



The **ROYAL COLLEGE** of  
**OPHTHALMOLOGISTS**

# A three-point plan to tackle the crisis in eye care in Scotland

March 2026

Nearly 200,000 people in Scotland live with sight loss, and the economic impact of sight loss across the UK is estimated at £25 billion each year.<sup>1,2</sup> High-quality ophthalmology services are essential to preserving vision, supporting independence and reducing pressure on the wider economy.

However, ophthalmology services in Scotland are under severe strain. Workforce shortages, poor IT systems and a lack of system focus on follow-up care mean many people are waiting too long for treatment. Without urgent action, more patients risk avoidable sight loss.

## The next Scottish Government should prioritise three commitments:

- 1. Expand the ophthalmology workforce** by prioritising an additional 37 ophthalmology training places by 2033, backed by appropriate resourcing.
- 2. Deliver modern digital infrastructure for ophthalmology** through rolling out the OpenEyes electronic patient record to all health boards by April 2027.
- 3. Tackle the “hidden backlog” of follow-up patients,** including through publishing data on follow-up ophthalmology waiting lists and prioritising high flow diagnostic and management centres.

## The scale of the challenge

Ophthalmology services in Scotland are struggling with long waits for patients, particularly outpatient follow-up appointments where efficient treatment is essential to prevent irreversible sight loss.

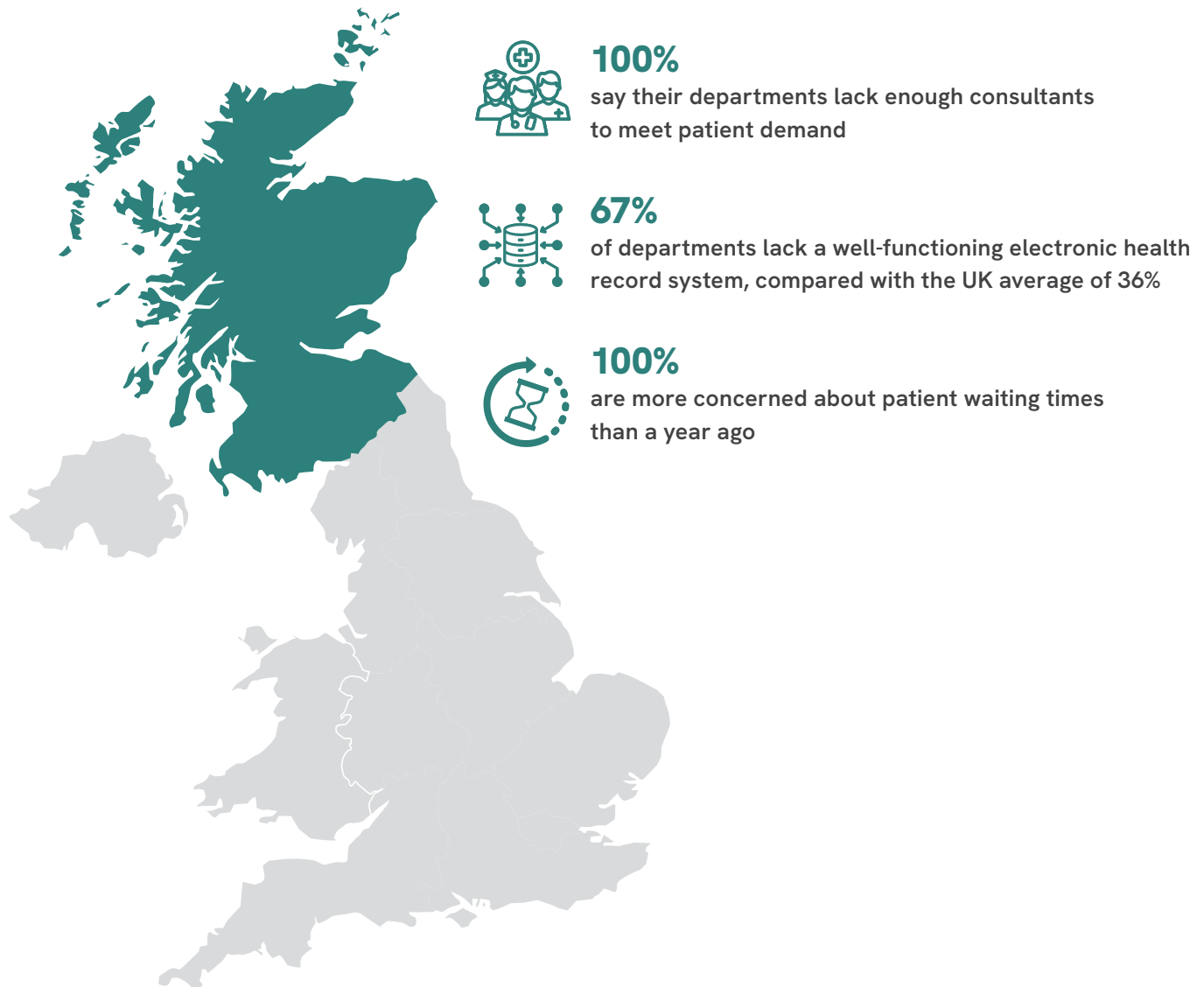
At the end of 2025, 6,701 patients had waited over a year for a first ophthalmology appointment<sup>3</sup> This is despite the Scottish Government pledging that by March 2026 no patient would be waiting longer than a year.<sup>4</sup>

Workforce shortages, poor IT interoperability and a lack of system focus on follow-up waits are all hampering the delivery of effective services for patients.

**“It is almost impossible to deliver positive change for patients when return backlogs are invisible.”**

*Ophthalmology clinical lead,  
Central Belt*

## Evidence from ophthalmology clinical leads across Scotland shows the scale of the challenge facing eye care services:<sup>5</sup>



## The commitments needed

To address these challenges, the next Scottish Government should commit to:

### 1. Expanding the ophthalmology workforce

The Scottish Government should increase ophthalmology training places by 37 by 2033, backed by appropriate resourcing to deliver high-quality training. This will help to address the current shortfall in ophthalmologists in Scotland, based on our recommended 3 per 100,000 population ratio.

Despite chronic workforce shortages, ophthalmology training numbers in Scotland have barely increased for over a decade.<sup>6</sup> Training programmes consistently fill all available posts and waiting lists continue to grow.

In 2024 the Scottish Government announced the largest expansion of training places in NHS history – 153 new posts across 24 specialties – yet ophthalmology saw little increase.<sup>7</sup>

Expanding the ophthalmology workforce must also include investment in multidisciplinary teams, including nurses, orthoptists and hospital-based optometrists.

### 2. Delivering modern digital infrastructure for ophthalmology

Building on its successful introduction in Greater Glasgow and Clyde, the Scottish Government should support the effective rollout of OpenEyes – an electronic patient record and referral system for eye care – to all health boards by April 2027.

Effective eye care depends on clinicians being able to access and share patient information quickly across services. In Greater Glasgow and Clyde, OpenEyes has improved monitoring of treatment patterns, strengthened collaboration between hospitals and community optometrists, and enabled virtual or asynchronous clinics. These changes have increased clinic capacity, allowing patients to be treated more quickly and improving continuity of care.

With support from the Scottish Government, these benefits could be scaled up for patients across Scotland.<sup>8,9</sup>

### **3. Tackling the “hidden backlog” of follow-up patients**

The Scottish Government should place greater emphasis on ensuring patients are prioritised according to clinical need, not simply how long they have been waiting.

Patients waiting for follow-up appointments – particularly for conditions such as glaucoma and age-related macular degeneration – are often at the highest risk of irreversible sight loss if they do not receive timely treatment.

Prioritising high flow diagnostic and management centres is vital. Improving the visibility and management of follow-up waits should also form a key part of the solution. As in Wales, the Scottish Government should publish data on ophthalmology waiting lists that includes both first and follow-up appointments and indicates whether patients have been seen within their clinically appropriate timeframe.

Greater transparency would improve accountability and support health boards to allocate resources more effectively and improve patient care.

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**With the right workforce, digital infrastructure and prioritisation of follow-up care, Scotland can protect patients from avoidable sight loss and ensure ophthalmology services are sustainable for the future.**



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