



A Guide to NHS Eye Care Services in Wales

Briefing – Spring / Summer 2026

Overview

Optometry practices (opticians/optometrists) are one of the four NHS primary care contractors in Wales, alongside GPs, dentists, and community pharmacies. They play a crucial role in preventing avoidable blindness through early detection, treatment, advice, and referral where necessary. Services are delivered through community-based practices, including domiciliary provision for housebound patients.

Optometrists are registered healthcare professionals trained to detect eye disease and signs of systemic conditions such as diabetes and hypertension. Dispensing Opticians (DOs) are registered healthcare professionals who support patient care through fitting and supply of spectacles and lenses, and - following additional training - can support extended NHS services including urgent eye care and low vision services.

Key Messages for Policymakers

- Primary care optometry in Wales is **highly effective and scalable**
- Further **digitalisation** would unlock significant efficiency and capacity
- **Public awareness campaigns** are essential to maximise uptake and prevention
- **Workforce investment and funding parity** will enable services to expand safely

Wales General Ophthalmic Services (WGOS)

WGOS is the framework under which NHS optometry services are delivered. Following contract reform in October 2023, Wales now has the most developed primary care optometry model in the UK.

Over **200,000 additional appointments** have been created across 2024/25 and 2025/26, significantly relieving pressure on hospital eye services and improving access to care closer to home. The below details the published data for 2024/25 with 2025/26 data to be published in the next few months:

WGOS Pathway	2023/24 Activity	2024/25 Activity	Additional Appointments Created in 2024/25
WGOS 1	841,446	865,704	24,258
WGOS 2	243,445	280,256	36,811
WGOS 3	8,393	8,795	402
WGOS 4	0	2,520	2,520
WGOS 5	0	26,304	26,304
Total			90,295



WGOS 1 – NHS Sight Test

Provided by all NHS optometry practices. Sight tests assess vision, identify eye disease, and include public health advice (e.g. smoking cessation, diabetes risk).

Key issues and improvements

Area	Current challenge	Opportunity
Public awareness	Many eligible patients are unaware of entitlement (e.g. children, people over 40 from Black or Asian backgrounds)	National public health campaign to increase uptake
Children's eye care	Only around one-third of children access regular eye tests	Targeted school-age awareness programme
Administration	Payments rely on outdated paper forms	Digitised, updated claim and data capture system
Workforce	Specific patient groups must have spectacles dispensed by a qualified professional. Low numbers of DOs in Wales mean these patients will need to be seen by an optometrist.	Development of DO apprenticeships in Wales

WGOS 2 – Urgent Eye Care and Referral Avoidance

Provides urgent eye care and supports decision-making that prevents unnecessary hospital referrals. Services are free to all patients, regardless of NHS sight test eligibility. All NHS practices, including domiciliary providers, offer this service. NHS signed orders introduced in April 2026 further enable timely treatment within primary care.

Key issues and improvements

Area	Current challenge	Opportunity
Public awareness	Only 53% of patients would contact an optometrist for urgent eye problems	Public campaign promoting optometry as first contact
Digitalisation	Paper claims and signed orders	Digital claims and electronic signed orders
Workforce	Suitably qualified Contact Lens Opticians (CLOs - DOs with additional qualifications) can provide urgent eye care for suitable patients	Introduction of DO apprenticeships and extended training pathways to become CLOs
Signed Orders	No access to Electronic Prescription Service (EPS) potentially affecting speed of treatment for housebound patients	Enable EPS for optometry signed orders



WGOS 3 – Low Vision Service Wales

Supports people with impaired sight, even when wearing spectacles. The service provides assessment, advice, aids (e.g. magnifiers, lighting), and referrals for wider support. It is delivered in both practice and domiciliary settings. Suitably qualified optometrists can now certify vision impairment within primary care, reducing delays associated with hospital referral.

Key issues and improvements

Area	Current challenge	Opportunity
Patient awareness	Low confidence in optometry support for low vision	Awareness campaign highlighting available support
Processes	Delays in equipment provision and payments	Streamlined, digital end-to-end process
Workforce	Limited number of trained providers	Expansion of DO apprenticeships and training routes

WGOS 4 – Glaucoma and Medical Retina Filtering and Monitoring

Specially qualified optometrists refine referrals of patients with suspected glaucoma or medical retina conditions to ensure that only the correct patients are referred into secondary care and support appropriate reduction in waiting lists.

Specially qualified optometrists monitor patients with stable long-term eye conditions, allowing many to avoid routine hospital appointments, supporting secondary care capacity, and receive care closer to home. The high-level KPIs set during optometry contract reform include a reduction of 30,000 referrals into secondary care and a shift of 35,000 follow-up appointments per annum from secondary care into optometry practices.

Key issues and improvements

Area	Current challenge	Opportunity
Digital records	Long-delayed rollout of OpenEyes EPR has delayed the implementation of all pathways in some Health Boards	Accelerated implementation to support safe discharge of patients for monitoring
Payments	Microsoft Form-based claims – increased administrative burden due to double-keying	Integrated digital payment system alongside EPR
Premises/ Equipment	Services require additional (costly) equipment and practice may need to relocate to accommodate. No access to premises improvement grants	Parity of funding with GPs and pharmacies
Workforce	Limited number of trained providers	Further expansion of training placements



WGOS 5 – Independent Prescribing

An increasing number of optometrists are qualified independent prescribers, enabling timely treatment and reducing reliance on hospital and GP services. Domiciliary prescribers provide vital support to housebound and vulnerable patients.

Key issues and improvements

Area	Current challenge	Opportunity
Payments	Manual Microsoft Form claims increased administrative burden due to double-keying	Automated digital payment processes alongside EPR
Prescriptions	No access to Electronic Prescription Service (EPS) – prescriptions are handwritten	Enable EPS for optometrist prescribers

For Further Information:

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