# **Service Summary**



## **Urgent Eyecare Service (CUES)**

#### **Inclusion & criteria**

The aim of the Covid-19 Urgent Eyecare Service (CUES) is to ensure people can access urgent eyecare within primary care during the coronavirus pandemic. Presenting symptoms will typically include a red or painful eye, foreign body, sudden change in vision, or flashes and floaters which might suggest retinal detachment.

#### **Referral & Entry points**

Access to the service is restricted to telephone booking only to:

- Identify people with Covid-19 symptoms, at risk /self-isolating people to signpost to appropriate services
- Offer telephone/ video consultation and self-care advice or provide signed orders remotely, where appropriate
- Offer face to face appointments with optometrist following telephone/video consultations for those who are presenting with urgent and higher risk symptoms (observing PPE guidance and social distancing advice)
- Signpost to emergency services, as appropriate.

Patients should be advised to contact a participating local optical practice directly, participating practices can be found at <a href="http://primaryeyecare.co.uk/find-a-practice/">http://primaryeyecare.co.uk/find-a-practice/</a>. The first optical practice contacted will triage and direct a patient to the most appropriate clinician for their condition if a face to face appointment is required.

#### **Consultation outcomes**

- The practitioner manages the condition and offers the patient advice and/or prescribes/recommends medication.
  Management may include a minor clinical procedure e.g. foreign body removal. A remote follow-up consultation may be necessary.
- Referral to eye casualty at the local hospital eye service.
- The condition (and subsequent referral) is non-urgent and is safely delayed until following the pandemic. A further appointment is recommended e.g. 4-6 months.
- The practitioner has concerns that the patient may have a systemic condition and makes a referral to their GP.
- Patient referred non-urgently for further investigation and/or treatment in line with local referral pathways and protocols.
  Managing the patient expectations relating to appointment availability in the current pandemic.
- Where appropriate patients given advice on self-care.

### **Supply & Use of Medicines following consultation**

- Where a medicine is required, this will normally be supplied or prescribed by the optometrist, as part of the consultation, through the issue of a signed order for supply by the community pharmacist of the patient's choice; or by directly supplying or selling (where appropriate), "Pharmacy only" (P) medicines and General Sales List (GSL) medicines, and the following POMs: chloramphenicol, cyclopentolate hydrochloride, fusidic acid and tropicamide.
- Independent optometrist prescribers will ideally have access to FP10 prescription, for dispensing by a community pharmacist.
- An approved list of medicines has been agreed. All participating clinicians will only prescribe, supply or issue signed orders for medicines included on the approved formulary, unless there is a clinical reason not to do so.