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Optometry independent prescribing during Covid lockdown in Wales

Entry details

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Main Contact Job Title

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Main contact short bio

| An optometrist with experience in hospital and high street optometric practice and who now works predominantly in eye care service development.

Area (Health Board or CCG areas and country in which this research was conducted)

| All health boards in Wales except Hywel Dda UHB

Key words:

| Independent prescribing, Covid-19, urgent eyecare

Funding & commercial relationships

| Nil

Collaborators

| Nil

I am happy for our presentation at the symposium to be recorded and made available for attendees and others to view

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Submission questions

Title of presentation

Optometry independent prescribing during Covid lockdown in Wales

Abstract, must include the following four headings: Purpose, Methods, Results, Conclusions

Purpose

During the Covid-19 lockdown three independent prescribing models were available in different areas of Wales; a commissioned Independent Prescribing Optometry Services (IPOS), independent prescribers that were not commissioned and no independent prescribers available. This allowed a unique opportunity for comparison.

Methods

Practices completed an online survey for each patient episode. Analysis of the data gave insight into patient presentation to urgent eye services and the drugs prescribed by optometrists. Medicines prescribed, medications sold or given, and referral were compared between areas with IPOS (n=2), with prescribers but no IPOS (n=2) and with no prescribers (n=2).

Results

22434 patient episodes from six health boards between 14th April 2020 and 30th June 2020 were analysed. Urgent care accounted for 10997 (49.02%) first appointments and 1777 (7.92%) follow ups.

The most common presenting symptom was 'Eye pain/discomfort' (4818, 43% of urgent attendances). Anterior segment pathology was the most reported finding at first (6078, 55.27%) and follow up (1316, 74.06%). Topical steroids (373, 25.99% of prescriptions) were the most prescribed medications. More medications were prescribed in areas with IPOS (1136, 79.16% of prescriptions) than areas with prescribers but no IPOS. There were more follow up appointments in optometric practice and fewer urgent referrals to ophthalmology in IPOS areas.

Conclusions

Urgent care services were most utilised by patients with discomfort caused by anterior eye conditions. IPOS services enable management of conditions to resolution without referral. Commissioners should recognise reduced burden in ophthalmology and the need for follow up as part of a prescribing service.

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