based sight test eligibility figures.

#### **NHS Vouchers for Repair or Replacement**

Eligibility for vouchers for repair or replacements is the same as that for optical vouchers. However, patients must provide additional information on how the loss or damage happened.

Information on NHS vouchers for repairs or replacements are captured via GOS4 forms, which are then input into the COPS.

# Workforce

We publish information on the number of ophthalmic practitioners by Area Teams to carry out NHS funded sight tests.

# **Performers Lists**

The Performers Lists, introduced in 2008, are a record of all ophthalmic practitioners authorised by Area Teams to perform NHS sight tests. Each Area Team maintains a Performers List and a practitioner may only be recorded on one Performers List. However, by being recorded on that list the practitioner is authorised to perform NHS sight tests anywhere in England. A practitioner would normally be recorded on the Performers List of the Area Team in which they perform the majority of their work.

The introduction of the Performers Lists changed the basis of our estimate of the number of practitioners at a local level. Local level data collected under this method from 2008 are not comparable to those for previous years. Note that national level figures were not affected by this change.

Not all practitioners recorded on Area Team lists will have carried out NHS sight tests. Further, data are not collected on the hours a practitioner works, nor the amount of time they devote to the NHS.

# **Practitioner Type**

Sight tests are conducted by an ophthalmic practitioner, which can mean either an optometrists or an ophthalmic medical practitioner.

#### **Optometrist or Ophthalmic Optician (OO)**

An Optometrist is qualified to test eyesight and to prescribe and dispense spectacles. Their training enables them to recognise, treat and manage some abnormalities and diseases of the eye. They are registered with the General Ophthalmic Council (GOC).

#### **Ophthalmic Medical Practitioner (OMP)**

An Ophthalmic Medical Practitioner is a qualified medical doctor specialising in eyes and eye care. In addition to their medical skills, they are qualified to test eyesight and prescribe spectacles, and diagnose abnormalities. They are registered with the General Medical Council (GMC).

# **Working Hours**

Our most recent report on working hours of the ophthalmic workforce was published in 2005-06. The survey<sup>4</sup> covered practitioners in Great Britain and collected information on the number of full and part-time workers, an indication of whole-time equivalents and the average hours worked by optometrists.

<sup>&</sup>lt;sup>4</sup> http://content.digital.nhs.uk/pubs/sighttestvolandwforce

# **Related Information**

Our eye care publications currently include data on sight tests, vouchers, repairs and the eye care workforce. Related eye care information is available both through other NHS Digital publications and from other organisations.

These other data sources provide a wider view of the eye care sector. For example, an Area Team may compare Hospital Episode Statistics alongside sight test data to estimate the flow through of patients from primary to secondary care. Note that this is not an exhaustive list.

# The Compendium of Clinical and Health Indicators

#### http://content.digital.nhs.uk/indicatorportal

The NHS Digital Indicator Portal gathers together a number of health and social care indicators. The portal is a valuable information resource for health and social care professionals, not just information specialists, providing many benefits to the user. It allows a demographic profile comparison of local areas, exploration of factors influencing health inequalities and facilitates users in understanding population health challenges in their local areas. The information can be used to inform annual heath reviews and equity audits, and provides measurements for service planning, performance management and other success criteria. The portal currently includes:

- Compendium of Population Health Indicators
- GP Practice Data
- Local Basket of Inequalities Indicators
- NHS Outcomes Framework
- Summary Hospital-Level Morality Indicator
- Social Care
- Quality Accounts
- Clinical Commissioning Groups

# **Hospital Episode Statistics**

#### http://content.digital.nhs.uk/hes

HES are a data warehouse containing details of all admissions, outpatients, appointments and A&E attendance at NHS hospitals in England. It is a records-based system covering all NHS trusts in England, including acute hospitals, primary care trusts and mental health trusts. It provides a wide range of health care analysis used by, for example, the NHS and government, researchers, commercial health bodies and local commissioning organisations.

#### People who are registered as blind or partially sighted

#### http://content.digital.nhs.uk/catalogue/PUB14798

This publication contains detailed statistics of persons registered with councils with Adult Social Services responsibilities in England as being blind or partially sighted. Data are collected every three years.

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