



# A sustainable ophthalmology workforce

## Key messages

- Despite surging demand for NHS ophthalmology services and very high levels of graduate interest in the specialty, growth in ophthalmology training places has stagnated over the last decade. With insufficient consultants to meet patient need, waiting lists have risen steeply.
- Along with continued efforts to increase efficiency, we believe a phased increase of 382 training places across the UK by 2031 – 285 in England, 37 in Scotland, 36 in Wales and 24 in Northern Ireland – is essential to ensure the long-term sustainability of NHS ophthalmology services.
- This must be complemented by local investment to ensure sufficient clinic and theatre space, and consideration should be given to the impact of growing independent sector provision of NHS cataract surgery on training opportunities in England.

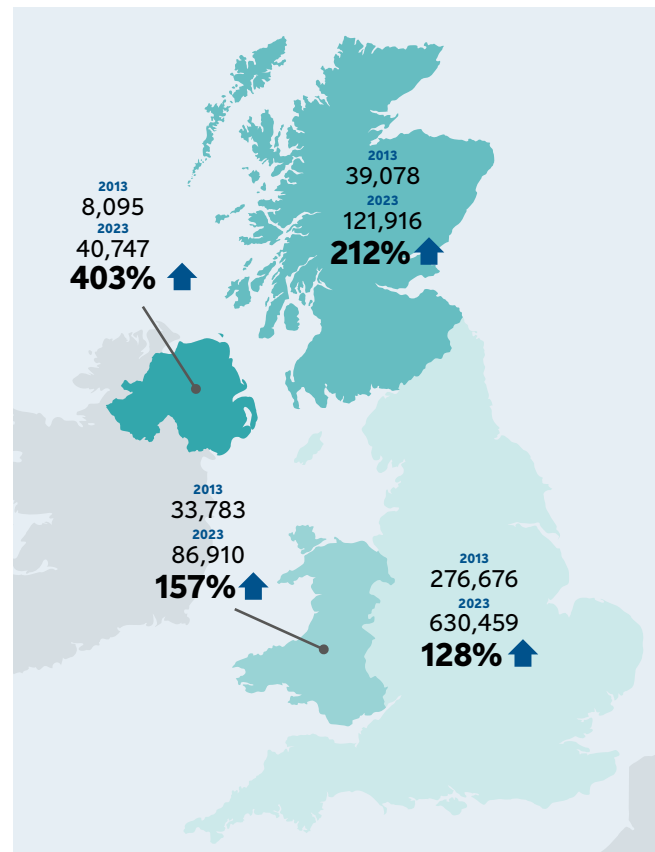
## Insufficient supply to meet demand

Ophthalmology is the busiest outpatient specialty in the NHS, with over 8 million attendances in England and almost a further 1 million in Scotland, Wales and Northern Ireland in 2022/23.<sup>1-4</sup>

Despite impressive innovation to improve efficiency – whether that’s the use of virtual clinics, high-volume cataract hubs, supporting the full multidisciplinary team to work to the top of their licence or increasingly making use of artificial intelligence – ophthalmology services are struggling to meet the rising tide of demand.

Our recent survey of clinical leads in NHS ophthalmology departments revealed that just a quarter feel able to deliver a service that generally met the needs of patients in their area. Meanwhile, NHS data show that backlogs have increased substantially over the last decade (see figure 1), with Northern Ireland in a particularly alarming situation. Longer waits for a diagnosis and treatment inevitably increase the risk of avoidable, irreversible sight loss.

Figure 1: Ophthalmology waiting lists in each UK nation, 2013-2023



With demand set to rise over the next 20 years due to our aging population,<sup>9</sup> this situation is set to worsen. Indeed, in 2017 we estimated that the number of people with glaucoma and neo-vascular age-related macular degeneration would rise by 44% and 59%, respectively, by 2035.<sup>10</sup>

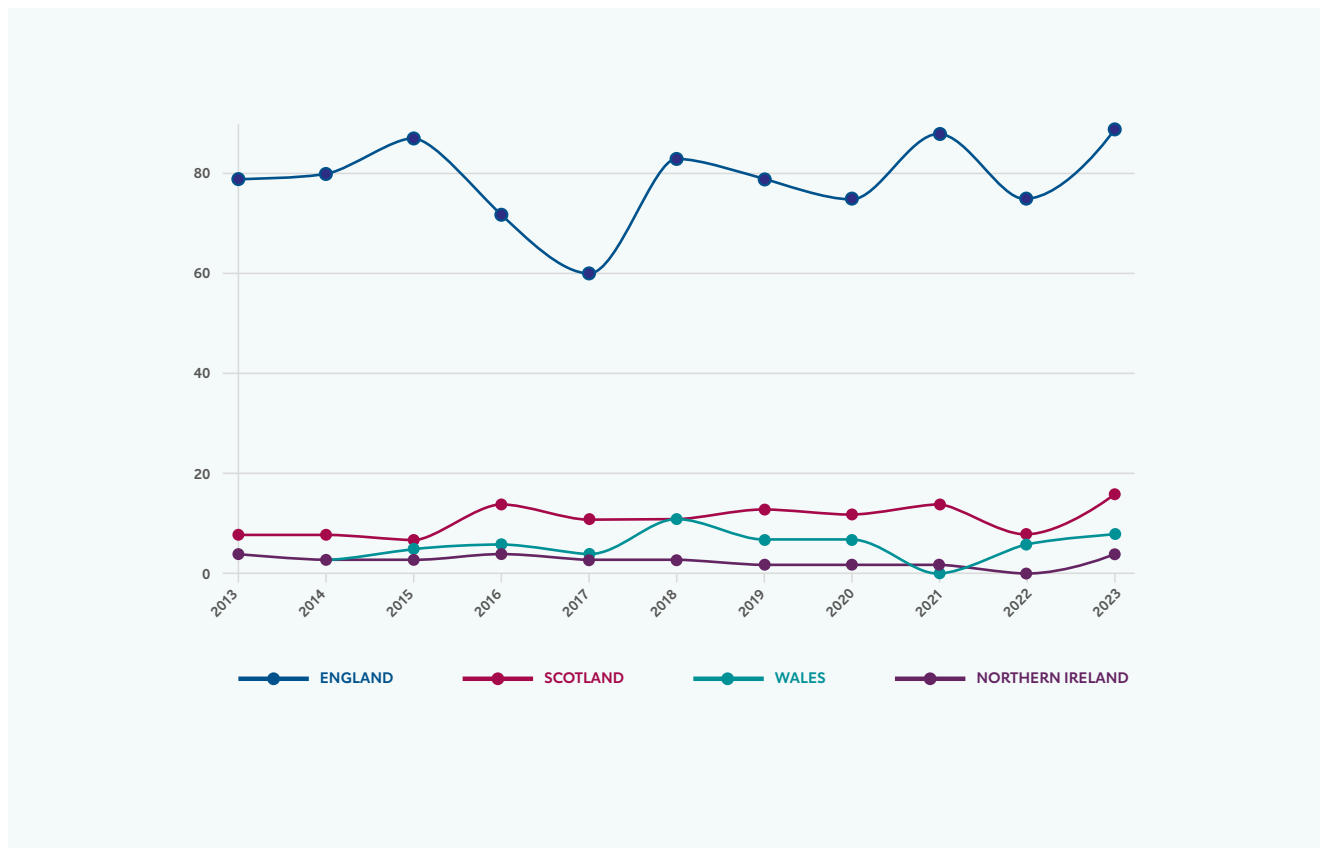
It is worrying then that the number of UK-based ophthalmologists on the GMC Specialist Register only grew by 350 (17%) between 2012 and 2021, with Wales experiencing a decrease.<sup>11</sup> As table 1 shows, no UK nation is currently meeting the consultant to population ratio of 3 to 100,000 that we believe is needed to deliver NHS hospital eye services.<sup>12</sup>

**Table 1: The 2023 UK consultant ophthalmologist workforce**

	England <sup>13</sup>	Scotland <sup>14</sup>	Wales <sup>15</sup>	Northern Ireland <sup>16</sup>
Full time equivalent (FTE) consultants	1,465	131	62	36
FTE consultants/100,000 population	2.56	2.40	1.97	1.88
Consultant shortfall	285	37	36	24

A key reason for this is that volume of training places available in the UK has stagnated over the last decade (see figure 2). This is not for lack of interest from graduates. The competition ratio for recruitment into the ophthalmology training programme at ST1 is one of the highest of any medical training programmes, with applications per post surging from 4.5 in 2013 to almost 10 in 2023.<sup>17</sup>

**Figure 2: Number of ophthalmology training places at ST1, 2013-2023<sup>18</sup>**



## Our position

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Following analysis and consultations with training programme directors, we – the representative voice for ophthalmologists in the UK – believe that the following are needed to ensure an ophthalmology workforce fit for the future:

- An additional 382 training places by 2031 to meet the minimum recommended 3 FTE consultant to 100,000 population ratio. This equates to 285 extra posts in England, 37 in Scotland, 36 in Wales and 24 in Northern Ireland.
- Expansion of ongoing initiatives such as the Portfolio Pathway, Ophthalmic Local Training Programme, and Ophthalmic Practitioner Training Programme.
- A drive to improve the retention of ophthalmologists, including by better supporting SAS doctors in their career development and progression.
- Continued commitment to boosting efficiency via, for example, supporting primary care optometrists to be first contact practitioners, upskilling multidisciplinary teams, and leveraging technology and artificial intelligence.

Despite the success of efficiency initiatives, such as that shown in the adjacent box, these alone are insufficient to meet current and future patient needs and to prevent irreversible sight loss. Ophthalmologists remain central to providing patient care – overseeing the delivery of care, undertaking complex diagnoses, performing surgical procedures and designing services. Addressing the shortage in this vital workforce is imperative.

Although ambitious, we believe that the most sustainable and viable way to bolster long-term capacity is through a phased increase in ophthalmic training places between 2025 and 2031. An illustration of how this could be achieved is available in [annex 1](#).

Capacity, investment and support to enable these additional placements must be determined locally, with consideration given to available clinic and theatre space and, in England specifically, the impact of growing independent sector provision of NHS cataract surgery. It will be imperative that we all – ophthalmology departments, policymakers, training programme directors and NHS providers – work collaboratively to realise this goal.

### Revolutionising AMD treatment

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In 2008, it became possible to manage previously untreatable conditions such as wet AMD thanks to the NHS' introduction of intravitreal injection therapy with licensed anti-VEGF drugs.<sup>19</sup> Naturally, demand rose and ophthalmology embraced greater use of the multidisciplinary eye care team, supporting the majority of the 608,000 injections given in 2019/20 to be safely performed by nurses and other clinicians.<sup>20</sup>

## Further reading

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- [Annexes, including methodological notes](#)
- [Facing workforce shortages and backlogs in the aftermath of COVID-19: The 2022 census of the ophthalmology consultant, trainee and SAS workforce, March 2023](#)
- [Ophthalmic Specialist Training](#)

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