



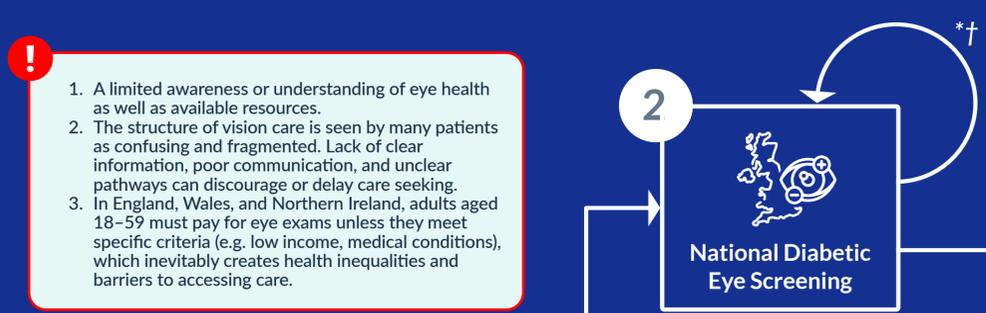
Public Health System

The National Health Services (NHS) provides free or subsidized eye care and treatment to eligible individuals, primarily through NHS-funded sight tests, hospital eye services, and community centres.

Private Health System

Offers faster access to eye exams, treatments, and surgeries for those paying out-of-pocket or via private insurance, often through opticians or private clinics.

First point-of-care to screening



- 1. A limited awareness or understanding of eye health as well as available resources.
- 2. The structure of vision care is seen by many patients as confusing and fragmented. Lack of clear information, poor communication, and unclear pathways can discourage or delay care seeking.
- 3. In England, Wales, and Northern Ireland, adults aged 18–59 must pay for eye exams unless they meet specific criteria (e.g. low income, medical conditions), which inevitably creates health inequalities and barriers to accessing care.

Referral to specialist

Triage by specialist



If sight-threatening damage is observed

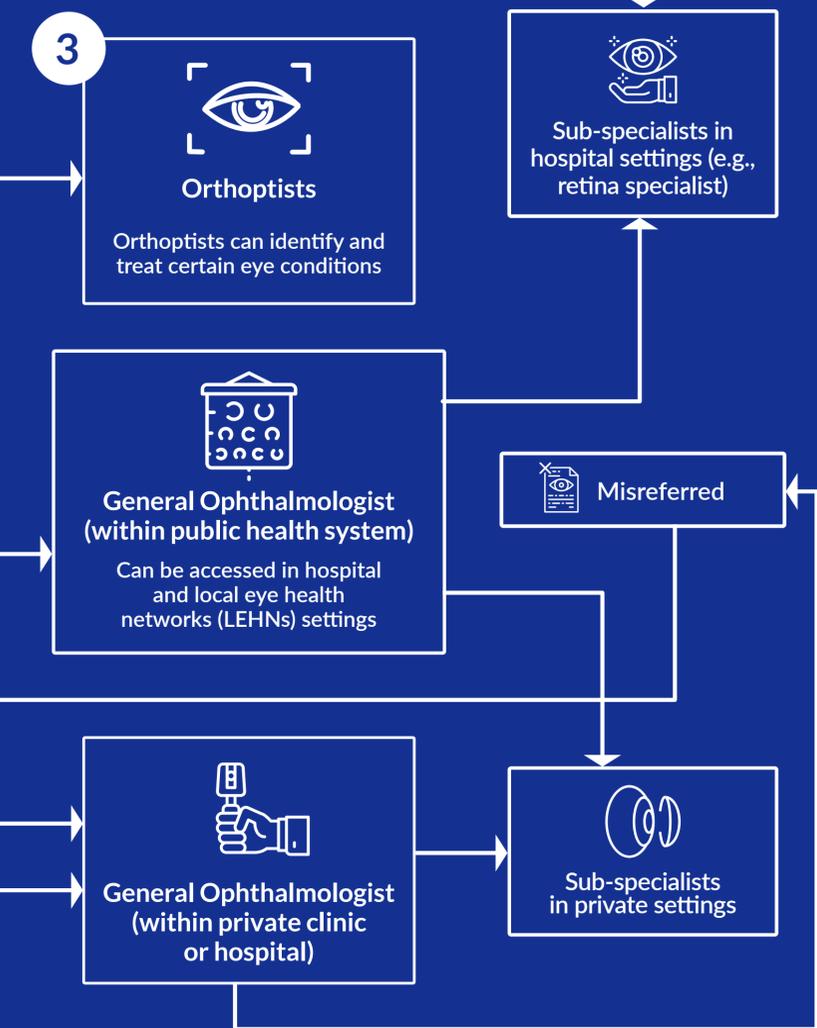
If ocular condition is suspected

Referral

If ocular condition is suspected

Confirmation of diagnosis and treatment

- 4. Access to specialists may be limited based on region, such as in rural areas, and lead to longer waiting times
- 5. NHS eye care services are experiencing growing demand, particularly for age-related conditions like cataracts and macular degeneration.



*If no signs of retinal damage is detected, screening is repeated in 1 to 2 years.
† If there is evidence of minor changes, repeat screening is advised within 1 year or less.