

Our manifesto for Scotland



Eye care in Scotland: building on success

183,000 people in Scotland are living with a significant degree of sight loss, estimated to rise to **214,000** by 2030¹

Scotland is the only UK nation where everyone can access NHS-funded eye care. Strong investment in commissioning of services and the championing of optometrists have been at the heart of this success. We call on all political parties to build on this success by continuing to invest in community optometry services that meet patients' needs across Scotland.

By building on this strong foundation and prioritising community eye care, the next government can further advance optometry services, making sure everyone can get the specialised care they need and deliver better outcomes for patients. Building on what already works will help people get care closer to home, reduce inequalities, improve uptake, and make sure no one is left behind. Patients in Scotland need high-quality, easy-to-access eye care to be sustained and expanded, and optometrists are at the centre of delivering on this ambition.

There are over 1,600 highly trained optometrists delivering almost 2.5 million NHS eye examinations each year. They check vision and eye health, and can also diagnose, monitor, and treat eye conditions like cataracts and glaucoma. Many optometrists have additional higher qualifications, including the ability to prescribe medications, and can manage patients with more complex needs.

Our priorities for eye care in Scotland:

- 1 Expand community eye care services**
- 2 Invest in a sustainable, skilled optometry workforce**
- 3 Prioritise digital connectivity**
- 4 Address inequalities in access to eye care.**

1 Expand community eye care services

Our call to action

We are calling on all political parties and health policymakers to rapidly scale up enhanced community eye care services, such as the Community Glaucoma Service (CGS), making full use of Scotland's highly-skilled optometry workforce, and supporting those with advanced qualifications to deliver more care closer to home.

The case for change

Ophthalmology is the NHS's largest outpatient speciality, with people suffering preventable sight loss due to delays in accessing the hospital eye service, and demand for eye care is rising. Proven enhanced community services like CGS are safe, effective, and highly valued by patients, and new pathways for people with low vision could make a real difference, yet their rollout has been slower than hoped.

The Scottish Government estimates that around 20,000 patients with glaucoma could be transferred from hospital waiting lists to the community.² Recent funding confirming continued investment in community optometry is welcome. Expanding community eye care is a ready-made solution to ease pressure on hospitals. With further investment, these successful models can reach more people, including in the islands and rural communities, delivering care closer to home and making the NHS more efficient.

Benefits for patients and the health service:

- ✓ Faster access to eye care, closer to home
- ✓ Earlier detection and ongoing management of conditions
- ✓ Better use of optometrists' expertise
- ✓ Increased hospital capacity for complex cases, leading to less avoidable sight loss
- ✓ More efficient use of NHS Scotland resources.

2 Invest in a sustainable, skilled optometry workforce

Our call to action

Optometry services require a continuing supply of optometrists with both high-quality current skills, and the scope to develop future skills. It is therefore vital that investment in education and training is adequate to ensure Scotland has the optometrists it needs, now and in the future.

The College is calling for:

1. Commitment to sustained, adequate funding to deliver a sustainable volume of student optometrists and the clinical learning needed at undergraduate level.
2. The restoration of access to Docet learning resources³ for Scottish optometrists, to enable the provision of unbiased, high-quality, specialist CPD. Just £25 per registrant would restore this essential resource.
3. Continued additional investment in higher qualifications, independent prescribing and training to support service improvement, leadership and educating others.

The case for change

A strong and skilled workforce means patients get timely, high-quality care wherever they live. This requires appropriate investment by the Scottish Government, particularly for placement funding, which is agreed annually, and a longer-term commitment is needed.

A particular success is NESGAT (NES Glaucoma Award Training) - a programme of accredited education and training in glaucoma management. Funded by the Scottish Government, this qualification allows independent prescribing optometrists in Scotland to manage suitable glaucoma patients in the community. However, additional support is needed to ensure a faster rollout of this service to ensure more patients benefit.

The loss of access to Docet resources has presented a significant barrier to specialist CPD opportunities for both core and higher levels of optometric training in Scotland. In addition, the Low Vision Professional Certificate course has not been delivered due to lack of funding, but recent confirmed budget for design and development of this service has been welcome.

Benefits for patients and the health service:

- ✓ Reduced pressure on the hospital eye service through optimal use of primary care optometrists with both core and specialised qualifications
- ✓ Delivery of high-quality eye care in the community is supported
- ✓ Reduced postcode lottery of standards of eye care
- ✓ An optometry workforce fit for the future.

3 Prioritise digital connectivity

Our call to action

It is vital that there is greater investment in digital systems to ensure that eye care in Scotland is fit for the future, and to improve patient experience and speed up diagnoses and treatment.

IT infrastructure must be upgraded to streamline the number of systems in use and allow all optometrists to access electronic patient records - this is especially crucial for optometrists who are prescribers.

Investment is also needed in the standardisation of digital imaging and file sharing, which would ensure that community and secondary eye care colleagues are able to effectively share images, reducing delays in diagnosis and treatment, and enhancing the joined-up provision of shared, virtual and remote services. This should include supporting procurement of appropriate instruments, devices and software that enable image and file sharing.

The case for change

Although most optometrists across Scotland have access to NHS mail, some in the locum workforce do not, nor do they have consistent access to the SCI Gateway (Scottish Care Information Gateway). Investment should ensure full coverage, as well as improve digital referrals and two-way communication between community and hospital services.

Images shared between community and secondary eye care are not usually comparable on different machines, so patients often have images taken again at the hospital after referral. This means it takes longer to get a diagnosis and feedback on a referral. In some cases, delays can lead to avoidable sight loss. Standardisation of digital imaging via the adoption of existing international specifications would resolve this, and we hope the future Scottish Government will support The College of Optometrists and partners' work in this area.

Benefits for patients and the health service:

- ✓ Speed up referrals
- ✓ Reduce the risk of avoidable sight loss due to delays
- ✓ Improve multidisciplinary working, learning and improved services
- ✓ Ensure NHS Scotland is fit for the future.

4 Address inequalities in access to eye care

Our call to action

Everyone in Scotland should be able to access the eye care they need, regardless of their location and socioeconomic circumstances. While eye care across Scotland is free, uptake is not equal across Health Boards.⁴

Furthermore, optometrists working in the community are in an ideal position to deliver public health messages on health and lifestyle due to their location and levels of patient coverage. They already play a critical role in preventative healthcare for patients who may not be in regular contact with other health professionals, by identifying conditions such as diabetes and hypertension.

We would like to see more public health interventions, and a public education campaign that encourages people to attend regular eye examinations in Scotland, specifically targeted at people in more deprived communities. Targeted support and prevention programmes would help reduce avoidable sight loss and improve the quality of life for all. This could include better promotion of the eyes.nhs.scot website to the public and through initiatives linked to National Eye Health Week.

The case for change

It is vital for the public to understand the importance of regular eye examinations, which are crucial in detecting the early signs of eye disease, preventing sight loss and identifying general health conditions. Regular eye examinations provide the opportunity for optometrists to identify many wider health conditions such as high blood pressure, high cholesterol and diabetes, which may not otherwise be picked up.

Scotland is the only UK nation with universal access to funded eye care, and yet only around half of people surveyed in Scotland say they would go to an optometrist first for an eye problem - many say they will go to their GP, A&E, or nowhere at all⁵. More could be done to prevent unnecessary pressure on other parts of the healthcare system, and the subsequent signposting back to community eye care, which although is immediate, is nonetheless time consuming for patients and healthcare staff.

The full implementation of the General Ophthalmic Services Specialist Supplementary (GOS-SS) service in January 2026 is a welcome policy announcement, which will enable more optometrists to manage complex eye conditions in the community and reduce hospital eye service demand. Communication with the public will be necessary to ensure patients are aware of services at a local level.

Benefits for patients and the health service:

- ✓ Patients get the right care, in the right place, at the right time
- ✓ Reduced inappropriate pressure on GPs and A&E colleagues who have to refer out
- ✓ Identify wider health conditions early that may not otherwise have been picked up
- ✓ Promote patient self-referral and confidence in community-based care.



1,600

In 2023, there were over **1,600** optometrists in Scotland. This is predicted to rise to **2,228** in 2033⁶



2.44 million

Over **2.44 million** NHS-funded eye examinations were delivered in 2024/25, including approximately **61,000** domiciliary visits⁷



59,862

59,862 patients are waiting for a first ophthalmology outpatient appointment in Scotland, of which **3,487** patients are waiting over 52 weeks for an appointment⁸



700

There are over **700** Independent Prescribers (IP) in Scotland – optometrists with additional qualifications who can prescribe⁹

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