

A Manifesto for Better Sight and Hearing



The annual combined cost of sight loss, blindness and untreated hearing loss to the UK economy is £62 billion. That cost will only increase as the population ages. We need to be doing everything we can to make sure everyone experiencing or at risk of sight or hearing loss can get the care they need.

Optometrists and audiologists, and their other clinical colleagues, are already delivering vital NHS care on the high street but we could be doing even more.

With a Westminster election underway, Specsavers are calling on politicians and policymakers to commit to some important changes that together will make it easier for more people to access the care they need, closer to home, at the earliest opportunity, and at a lower cost per patient.

The changes we are calling for can be delivered at scale and at pace, without big reforms to the health system or significant additional investment from the NHS, providing real benefits to patients in a matter of months, not years.

Our Key Asks

1. Eye health

- a. Put in place Community Minor and Urgent Eye Care Services for the treatment of minor eye conditions, available from NHS opticians in every community throughout England to **eliminate the 'postcode lottery' in access to care.**
- b. Make full use of the skills and capabilities of optometrists and their clinical teams by **detecting, managing, and monitoring glaucoma in the community** through a single, standardised pathway integrating hospital eye services and high-street opticians.
- c. Enable **equitable access to eye care for all by removing unnecessary barriers** to eye health services for people who can't leave their own homes unaccompanied, including those residing in care homes, and for people experiencing homelessness who are not in receipt of state benefits.

2. Hearing health

- a. Introduce a **nationally commissioned primary care audiology service** for adults of all ages, enabling everyone who needs NHS hearing care to refer themselves to a hearing care provider in the community, exactly as they do for problems with their eyesight.
- b. **Commission the removal of ear wax** by primary care audiologists, in the community, everywhere so that ability to pay is not a barrier to receiving care.
- c. Support efforts to **encourage hearing aid use** as a means of facilitating life-long learning, continuing employment, maintaining independence and social engagement.

