

The Rt Hon Stephen Kinnock MP
Minister for Care
Department of Health and Social Care
39 Victoria Street
London
SW1H 0EU

22 May 2025

Dear Minister

Eye care and the NHS 10 Year Health Plan

We write as the membership bodies representing optometrists, dispensing opticians and optical contractors in follow up to the positive exchange you had with the Chair of the APPG on Eye Health and Visual Impairment, Marsha de Cordova MP, and others in the House about eye care in the NHS 10 Year Health Plan, on 6 May.

We very much welcome your recognition of the importance of improving IT connectivity and streamlining the interface between primary eye care and the hospital eye service as part of the shift from analogue to digital. To achieve this, it is important that we improve the digital link-up between primary care providers by granting read-write access to patient records for all primary care professionals. However, it is arguably even more important that there is recognition of the role of all parts of primary care as the critical first port of call for patients and gatekeepers to hospital services, doing so will help to realise the potential of providers to relieve pressure on secondary care.

We also warmly welcome your commitments to a more joined-up strategy for eye care at the heart of the Plan and to equal access and genuine choice for all patients. These are the very principles on which NHS primary eye care has operated so successfully for many years and should be maintained in the future.

The MP for Chichester (Jess Brown-Fuller) was also right however to press the case for universal commissioning of community minor and urgent eye care services, often referred to as 'MECS' or 'CUES', from optical practices, the benefit of which has been supported by independent economic analysis¹. This would sustain and improve waiting time reductions for ophthalmology at the same time as increasing overall capacity so that hospitals can focus on those patients who need consultant-led care and not become overwhelmed again^{1,2}. We hope you will include

¹ [PA consulting, 2024, Key Interventions to Transform Eye Care & Eye Health](#)

² [The safety and effectiveness of community urgent eye care services in England, The College of Optometrists, 2025](#)

guidance to ICBs about this under the 10 Year Health Plan. We would be happy to brief you more about this if that would help.

We also support the innovations of elective hubs and single points of access (SPoAs), so long as they do not embed outdated models of care, and provided they enshrine patients' rights and the professional duties of primary eye care clinicians in supporting patients through these pathways. We are developing guidance to support local primary eye care communities in early and transparent engagement in the development of local SPoA models for the benefit of local patients and populations. We will publish this shortly. Finally, none of the hospital reforms will be sustainable without the primary eye care sector which manages and treats 95% of the nation's eye care needs. That is the base of the eye care pyramid on which all else depends.

We hope you will ensure the important role of NHS primary eye care – including as the essential first point of contact for eye conditions and in the delivery of MECS/CUES, glaucoma follow up and other essential care – is recognised within the 10 Year Health Plan (and subsequent planning guidance) and look forward to its publication and future success.

Yours sincerely



Dr Gillian Rudduck
President
The College of Optometrists



Paul Carroll
Chair
OFNC

Copies of this letter go to Marsha de Cordova MP and Louisa Wickham National Clinical Director for Eye Care at DHSC/NHS England

Note: OFNC is comprised of The Association of British Dispensing Opticians (ABDO), The Association of Optometrists (AOP), The Federation of Optometrists and Dispensing Opticians (FODO) and a representative from the BMA.