



Glaucoma Enhanced Referral Service

Service Guide for Practices and Practitioners

November 2025

Primary
+ Eyecare



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Introduction

NHS-funded community eye care services are locally commissioned and distinct from the standard General Ophthalmic Services (GOS) sight test. Delivered primarily by accredited optometrists, they offer specialised, accessible care in community optometry settings, reducing pressure on hospitals and improving patient outcomes. Primary Eyecare Services are a not-for-profit provider that work in partnership with Local Optical Committees (LOCs) and community optometry practices to deliver these high-quality services.

This guide is intended for:

- optometrists and contact lens opticians delivering the service
- support and administrative teams supporting the delivery of the service
- practice managers and owners responsible for service compliance and oversight

Overview

The aim of the Glaucoma Enhanced Referral Service (GERS) is to use the skills of optometrists to accurately identify potential cases of glaucoma or ocular hypertension that require diagnostic assessment in a specialist glaucoma clinic.

The Glaucoma Enhanced Referral Service will:

- ensure that all case finding assessments gather a NICE-compliant clinical data set
- refer only those patients who require specialist assessment, diagnosis, and management to glaucoma clinics
- improve the quality of referrals sent to specialist clinics by ensuring the full collection of diagnostic test results
 - this helps the health system to manage capacity, cost, and carbon emissions
- provide timely local access for patients and avoid false positive referrals
 - this reduces the burdens of anxiety and unnecessary travel on patients

Terminology

Glaucoma Enhanced Referral Services are also known as the following, and these may still be the service names in some local contracts:

- Glaucoma Enhanced Case Finding Service (GECF)

Within this documentation any reference to Glaucoma Enhanced Referral Service (GERS) can be interchanged with Glaucoma Enhanced Case Finding (GECF) as suitable for your local service.



Local Variations & Local Service Summary One-Pagers

This practice guide outlines the standard and/or most common pathway for this service.

However, local variations in access, service delivery, pathways and protocols may apply. It is important to use this guide alongside the local service summary one-pagers, [available here](#).

Please speak to your Primary Eyecare Services Clinical Lead or email hello@referral.support for further information about your local service.

Variations in the GERS pathway include:

- inclusion and exclusion criteria for entry to the service
- visual field test strategy required
- type of applanation tonometer allowed e.g. whether Perkins is allowed
- whether additional diagnostic tests/imaging are required e.g. Fundus Imaging, Optical Coherence Tomography (OCT) with testing protocols suitable for detection of glaucoma, Central Corneal Thickness measurement (Pachymetry)
- accreditation or qualification requirement



Inclusion and Exclusion Criteria

Inclusion Criteria

- Patients registered with a GP in an Integrated Care Board or locality where Glaucoma Enhanced Referral Service is commissioned.
- Patients under the care of a Trust who commission a Glaucoma Enhanced Referral Service.
- Patients 18 years of age or over.
- Sight test findings indicative of a glaucoma-related eye condition that do not require urgent assessment and/or are ineligible for the Glaucoma Repeat Readings Service, such as:
 - suspected structural damage to the optic nerve head
 - IOP of 24mmHg or more
 - characteristic visual field defects
 - narrow anterior chamber angles
- Patients referred from a sight test at a non-participating optometry practice, in line with the local glaucoma pathway stipulations.
- Patient whose referral has been redirected following referral management

Exclusion Criteria

- Patients registered with a GP in an Integrated Care Board or locality where Glaucoma Enhanced Referral Service is not commissioned.
- Patients under 18 years of age.
- Presentations that require urgent or emergency referral to secondary care.
- Patients who enter Glaucoma Repeat Readings Service (GRR) should complete their care in the GRR pathway resulting in discharge or referral to secondary care. The GRR pathway does not refer into GERS.

Domiciliary Patients

Please refer to local service summary one-pagers to confirm whether domiciliary service provision is specifically excluded.

- To qualify for a domiciliary GOS sight test, the patient must fall into one of the NHS eligibility categories and be unable to leave home unaccompanied.
- The equipment requirements for domiciliary provision remain as stated in the equipment list below.
- Further information on delivering domiciliary services can be found here: [Domiciliary Details](#)



Entry to the Service

Self-Presentation

- Patients cannot self-present to these services.

Directly from a routine sight test

- Patient identified as suitable for service by an optometrist during a sight test.

Intra-Practice Referral

- A non-accredited optometrist refers to an accredited optometrist within the same practice.

Inter-Practice Referral

- A non-accredited community optometry practice refers to a local accredited community optometry practice.

Referral from other Health Care Professionals or Screening Services

- Referral from Diabetic Eye Screening Program.
- Referral from General Medical Practitioners.

Primary Eyecare Services Care Navigation Service

- In localities where ophthalmology referrals are managed and triaged through Primary Eyecare Services Eye Care Navigation Service.
- Primary Eyecare Services collects Glaucoma Enhanced Referral Service appointment availability within local practices on a monthly basis, allowing the Primary Eyecare Services Eye Care Navigation Service to allocate GERS episodes to the patient's chosen accredited community optometry practice via the IT Platform.



Service Delivery

The service will identify cases of ocular hypertension, primary angle closure disease, suspected open angle glaucoma, and open angle glaucoma that require specialist assessment, diagnosis, and management by carrying out the following:

Patient history	To include identification of risk factors for glaucoma
Anterior chamber assessment	Peripheral anterior chamber configuration and depth assessments using Van Herick grading, Redmond-Smith technique, gonioscopy or AC-OCT
Visual field assessment	Central visual field assessment using standard automated perimetry (full threshold or supra-threshold)
Optic nerve head assessment	Dilated optic nerve assessment and fundus examination using stereoscopic slit lamp biomicroscopy
Intraocular pressure (IOP) measurement	Using Goldmann-type applanation tonometry (Review local service summary but Perkins applanation tonometry is also often acceptable)

Some services may require the following test(s) in addition:

Central corneal thickness measurement	Pachymetry by ultrasound or OCT methods
Optic nerve head imaging	Imaging by fundus photography or OCT

Service Outcomes

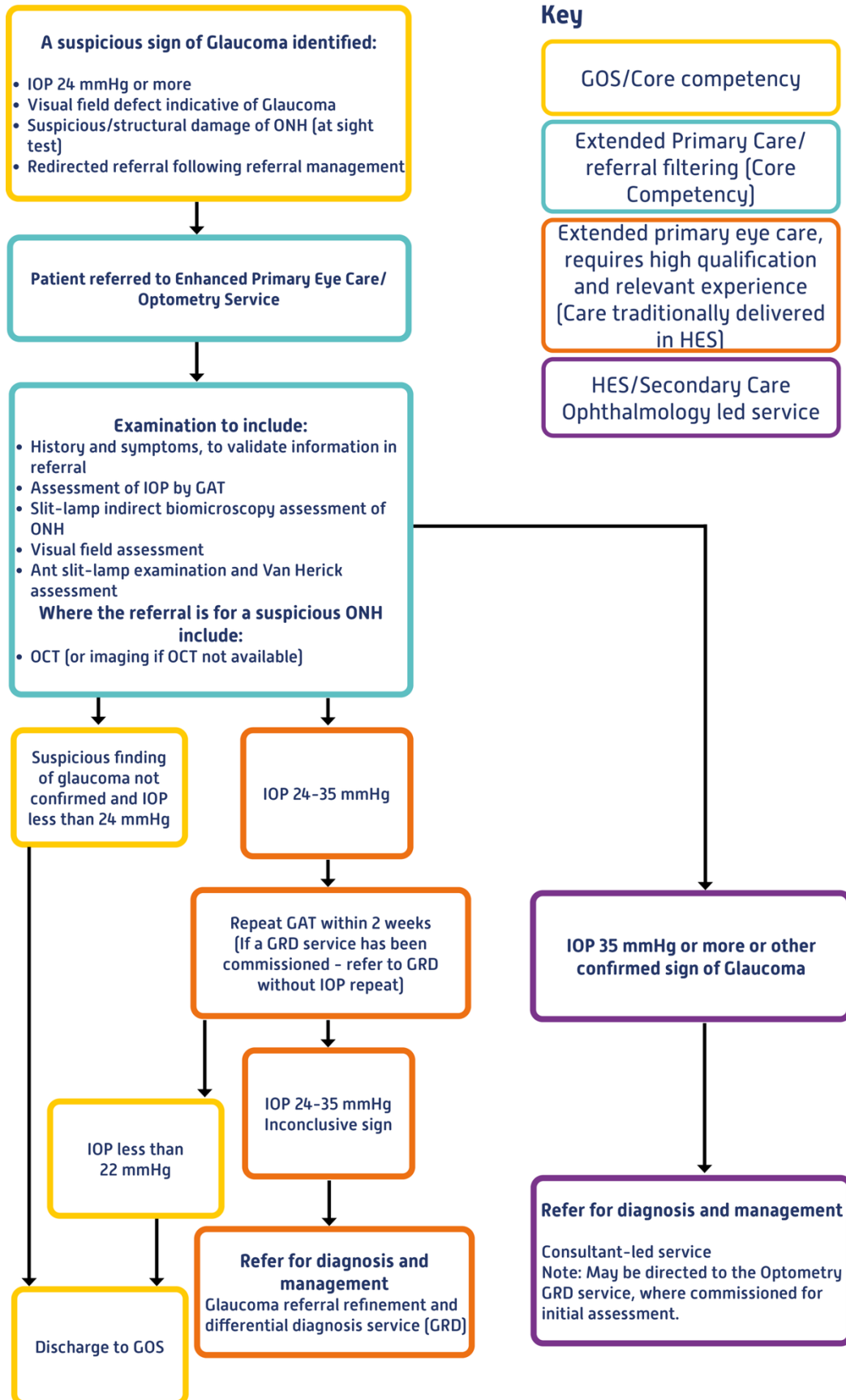
Following completion of the service pathway, outcomes are as follows:

- discharge with advice to continue with routine sight testing at an appropriate frequency
- refer with appropriate urgency to a glaucoma specialist service with all relevant clinical detail.

The patient should be informed of the outcome and expected next steps and offered sources on further information and support (see Additional Resources) in line with [Eye care support pathway](#) principles.



Service Pathway Diagram





Failed to Engage, Did Not Attend, and Was Not Brought Policies

Provision of community eye care services requires practices to manage and record all instances of patient non-engagement or non-attendance to appointments.

For information about Primary Eyecare Services Failed to Engage (FTE), Did Not Attend (DNA) and Was Not Brought (WNB) Policies, please [click here](#).

Patient Feedback and Equality and Diversity Monitoring

- Patient feedback is crucial for our community eye care services to demonstrate the value of services and to enable service improvements.
- Please encourage all patients to complete patient feedback.
- Equality and Diversity information is also requested.
- Feedback is usually collected via text or email and comprises of a few short questions.
- If a patient can't complete patient feedback through SMS or email, you can support them in completing this: [Completing PROMS where a patient has asked for support](#).

Completing an episode through the IT platform

All clinical episodes must be recorded on the Primary Eyecare Service IT platform within 48 hours.

Please note that the service needs to be selected in the Practice Profile in order to complete an episode through the IT platform. [My Services - checking, adding and removing services](#)

Please use the following link for a step-by-step guide to completing an episode through the IT platform. This guide can be saved as a PDF and/or printed as required.

The Primary Eyecare Services IT platform requires the recording of data appropriate for service delivery. This does not replace the need to keep a full record of the clinical episode on the Practice Management System (PMS).

[Completing the Glaucoma Enhanced Referral Service module for Primary Care](#)



Audit and Quality Assurance

Primary Eyecare Services has a comprehensive programme of audit and quality assurance in place to ensure that all services are delivered in accordance with national and local standards.

Clinical leads undertake structured service level audits every quarter to monitor performance at a practitioner and practice level to ensure compliance with agreed protocols. Audit reports review activity levels, appointment types, referral patterns, access timeframes, clinical outcomes, and patient-reported feedback (PROMS/PREMS).

Where audit findings highlight outliers or concerns, clinical leads will work with practices and practitioners to identify the cause and to agree any indicated action plan.

Practices have access to their own service data via the [Practice Audit Dashboard](#), enabling practices to monitor their performance benchmarked against national data.

Subcontractor Performance Management

Primary Eyecare Services monitors the performance of subcontracted community optometry practices through regular audits and a structured breach process. This supports service quality, patient safety, and contractual compliance. Further details are available [here](#), or in the [Primary Eyecare Services Policy Pack](#).



Requirements for Providing Service

Please find below the equipment and accreditation required for community optometry practice and practitioners to provide community eye care services and access the Primary Eyecare Services IT platform. These requirements should be read alongside the [Primary Eyecare Services Policy Pack](#).

Equipment

All practices providing the service are required to have the following equipment available:

- access to the Internet
- means of indirect ophthalmoscopy (Volk / headset indirect ophthalmoscope)
- slit lamp
- Goldmann-type Applanation Tonometer (or Perkins Applanation Tonometer if permitted within the local service)
- distance test chart (Snellen/LogMAR) / Near test type
- automated full threshold or supra-threshold visual fields testing equipment that can produce a printed report
- appropriate ophthalmic drugs
 - Mydriatic / Anaesthetic / Staining agents

Where commissioned:

- Fundus Imaging
- Optical Coherence Tomography (OCT) with testing protocols suitable for detection of glaucoma
- Contral Corneal Thickness measurement (Pachymetry)

Clinical Accreditation

Optometrists

All participating practitioners will have the core competencies as defined by the General Optical Council (GOC).

Participating practitioners are expected to keep their knowledge and skills up to date which may include:

- including the provision of community eye care services in GOC personal development plans
- this may be supported [Primary Eyecare Services Professional Development](#) webpage

Participating GERS practitioners must complete the WOPEC LOCSU Glaucoma courses, including the OSCE examination (Level 2) or Professional Certificate in Glaucoma or Local Accreditation



A code to allow optometrists to complete the [WOPEC](#) accreditation can be provided by your [Local Optical Committee](#).

Contact Lens Opticians

Contact Lens Opticians (CLOs) with WOPEC LOCSU Glaucoma accreditation (Level 1+2) can perform applanation tonometry as part of the Glaucoma Enhanced Referral Service, but an optometrist is required to interpret test data and provide the clinical outcome.

Pre-Registration Optometrists

Pre-registration Optometrists (pre-regs) cannot carry out Glaucoma Enhanced Referral Service assessments.

Practice Requirements

All practices providing the service are expected to have at least one accredited practitioner regularly available to provide the service.

Full practice requirements and onboarding guidance can be found here:

[Practice Onboarding](#)

Practitioner Requirements

Full practitioner requirements and onboarding guidance can be found here:

[Practitioner Onboarding](#)

Practice and practitioner compliance and practitioner accreditation requirements are continuous and ongoing; should the practice or practitioner no longer satisfy these requirements then they must inform Primary Eyecare Services at hello@referral.support and cease providing this service. Guidance on this process is available on the [Service Withdrawal](#) help page.



Failsafe

Effective management of patients requiring glaucoma enhanced referral is essential. It is crucial that all necessary actions are completed to ensure continuity of care and compliance with clinical governance standards.

Primary Eyecare Services has a dedicated Failsafe Team that provides comprehensive support to practitioners, ensuring patients are scheduled and seen within appropriate clinical timeframes.

To ensure the Failsafe Team communications are received, it is essential to [keep all contact information up to date](#) . This includes ensuring that designated staff members responsible for the low vision service are correctly listed and able to receive correspondence.

Community optometry practices are expected to respond to emails from the Failsafe Team, providing explanation for any delays in updating patient episodes within the required timeframe.

If you require Failsafe Team support, please contact the team on pes.quality.pes@nhs.net



Additional Information

Payment Process

For information about invoicing and how to track payments [click here](#). Queries should be directed to hello@referral.support or via the 'blue bubble'.

Service Issues and Complaints

Primary Eyecare Services have a dedicated Quality Team who manage service issues and complaints.

To raise any concerns about this service, please contact quality@primaryeyecare.co.uk

Updating Practice & Practitioner Information

Please refer to the dedicated help page for information on practice and practitioner profiles, updating information and making annual declarations:

[Practice and practitioner profiles - IT Platform](#)

Supporting Materials

- [Glaucoma information - Look after your eyes](#)
- [Glaucoma UK – Eye Clinic Referral Leaflet](#)
- [Eye care support pathway](#)

Support Pages

- [Primary Eyecare Services Policy Pack](#)
- Glaucoma Help Guides:
 - [Glaucoma Services - \(optom-referrals.org\)](#)
 - [Completing the Glaucoma Enhanced Referral Service module for Primary Care](#)
 - [Glaucoma Enhanced Referral Service Local Service Summary One-Pager Variations](#)
- Support Pages:
 - [My Services - checking, adding and removing services](#)
 - [Practice Onboarding](#)



- [Practitioner Onboarding](#)
- [Practice and practitioner profiles - IT Platform](#)
- [Service Withdrawal](#)
- [Changing Email Preferences - IT Platform](#)
- [Practice Invoices and Reconciliation](#)
- [Failed to Engage \(FTE\), Did Not Attend \(DNA\) & Was Not Brought \(WNB\) Policy](#)
- [Domiciliary Details](#)
- [Completing PROMS where a patient has asked for support](#)
- **Additional Links:**
 - [Primary Eyecare Services Professional Development](#)
 - [Wales Optometry Postgraduate Education Centre - WOPEC](#)
 - [Local Optical Committee](#)

Further Information and Support

For further information, [click here](#) to view all our help guides.

Further queries should be directed to hello@referral.support or via the IT Platform 'blue bubble'.