

ACES

Annual Quality Account

2024/25



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Introduction

About ACES

ACES is a leading, independent provider of NHS ophthalmology services, delivering outstanding patient care across community settings since its founding in 2005. Our mission has always been clear: to ensure timely, compassionate, and high-quality eye care for every patient, without compromise.

Originally established in the East of England as one of the first community-based ophthalmology providers, ACES quickly built a reputation for innovation, accessibility, and clinical excellence. In 2021, ACES was acquired by Lorena Investments Group that owns Optical Express – a respected name in global eye care – marking a pivotal moment in our evolution.

This partnership brought new investment in technology, clinical research, and digital transformation, enabling us to scale with pace while maintaining our patient-first ethos.

Since the acquisition, ACES has grown significantly, becoming a trusted partner to 17 Integrated Care Boards (ICBs) across England. Today, we are proud to deliver a wide spectrum of NHS ophthalmology services, including Cataract Surgery, Glaucoma Care, Oculoplastics, General Ophthalmology, YAG & SLT Laser, Medical Retina, minor ops, and urgent eye care clinics.

Our services are delivered in a mix of community-based diagnostic centres, surgical hubs, and health centre partnerships, ensuring patients can access care closer to home, with shorter waits and excellent continuity.

This strategic growth has been underpinned by a consistent focus on quality, safety, and patient satisfaction. Our team of consultant-led ophthalmologists, specialist nurses, optometrists, and operational staff work collaboratively to uphold the highest standards of clinical governance and patient outcomes.

ACES continues to innovate in ophthalmology delivery, through cutting-edge imaging technologies, and a firm commitment to equity, sustainability, and research.

As we look forward to 2025/26, our role as a key NHS partner in ophthalmology is clearer than ever: responsive, reliable, and relentlessly patient-centred.

Our Values

At Anglia Community Eye Service (ACES), our mission is to provide high-quality, accessible, timely, and patient-centred eye care within community settings. We are committed to reducing waiting times, enhancing patient experiences, and delivering exceptional clinical outcomes through innovation, collaboration, and a deep respect for the individuals and communities we serve. We work as a cohesive, multi-disciplinary network, bringing together diverse expertise to deliver seamless and effective care as one unified team.



Patient-Focused

We are dedicated to delivering personalised, compassionate, and respectful care that prioritises the needs, dignity, and well-being of every patient.



Clinically Excellent

We strive for the highest standards in ophthalmic care by embracing evidence-based practices, continuous professional development, and the use of advanced technologies.



Community Driven

We are committed to improving access to high-quality eye care within local communities, reducing barriers and ensuring timely treatment closer to home.



Accountable & Transparent

We operate with transparency, responsibility, and professionalism, building trust with our patients, partners, and the NHS through ethical and reliable service delivery.



Board Statement on Quality 2024/25

It is with great pride that we present the ACES Annual Quality Account for the 2024–2025 year. This report represents more than just regulatory compliance, it reflects our enduring commitment to delivering the highest quality ophthalmic care to communities across England, and to being transparent, accountable, and proactive in everything we do.

Over the past year, we have continued to expand both the scope and the depth of our services. Now commissioned by 17 Integrated Care Boards, we provide the full range of NHS ophthalmology services, reaching more patients than ever before, closer to home. Our mission remains clear: to offer safe, timely, effective, and compassionate care, tailored to each individual’s needs and delivered by teams who are passionate about what they do.

In 2024/25, we have sharpened our focus on four key pillars of quality: safety, clinical effectiveness, patient experience, and inclusion. We are embedding inclusive care at the heart of our model. We’ve also invested in digital tools, research partnerships, and workforce development, to ensure that every patient benefits from the best possible care, grounded in evidence and innovation.

This Quality Account offers a transparent look at our progress, challenges, and future goals. It highlights the collective achievements of our clinical and operational teams, whose drive for excellence has improved outcomes, reduced waiting times, and enhanced the patient experience at every level. Our staff continue to demonstrate resilience, compassion, and a deep commitment to the people we serve.

As we look ahead, our ambition remains bold: to become the UK’s leading NHS ophthalmology partner, one that is nationally recognised for excellence, equity, and innovation in eye care. With new surgical hubs opening, enhanced integration with primary and secondary care, and the continued support of our parent group and sister company Optical Express and our International Medical Advisory Board, we are building a strong and sustainable future for ophthalmology.

To the best of our knowledge, and in accordance with the regulations governing the publication of this document, the information and data presented in this Quality Account are accurate and validated.



David Mouldsdales
CEO & Chairman

A handwritten signature in black ink, appearing to read 'David Mouldsdales'.



Stephen Hannan
Clinical Services Director

A handwritten signature in black ink, appearing to read 'Stephen Hannan'.



Stewart Mein
Group Finance Director

A handwritten signature in black ink, appearing to read 'Stewart Mein'.

Key Achievements

17

ICB Contracts

+7 vs 2024



34

Clinics

+20 vs 2023/24



20,733

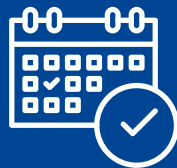
Referrals

+4,485 vs 2023/24



61,880

Appointments



20,837

Treatments

+7,050 vs 2023/24



22 Days

Average Referral
to First Appointment



42 Days

Average Referral
to Treatment



15,386

Cataracts

+5,425 vs 2023/24



99.8%

Surgeries Completed
Without Complication



0.21%

PCR Rate



0.01%

Endophthalmitis

Rate



97.5%

Patients BCVA
of 6/12 or Better



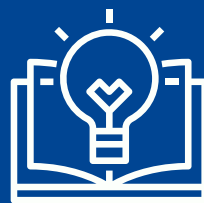
99.1%

Patients Who Would
Recommend ACES
to Friends & Family



37

CPD Events



1,100

Employees





Quality Priorities

veritas

Review of Quality Priorities for 2024/25



Patient Safety & Clinical Outcomes

- We upheld excellent safety standards across a growing number of clinics.
- Posterior capsule rupture rates remained well below national targets / objectives.
- Endophthalmitis rates were kept to a minimum through robust infection control.
- PSIRF was embedded across the organisation, strengthening our learning culture.
- Over 98% of cataract patients achieved 6/12 vision or better.



Workforce Development

- We supported our growing workforce through structured training.
- Delivered accredited qualifications for clinical staff.



Access & Service Expansion

- We ensured patients continued to access care quickly, even as demand increased.
- Services were expanded to 17 ICB areas by year-end.
- New clinics and surgical hubs improved local access and reduced travel times.



Inclusive & Person-Centred Care

- We took key steps to enhance inclusivity for patients with complex needs.
- Autism Awareness Training was delivered organisation-wide.
- Dementia champions were introduced across all clinical locations.



Digital Innovation

- We invested in technologies to drive safe, efficient care.
- Scaled up teleophthalmology for glaucoma and pre-assessments.
- Improved data dashboards to support governance and decision-making.

Quality Priorities for 2025/26

Looking ahead to 2025/26, ACES remains committed to delivering safe, inclusive, and innovative ophthalmic care at scale. As we continue to grow our national footprint, our priorities are focused on strengthening the foundations of excellence while embracing future-facing improvements:

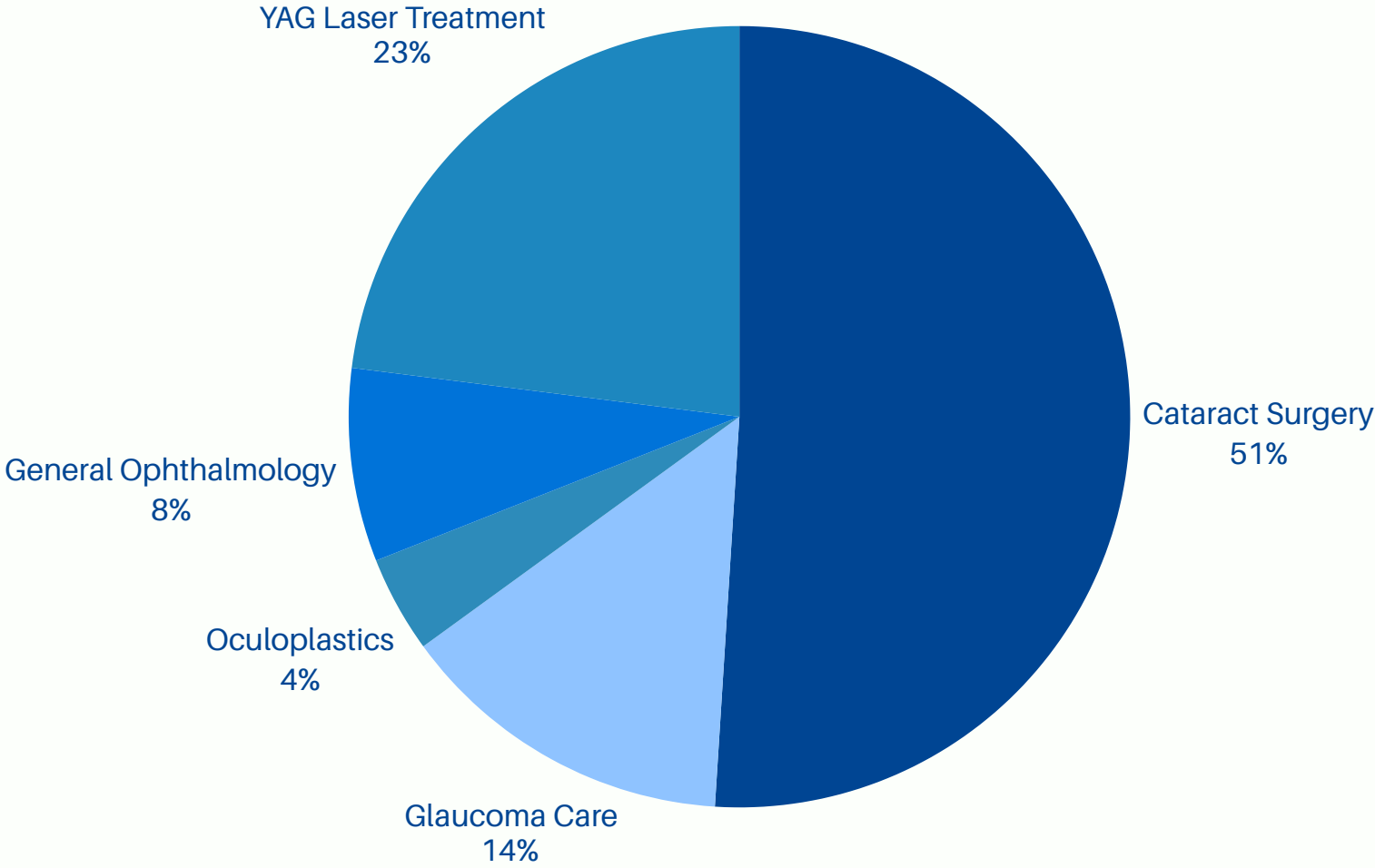
- Expand equitable access by launching services in new regions, prioritising underserved areas and maintaining referral to treatment times.
- Enhance inclusive care delivery through further embedding of autism-friendly pathways, dementia-aware practice, and patient co-production in service design.
- Advance digital maturity, including full EMR integration, use of AI-supported diagnostics, and improved digital engagement tools for patients.
- Strengthen clinical workforce resilience, with expanded training programmes, new leadership development pathways, and targeted recruitment in high-demand regions.
- Build our research and innovation capability, supporting staff involvement in clinical trials, academic collaboration, and the use of real-world data to improve outcomes.

These priorities reflect our continued ambition to lead the way in NHS ophthalmology delivery, ensuring that every patient, in every community, has access to high-quality, personalised eye care.



NHS Services Provided

Cataract Surgery is one service stream of many within the ACES portfolio. ACES does not see itself solely as a high-volume cataract provider. Our ambition is to expand and strengthen our full-service ophthalmology offering, including glaucoma, oculoplastics, and general eye care, ensuring patients across all regions have access to comprehensive, consultant-led services in 2025/26 and beyond.



Our Locations

1st April 2024

- Pre-Assessment Clinic / Hospital
- Pre-Assessment & Treatment Clinic / Hospital

- 1. Birmingham
- 2. Cambridge
- 3. Dartford
- 4. Exeter
- 5. Fakenham Holt Road
- 6. Fakenham Medical Centre
- 7. Lincoln
- 8. London White City
- 9. Manchester BWC
- 10. Newcastle
- 11. Norwich
- 12. Peterborough
- 13. Thetford
- 14. Wisbech



31st March 2025

- Pre-Assessment Clinic / Hospital
- Pre-Assessment & Treatment Clinic / Hospital

- 1. Birmingham
- 2. Bolton
- 3. Bristol
- 4. Cambridge
- 5. Carlisle
- 6. Chelmsford
- 7. Chester
- 8. Chiswick
- 9. Darlington
- 10. Dartford
- 11. Exeter
- 12. Fakenham Holt Road
- 13. Fakenham Medical Centre
- 14. Leeds King Street
- 15. Lincoln
- 16. Liverpool
- 17. London White City
- 18. Maidstone
- 19. Manchester Bridgewater
- 20. Manchester St Johns Street
- 21. Manchester Trafford Centre
- 22. Middlesbrough
- 23. Milton Keynes
- 24. Newcastle
- 25. Norwich
- 26. Nottingham
- 27. Peterborough
- 28. Plymouth
- 29. Southampton
- 30. Thetford
- 31. Thurrock Lakeside
- 32. Torquay
- 33. Wilmslow
- 34. Wisbech



Our Partnership With The NHS

In 2024/25, ACES proudly signed the NHS Partnership Agreement, formalising our long-standing commitment to working collaboratively with the NHS to deliver high-quality, patient-centred ophthalmic care. This agreement reflects our alignment with NHS values, equity, transparency, and clinical excellence, and recognises our role as a trusted provider of NHS-funded services across 17 Integrated Care Boards (ICBs) nationwide. The Partnership Agreement cements ACES' position not only as a service provider, but as a fully engaged system partner, contributing to elective recovery, pathway redesign, digital innovation, and a shared vision for sustainable, high-quality care. It reflects our dedication to upholding NHS standards in safety, governance, and patient experience at every level.

Supporting the Future NHS Workforce

- A key area of progress in 2024/25 has been our work to establish formal training environments for NHS ophthalmology trainees.
- In close collaboration with NHS Trusts and regional training bodies, we have developed structured clinical placements within ACES sites, aligned to the standards and curriculum requirements of ophthalmic training programmes.
- We are well positioned to welcome our first NHS ophthalmology trainees in 2025/26. This reflects a wider ambition to play an active role in supporting workforce development for the NHS, particularly in high-demand specialties like ophthalmology.

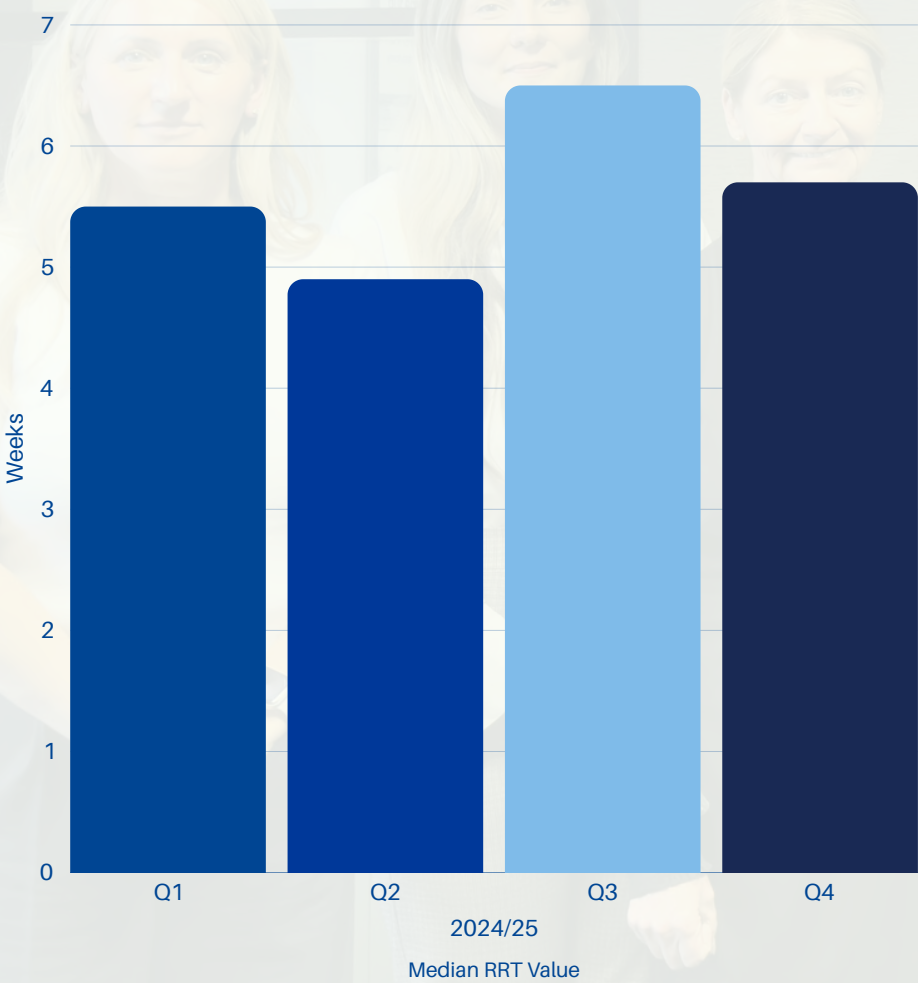
A Shared Commitment to High-Quality, Accessible Care

- As a partner to the NHS, ACES continues to contribute to wider system priorities, including elective recovery, reducing health inequalities, and enhancing access to care through innovation. Our community-based clinics, surgical hubs, and virtual glaucoma pathways are helping to deliver care closer to home, faster, and with outcomes that meet or exceed national benchmarks.
- We look forward to continuing to grow our partnerships across the NHS, and to playing a leading role not just in delivering ophthalmology services, but in shaping their future.



Referral Management

At ACES, we are committed to delivering a timely, patient-focused referral experience. Our internal target is for 100% of patients to receive an initial call from our Referral Management Team within 24 hours of referral receipt, a goal we are currently on track to achieve, with over 90% contacted within this timeframe.



Importantly, all referrals are triaged by experienced clinicians, ensuring expert clinical judgement and personalisation from the outset, rather than relying on automated systems or non-clinical advisors.

Throughout 2024/25, we also maintained a median referral-to-treatment time of less than six weeks, consistently exceeding NHS access standards and ensuring patients receive timely, appropriate care.



Kelly McAlear
Contact Centre Manager

“The patient is triaged by a member of the contact centre via telemedicine within 24 hours of receiving their referral.”



Patient Safety

Patient Safety

Patient safety remains a core pillar of quality at ACES. In 2024/25, we have taken significant steps to strengthen our reporting systems, embed the Patient Safety Incident Response Framework (PSIRF), and continue building a learning culture across all clinical settings. These initiatives ensure that we continue to provide safe, responsive, and transparent care as we grow.

Implementation of PSIRF

In alignment with NHS England's national framework, we continued the implementation of PSIRF across all sites. This included:

- Organisation-wide training to build staff confidence in the principles of PSIRF.
- Senior leadership education in systems-based approaches to incident investigation, replacing traditional root cause analysis.
- Introduction of Swarm huddles and After Action Reviews (AARs) as rapid, collaborative tools to reflect and learn in real time following safety events.

These steps reflect a shift from blame-based models to a just culture, focused on shared learning and continuous improvement.

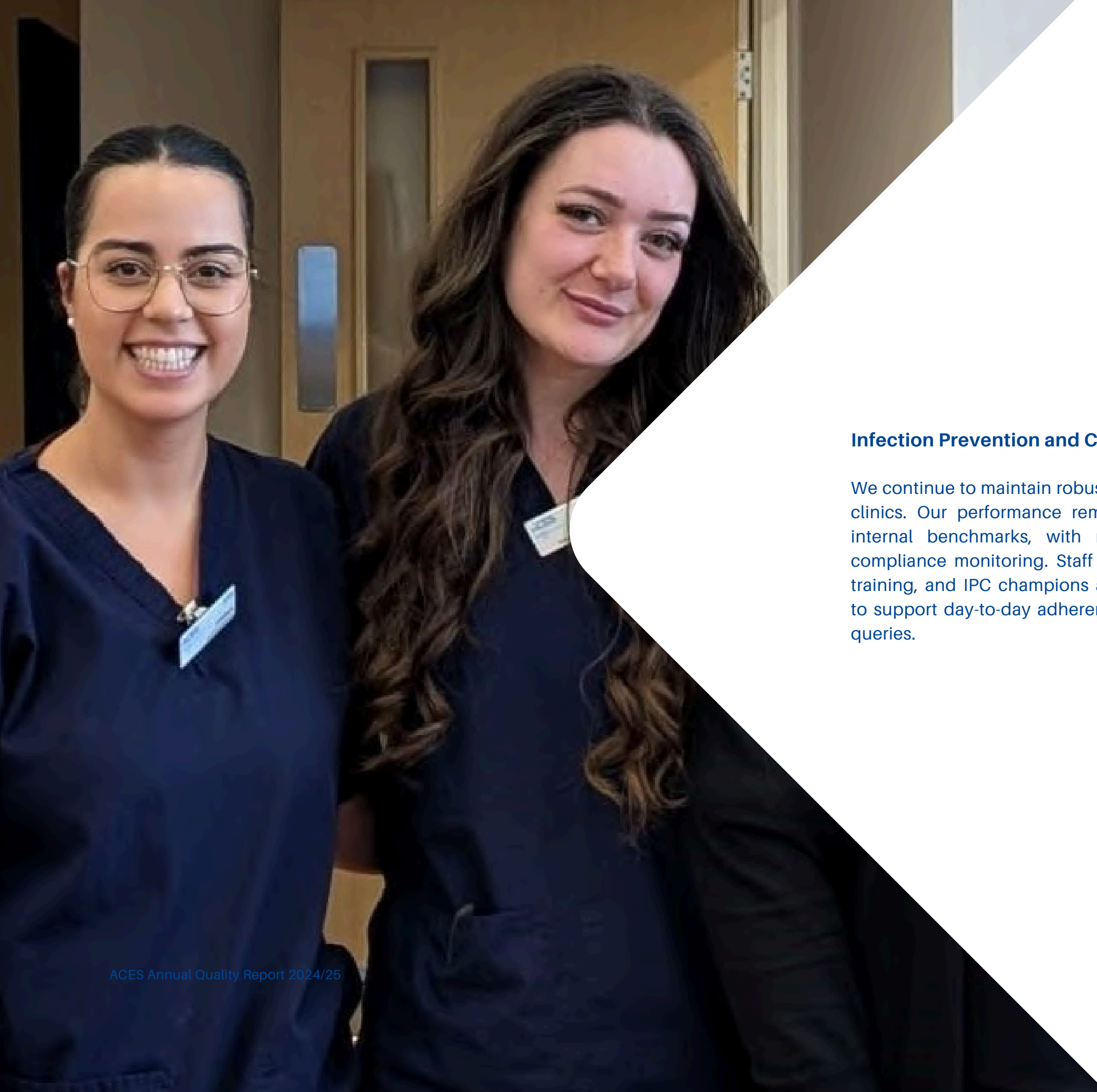
Digital Incident Reporting & Integration

A major milestone this year was the launch of our in-house developed digital incident reporting system, now fully integrated into the electronic medical record (EMR). This system allows staff to report safety events and near misses directly within the clinical workflow, improving speed, accuracy, and completeness of data capture. Key benefits include:

- Real-time trend analysis across all clinics.
- Automatic flagging of themes and high-risk areas.
- Shared dashboards enabling cross-site learning and visibility for governance leads.

This platform has already enhanced our ability to detect patterns early, take proactive action, and embed insights into policy, training, and local improvements.





Infection Prevention and Control (IPC)

We continue to maintain robust IPC measures across all clinics. Our performance remains significantly above internal benchmarks, with regular IPC audits and compliance monitoring. Staff receive regular refresher training, and IPC champions are active across all sites to support day-to-day adherence and respond to local queries.

Medicines Management Safety

Our Medicines Management Committee provides oversight of prescribing practices, medication safety protocols, and controlled drug compliance. In 2024/25, this included:

- Ongoing audit of prescriptions.
- Review of medication protocols.
- Timely updates to clinical staff on MHRA alerts and formulary changes.

Our focus remains on minimising medication errors, ensuring clinical appropriateness, and supporting prescribers with up-to-date guidance.

Thematic Analysis

A patient incident is any unintended or unexpected event that occurs during the provision of healthcare which could have or did lead to harm for one or more patients. At ACES, all incidents are reported, reviewed, and used as learning opportunities to improve the safety, reliability, and quality of care across our services.

During the 2024/25 reporting period, ACES recorded a patient safety incident rate of 0.59% across all operational sites. This figure reflects our continued efforts to promote open, proactive incident reporting and a strong learning culture across clinical and non-clinical teams. Importantly, no incidents were classified as Never Events, and the vast majority (over 95%) resulted in no harm to patients. All incidents were reviewed internally, with many followed up using Swarm huddles and After Action Reviews (AARs) in line with PSIRF.

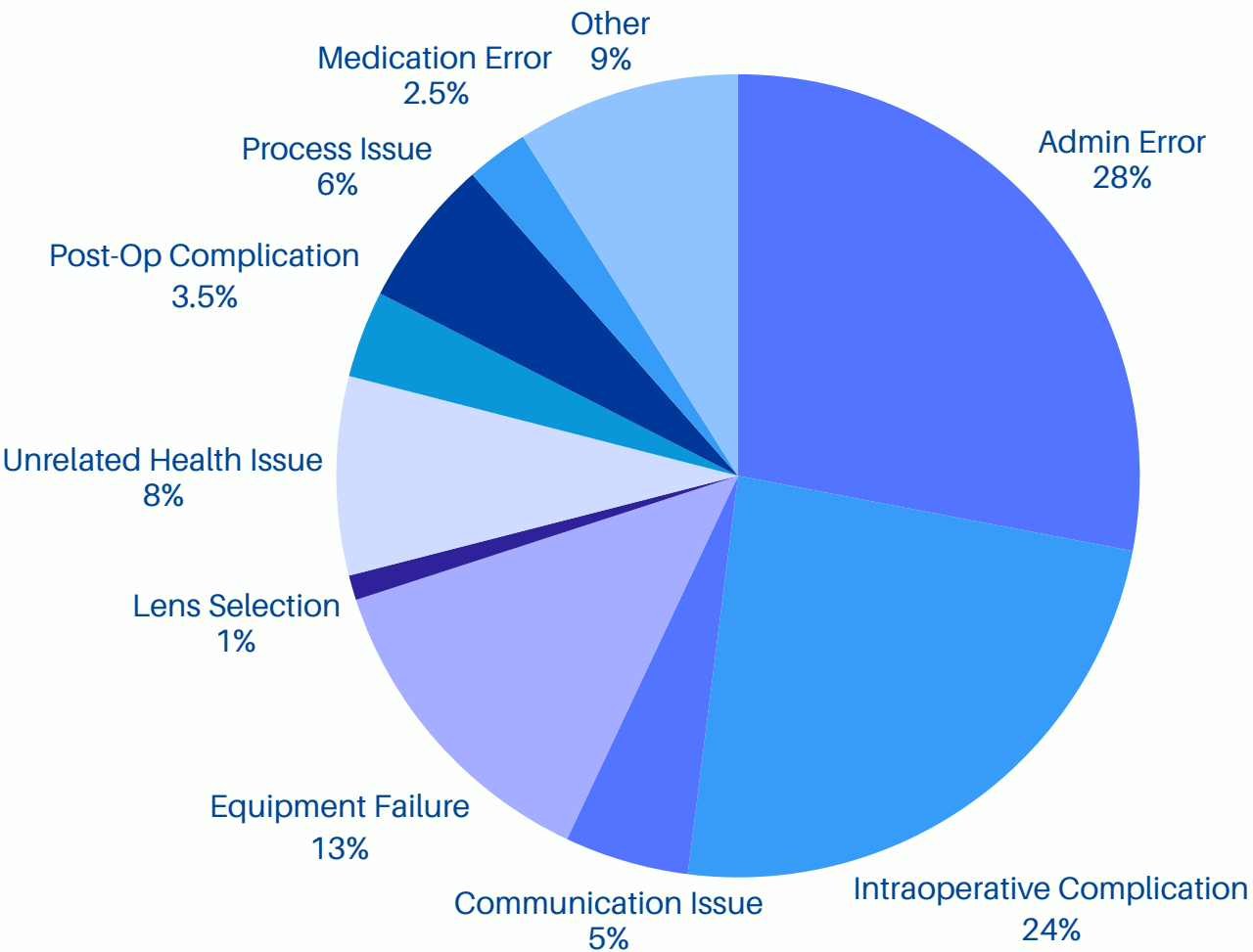
Addressing Administrative Safety

Administrative errors accounted for 28% of all reported incidents, making it our most frequent incident category. All matters of this nature were rectified at the pre-operative admission stage, with no patient impact, a clear demonstration of our safety checks working as intended.

In response, we have:

- Enhanced our booking protocols with mandatory clinical validation checks at two stages of the referral process
- Introduced staff training modules focused on laterality safety
- Worked with our EMR and RMCC teams to improve interface prompts and flagging systems to minimise selection errors at source.

Incidents By Category



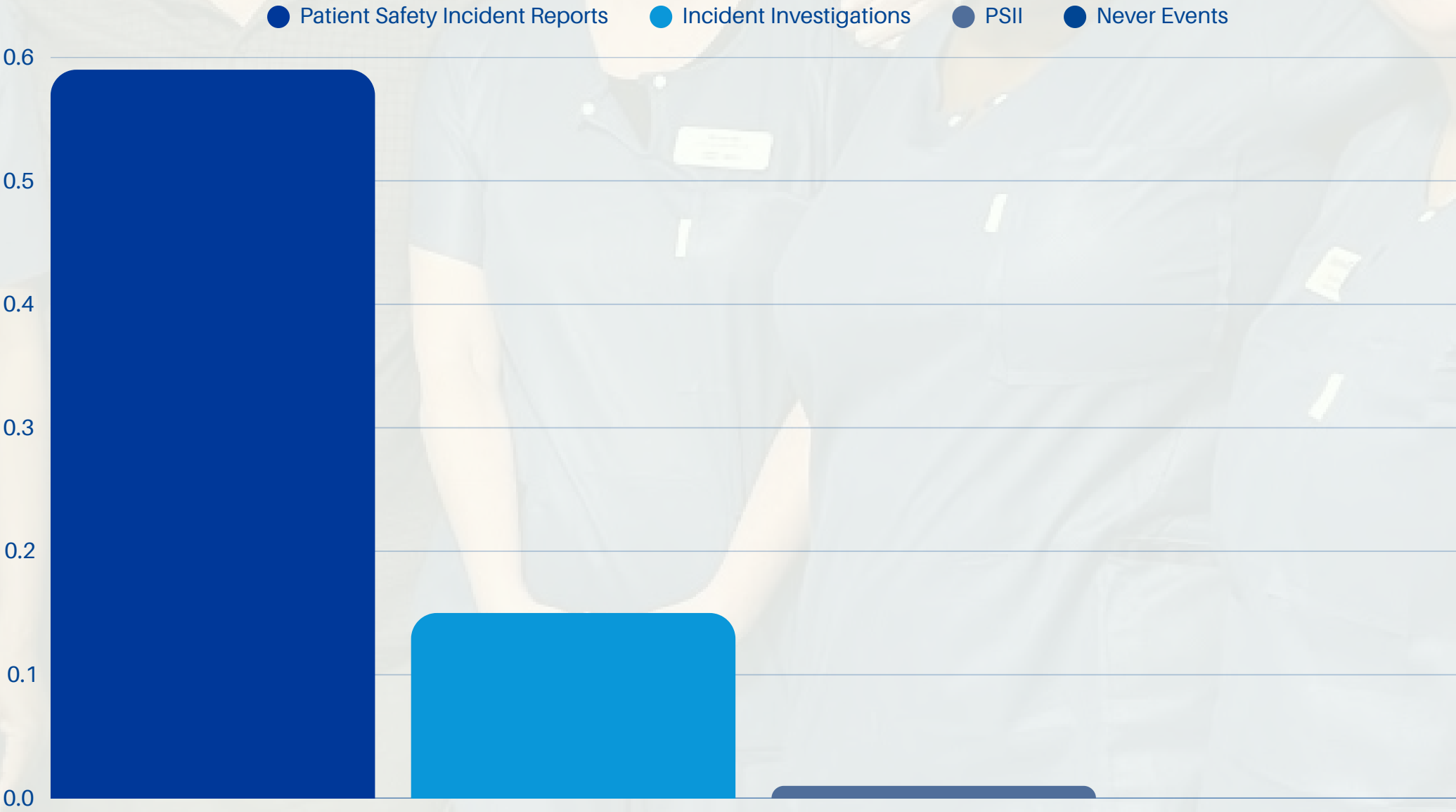
Incident Volume in Context

In 2024/25, ACES delivered 20,837 treatments to patients within our expanding network of clinics. With 122 safety incidents reported, this equates to an overall incident rate of only 0.59% of all patient interactions.

Across all incidents, our focus remains firmly on learning and prevention. By embedding PSIRF and promoting local ownership of safety data, teams are actively contributing to:

- Service improvements
- Training content updates
- Design of safer systems and workflows.

We remain committed to further reducing avoidable harm in 2025/26 by investing in staff training, digital system improvements, and inclusive safety learning processes that support every clinic and every team member.



% Patient Safety Incidents Relative to Patients Treated

Clinical Effectiveness

Delivering safe, timely and effective care is at the heart of ACES’ mission. In 2024/25, we have continued to enhance our clinical effectiveness through data-driven decision-making, investment in digital tools, and the introduction of new models of care designed to optimise outcomes while improving patient access.

Sustaining High Clinical Standards

Across our growing network, we have maintained outstanding clinical outcomes in cataract surgery and other ophthalmic procedures. Our complication and infection rates remain well below national benchmarks, and our focus on early intervention and high-quality diagnostics continues to support excellent visual outcomes for our patients.

Innovation in Care Delivery: Teleophthalmology

A major focus in 2024/25 has been the expansion of teleophthalmology, supporting rapid assessment, early diagnosis, and ongoing management of patients closer to home. We have:

- Rolled out Visionix digital diagnostic systems in multiple clinics to support virtual assessments and triage.
- Introduced remote glaucoma review pathways, enabling consultant-led review of imaging and data without reducing face-to-face attendance.
- Integrated tele-ophthalmic tools into post-operative follow-up for stable patients, increasing convenience and reducing unnecessary travel.

These virtual care models are helping to improve efficiency, reduce delays, and target face-to-face appointments to those who need them most, without compromising quality.





Pathway Innovation and Service Expansion

In 2024/25, we also implemented several service enhancements designed to improve effectiveness across the patient journey:

- Standardised pre-op assessment tools to improve lens selection and predictability.
- Expansion of community-based spoke clinics to reduce travel for patients.
- Introduction of enhanced clinical audit tools to drive real-time feedback into service improvement.

These pathway changes are underpinned by our bespoke EMR, clinical governance dashboards, and multidisciplinary audit processes, allowing us to benchmark, learn, and improve at scale.

The background image shows medical equipment, including a monitor displaying a patient's chest X-ray and another monitor displaying a software interface with various charts and graphs. The entire image is overlaid with a semi-transparent blue filter. The text "Clinical Outcomes & Patient Experience" is centered in white.

Clinical Outcomes & Patient Experience

Clinical Outcomes

At ACES, we are committed to delivering high-quality cataract surgery with outcomes that consistently exceed national standards. We track and benchmark our performance against the National Ophthalmology Database (NOD), the most robust, transparent audit tool for cataract surgery outcomes in England.

Posterior Capsule Rupture (PCR)

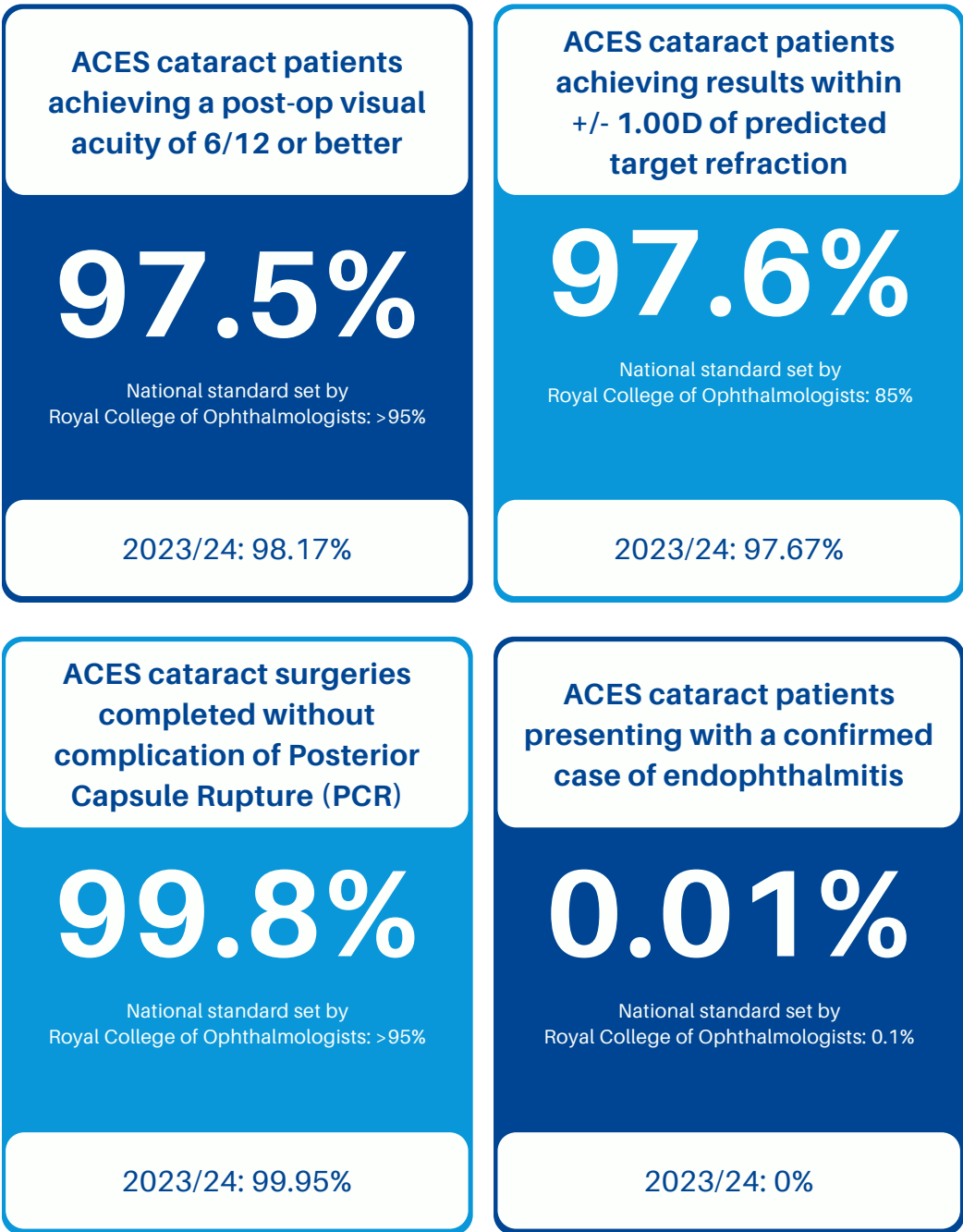
Posterior capsule rupture is a recognised complication of cataract surgery, occurring when the thin membrane ('capsule') that holds the lens in place is inadvertently torn during the procedure. It is considered a key national marker of surgical safety and technique.

Our PCR rate is significantly lower than the national average, meaning that close to 99.8% of our cataract surgeries are performed without this complication, a direct reflection of our surgical skill, clinical governance, and staff training.

Endophthalmitis

Endophthalmitis is a rare but serious post-operative infection that can lead to sight loss if not promptly treated. It is most often caused by contamination during or after surgery, including inadvertent eye-touching by patients during recovery.

Our infection control practices, including rigorous pre- and post-operative protocols, have helped us achieve an endophthalmitis rate substantially lower than national averages, even as we scale services across multiple sites.



Patient Experience



99%

Felt listened to
at their appointment



99%

Felt involved in decisions
about their care



95.4%

Said their quality of life has improved
since surgery



99.1%

Would recommend ACES
to their friends and family



98.6%

Were happy with their overall
experience at ACES



98.2%

Were satisfied with their
care at ACES

*Based on 8428 responses received between 1st April 2024 - 31st March 2025

Patient Satisfaction Questionnaire

At ACES, we place immense value on the feedback and satisfaction of our patients as integral components of our commitment to delivering exceptional care. Through various channels of communication, including surveys, interviews, and suggestion boxes, we actively seek input from patients regarding their experiences with our services. We understand that patient feedback serves as a vital tool for continuous improvement, enabling us to identify areas of strength and opportunities for enhancement within our healthcare delivery system. By actively listening to the voices of our patients, we gain valuable insights into their needs, preferences, and expectations, which inform our efforts to optimise care pathways and service delivery models.

As part of our commitment to continuously improve the quality of care we provide, we introduced an updated version of our Patient Satisfaction Survey during the period of 2024/25. This questionnaire is completed with each patient after they have completed their patient journey with ACES.

This initiative marks an important step in understanding how our services are perceived from the patient’s perspective. By collecting this feedback, we can identify areas where we are performing well and where there is room for improvement. This process is crucial in helping us maintain high standards of care and in enhancing the overall patient experience.



Feedback Collection Mechanisms



We have established multiple avenues for patients to provide feedback, including, internal in-person digital satisfaction forms, online surveys and use of multiple review based websites. These mechanisms are designed to capture diverse perspectives and ensure accessibility for all patients.

Regular Analysis and Review



Feedback collected from patients is systematically analysed and reviewed by our quality improvement teams. This process involves identifying common themes, trends, and areas for improvement, which are then prioritised for action.

Continuous Quality Improvement Initiatives



Based on the insights gained from patient feedback, we implement targeted improvement initiatives aimed at enhancing the overall patient experience. These initiatives may range from workflow optimisations and staff training programs to facility upgrades and service expansions.

Transparent Communication



We believe in maintaining open and transparent communication with our patients regarding their feedback and the actions taken in response. Through regular updates and communication channels, we ensure that patients are informed about the changes implemented as a result of their feedback.

Patient Feedback



Post-op Questionnaire



Online Reviews



Percentage of patients who would recommend



Percentage of patients satisfied with care



Percentage of patients satisfied with visual outcome

What Our Patients Say



Brilliant experience, I can recommend this eye clinic. Their staff were amazing, right up to my cataract being removed. I can now see perfectly with my right eye, so glad I had this done. Thanks once again to the full team who took care of me. - Mary

I have received excellent professional care from technicians, nurses and surgeons within a calm, welcoming and pleasant environment at the Dartford clinic. In particular, the technician Joanne was so kind and caring during my extra check-up and I can't thank her enough. - Debbie



Il found all the staff very friendly. the appointment was very quickly arranged and the surgery was efficient and informative. My eyesight has improved enormously!
- John



Great location, very clean, lovely staff and excellent service. My husband had his cataracts fixed here and I've been here for my tests too. Very pleased and would highly recommend them. - Stephen & Jacqui

What Our Referrers Say



I feel more confident talking about ACES and I have been mentioning it as an option to my patients, particularly the patients that I think would benefit from cataract surgery ASAP as the waiting times for ACES are incredible.

- Michaela, Optometrist (Boots Opticians)

Specsavers

Paul blew me away with his knowledge, personality, and general warmth. He is a credit to your organisation. We were able to have a good laugh and get to the bottom of some issues we had simultaneously! He is clearly passionate about his job and ACES! We look forward to creating a lasting relationship with ACES and he is a significant part of that. We would like to extend our welcome to Paul and yourselves to our store whenever desired.

- Daniyaal, Ophthalmic Director (Specsavers)



Cataract surgery for my uncle went very smoothly, the service and care was world class. I would like to commend the support we have received from Fernanda - she was absolutely amazing and went far and beyond to make sure everything went smoothly. Thank you ACES and thank you Fernanda!

- Mohammed, Optometrist (Vision Express)

Complaints

ACES is committed to learning from complaints and implementing this learning through continual improvement. Complaints made to ACES are managed within the terms of the ACES complaints policy and national NHS complaint regulations for the NHS. The overriding objective is to resolve each complaint with the complainant through explanation and discussion in a timely manner.

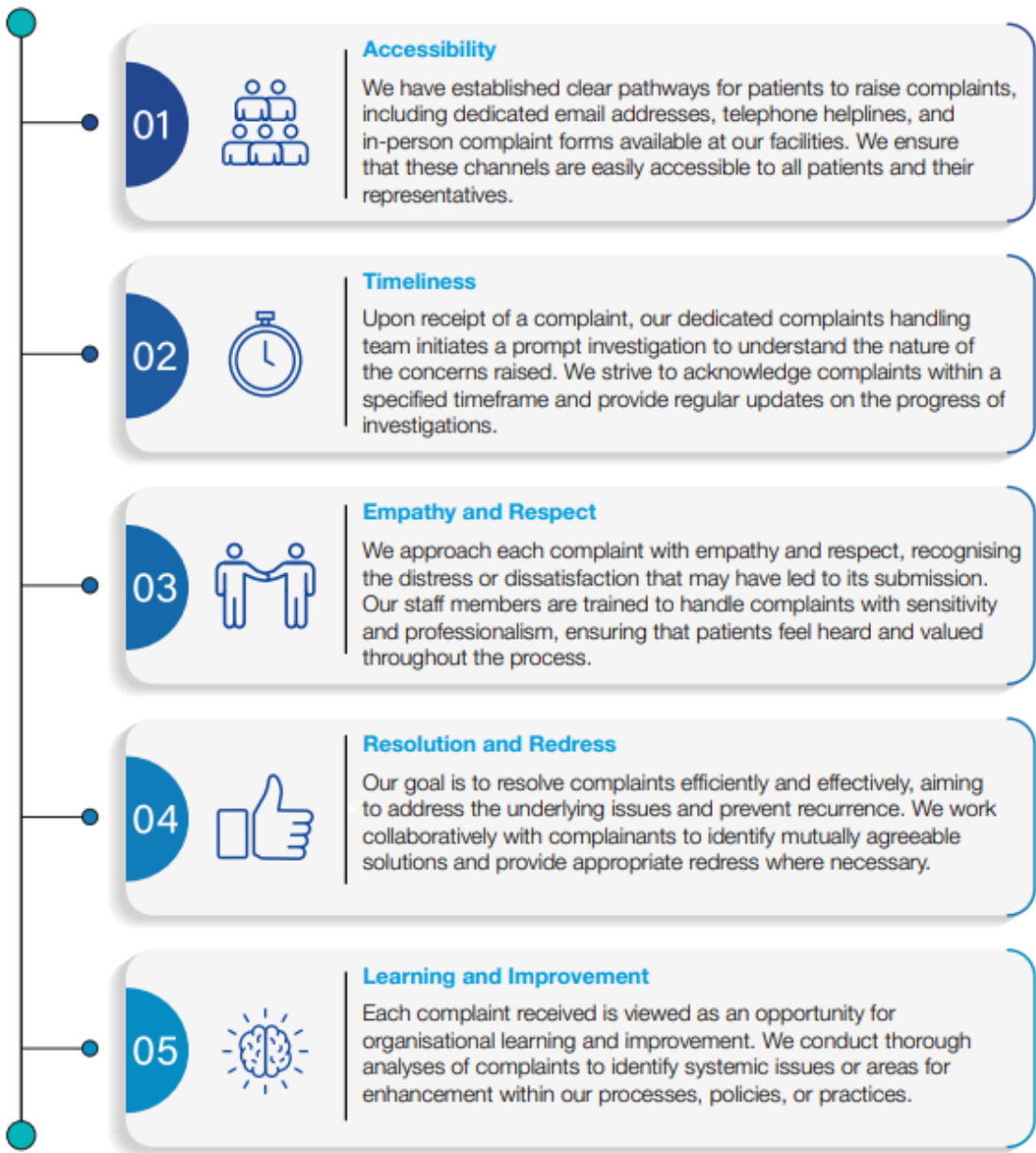
Under National Health Service Complaints (England) Regulations 2009 ACES have a statutory duty to record and report:

- The number of complaints received;
- The number that were well founded;
- The number referred to the Parliamentary and Health Service Ombudsman (PHSO);
- The subject matter of complaints;
- Matters of importance arising from the complaints or handling thereof;
- Action taken, or being taken, to improve services as a result of complaints received.

100% of the complaints received by ACES during 2024/25 were received from the patient or a relative.

The NHS (Complaints) Regulations 2009 state that complaints should be formally acknowledged within three working days. During 2024/25 100% of complaints were acknowledged within three working days.

Of the complaints to which ACES responded in 2024/25, the average number of days to final response following any interim responses or investigations was 29.7 days.



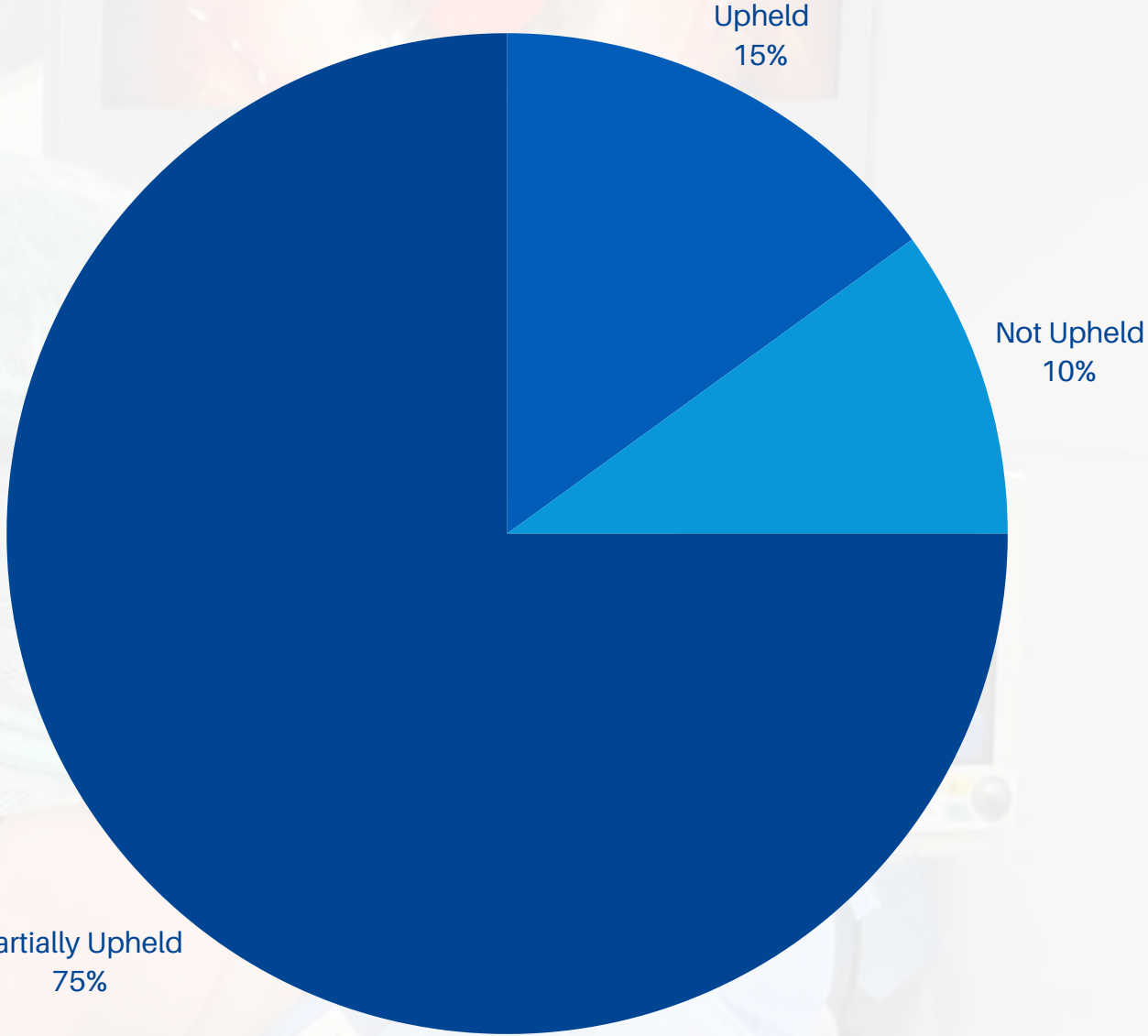
ACES considers that all complaints and concerns provide an opportunity for learning.

In line with the Parliamentary Health and Service Ombudsman (PHSO) approach to categorising the outcome of complaints, ACES record complaints as either ‘upheld’, ‘partially upheld’ or ‘not upheld’.

Complaint Outcome 2024/25

75% of complaints handled were partially upheld, 15% upheld and a 10% not upheld.

During Q4 of 2024/25 there were 77 formal complaints received by the Patient Experience team across the organisation. 51.5% of complaints handled were partially upheld, 27.75% upheld and a 20.75% not upheld. During 2024/25, the PHSO reviewed 0 cases handled by ACES.





Workforce: Education, Wellbeing & Growth

Workforce: Education, Wellbeing & Growth

At ACES, we understand that delivering exceptional care starts with supporting the people who make it possible. In 2024/25, we continued to invest in a workplace culture that values learning, rewards commitment, and prioritises staff wellbeing across every level of the organisation.

A Culture of Support and Belonging

We are proud to foster a working environment where staff feel supported, empowered, and connected, whether based in clinics, surgical hubs, or our support office. Our visible leadership culture, monthly team check-ins, and internal staff forums help us stay responsive to the needs of our growing workforce.

In 2024/25, we strengthened this commitment further with the appointment of a dedicated Wellbeing Coach, based at Head Office, available to support staff across the organisation with one-to-one guidance, group sessions, and signposting to additional resources.

Benefits That Matter

We recognise and reward the hard work of our people through a growing range of benefits designed to support personal, financial, and health-related wellbeing. These include:

- Free annual eye tests and a voucher for new glasses each year
- Free vision correction surgery for all staff
- Access to staff discounts, offers, and savings on everyday essentials

All employees also have access to our employee assistance and wellbeing platform. This includes 24/7 confidential support, guided wellness content, financial tools, and exclusive perks across retail, travel, and entertainment.



The background image shows two individuals in a call center environment. On the left, a woman wearing a headset is seated at a desk, looking towards the camera. On the right, a man is seated in a chair, also looking towards the camera. The desk is equipped with various office equipment, including a computer monitor, a telephone, and a printer. The entire image is overlaid with a semi-transparent blue filter.

Supporting Growth, Beyond the Job Role

We believe in investing in people not just as employees, but as individuals with ambition, potential, and diverse life goals. In addition to formal training routes, we encourage:

- Lateral development across departments and functions
- Secondment and project opportunities to explore new challenges
- Informal mentoring and peer learning to build confidence and community

Our commitment is simple: to be a workplace where people can do their best work and become their best selves.

FTSU

At ACES, we are committed to creating a culture where all staff feel safe, supported, and empowered to speak up. Whether it's raising concerns, sharing ideas for improvement, or flagging something that doesn't feel right, we want every team member to know their voice matters.

Our Freedom to Speak Up (FTSU) Guardian provides an independent, confidential route for staff to raise concerns outside of line management. In 2024/25, the FTSU function was further promoted through staff communications, onboarding processes, and leadership briefings, ensuring awareness and accessibility across all roles and regions.

We continue to support a culture of openness, learning, and psychological safety, where speaking up is seen as a positive and protected act. All FTSU concerns are reviewed promptly, handled sensitively, and used as opportunities to strengthen the safety and wellbeing of our teams.





Supporting Retention and Wellbeing

Staff wellbeing, engagement, and stability remain key priorities. In 2024/25, we:

- Maintained strong staff retention across expanding services
- Promoted internal development through funding qualifications, coaching, and role growth
- Continued to offer flexible working patterns and access to wellbeing resources

In 2025/26, we will build on this foundation through enhanced leadership development, digital skills training, and the launch of a refreshed staff wellbeing strategy tailored to the needs of our dynamic workforce.



Manvir Aujla
Group People Manager

“At ACES, we’re building a workplace where every individual feels valued, supported, and equipped to make a difference. Our people are the driving force behind everything we achieve.”

Equality, Diversity & Inclusion

At ACES, we are committed to creating a culture where everyone, patients, staff, and partners, feels welcomed, respected, and able to thrive. Equality, Diversity, and Inclusion is fundamental to safe, person-centred healthcare. In 2024/25, we continued to advance our approach to inclusive care and equitable employment, supporting both individuals and communities.

Inclusive Patient Care

We understand that every patient's needs are different and that barriers to care can be both visible and hidden. This year, we made tangible progress in improving accessibility and inclusivity across our services:

- Rolled out training on autism and learning disability awareness across all sites.
- Appointed Autism and Dementia Champions at each clinic to support staff and enhance patient experience.
- Introduced accessible patient information, including high-contrast emergency contacts, Easy Read formats, and multilingual materials.
- Enhanced front-line awareness of communication needs, sensory preferences, and reasonable adjustments, ensuring that neurodivergent and vulnerable patients receive responsive, tailored support.

These changes reflect our ambition to deliver not only clinically excellent care, but care that is inclusive, equitable, and compassionate.

An Inclusive Workforce

As a growing national provider, we are proud to employ staff from a wide range of backgrounds, communities, and experiences. We continue to promote:

- Inclusive recruitment practices, with fair and transparent hiring, internal development, and promotion processes.
- Training and mentoring opportunities for staff at all levels, supporting confidence, cultural competence, and leadership development.
- A workplace culture where discrimination, harassment, and bias are not tolerated, supported by clear policies, reporting mechanisms, and leadership accountability.

Our workforce data continues to evolve, and we are taking steps to better understand and respond to the needs of underrepresented groups within our organisation.



Looking Ahead

In 2025/26, we will further strengthen our approach to EDI by:

- Introducing enhanced workforce reporting on diversity and inclusion.
- Expanding awareness training for teams on unconscious bias, inclusive leadership, and health equity.
- Embedding EDI metrics into our governance reporting and quality improvement frameworks.

We believe that inclusive care begins with an inclusive organisation, and we are committed to making that a reality for every patient, every colleague, and every community we serve.





Governance, Assurance & Risk Management

Governance, Assurance, and Risk Management

At ACES, clinical governance is more than a framework, it is a culture that prioritises safety, transparency, and continuous improvement at every level of the organisation. As our services grow across the country, our governance systems have evolved to ensure consistency, accountability, and meaningful oversight.

Governance Structure

Governance is led by our Care & Quality Directorate and overseen by the Clinical Governance Committee, which is supported by a robust network of specialist subcommittees and working groups. These include:

- Quality & Safety Group
- Medicines Management Committee.
- Audit & Outcomes Group
- Medical Advisory Board
- Clinical Governance Committee
- Health, Safety, and Risk Committee
- Medicines Management Committee
- Information Governance Committee
- Environment Committee

This structure allows for timely review of emerging issues, supports evidence-based decision-making, and ensures alignment with both NHS expectations and CQC standards.

Risk Management and Assurance

In 2024/25, we strengthened our risk management processes by:

- Updating and standardising our organisation-wide Risk Register, with regular reporting to the Board.
- Aligning incident review methodology with PSIRF principles.
- Supporting frontline teams with local governance meetings, real-time dashboards, and learning forums.

All sites hold monthly governance reviews using a consistent agenda, supported by our EMR-integrated reporting tools. Learning is captured, shared, and followed through, from clinic to corporate level.

ACES remains fully committed to transparent, data-informed governance that strengthens care quality and reduces risk, for every patient, at every site.



Dr Stephen Hannan
Clinical Services Director

“Robust governance gives us the confidence to grow without compromising safety. Our teams know that quality isn’t just monitored, it’s understood, owned, and acted on at every level.”

Duty of Candour

At ACES, we are committed to maintaining a culture of openness and honesty in all interactions with our patients, staff, and partners. In 2024/25, we responded to all incidents meeting the statutory criteria for Duty of Candour, ensuring that patients were informed promptly, received appropriate support, and were kept involved throughout the review process.

Beyond the statutory duty, our clinical teams prioritise honest, compassionate conversations with patients and carers whenever unexpected outcomes occur, reinforcing our commitment to trust, respect, and patient-centred care. All notifiable incidents were reported to the Care Quality Commission in line with regulatory requirements.

Infection Prevention and Control

Infection control is a fundamental aspect of patient safety at ACES. Throughout 2024/25, we continued to uphold robust IPC standards across all sites, supported by regular audits, staff training, and strong clinical oversight.

Our endophthalmitis rate remained exceptionally low at 0.01%, with no outbreaks reported and all surgical sites adhering to national and internal hygiene protocols. All staff received regular IPC updates, and each site was supported by IPC champions to ensure compliance with cleaning, PPE, and environmental safety standards.



Aimee Ferguson
Designated Safeguarding
Lead & Lead Solicitor

“At ACES, we make sure every member of staff feels empowered and equipped to recognise and act on Safeguarding concerns quickly and safely.”

Safeguarding

Safeguarding vulnerable adults and children is a responsibility we take seriously across every clinic and service. In 2024/25, all staff, clinical and non-clinical received safeguarding training appropriate to their role, with compliance achieving business benchmarks on average across the organisation.

Safeguarding concerns raised by staff were promptly reviewed, escalated where appropriate. Our safeguarding leads continue to support staff with advice, supervision, and training, ensuring that all concerns are managed confidently, compassionately, and in line with national guidance.

Medicines Management

Safe and effective use of medicines remains a key focus of clinical governance at ACES. In 2024/25, medication-related incidents accounted for a small proportion of our overall reporting.

With the ongoing support of our contracted pharmacists and the Medicines Management Committee, we reviewed and updated core medicines-related policies, introduced new guidance on post-operative prescribing, and strengthened clinical decision-making pathways across services. Staff received refresher training on high-risk medications, allergy documentation, and drug protocols, helping us maintain a safe and consistent approach to medicines across all sites. This year we introduced two new Medicine related audits, Medicine Management and FP10 Management.

Information Governance

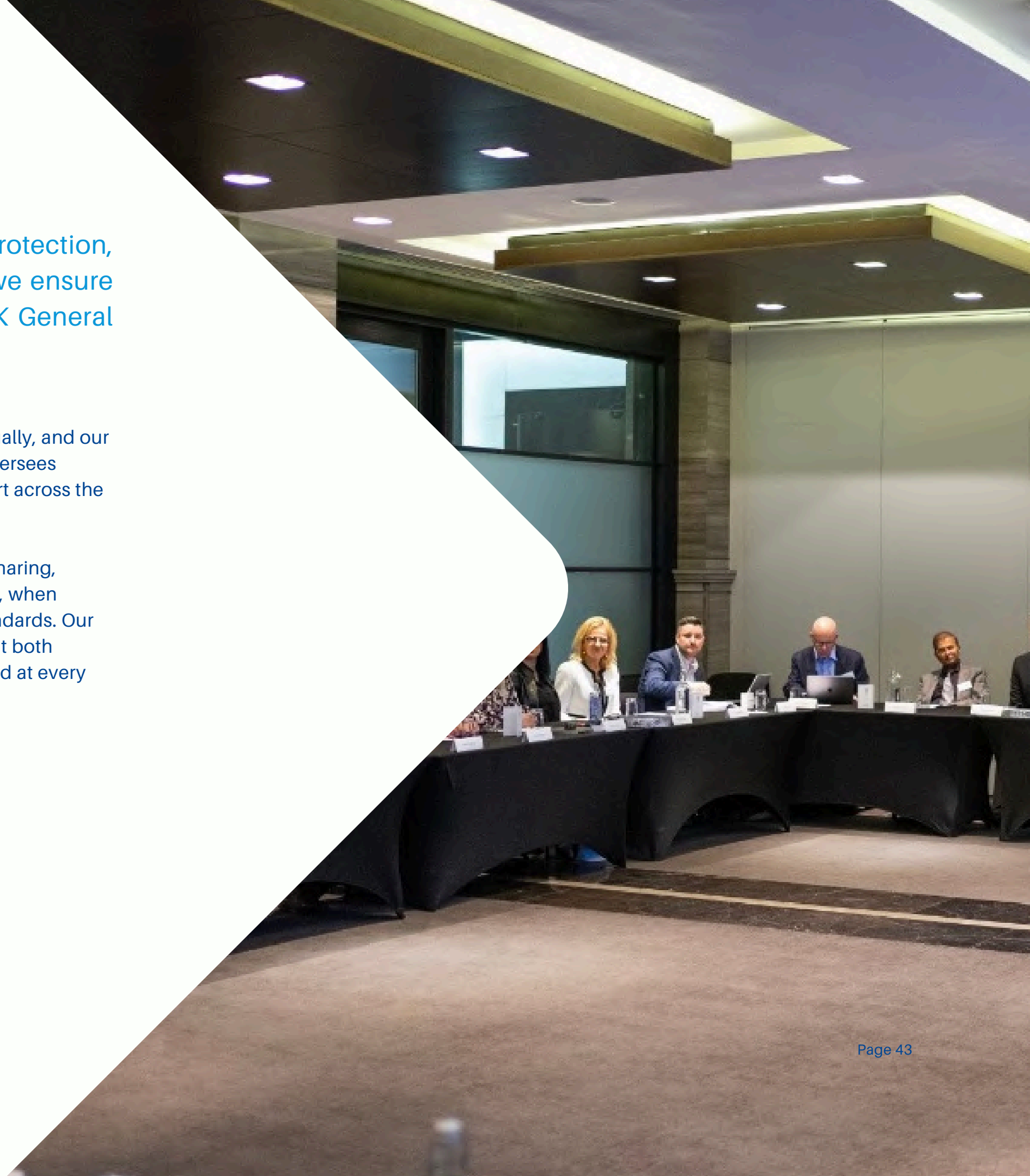
ACES is committed to maintaining the highest standards of data protection, confidentiality, and information security. As a provider of NHS-funded care, we ensure full compliance with the Data Security and Protection Toolkit (DSPT), the UK General Data Protection Regulation (UK GDPR), and the Data Protection Act 2018.

In 2024/25, we continued to strengthen our approach to information governance through:

- Regular staff training on data protection and confidentiality
- Internal audits of access controls, data handling, and clinical systems
- Ongoing review and refinement of our EMR security protocols and user access hierarchies

All staff receive mandatory IG training annually, and our dedicated Data Protection Officer (DPO) oversees compliance, incident response, and support across the organisation.

We also maintain strict protocols for data sharing, ensuring patient information is only shared, when necessary, lawful, and in line with NHS standards. Our robust systems and governance ensure that both patient trust and data integrity are protected at every stage of care.



Digital Transformation

Digital innovation continues to underpin the way ACES delivers, monitors, and improves care. In 2024/25, we advanced our digital maturity by integrating technology not just into clinical systems, but into how we communicate, govern, and evolve as an organisation.

Key developments included:

- Improved digital onboarding and training tools to streamline staff induction and compliance
- Enhanced data visualisation and reporting to support governance and real-time decision-making
- Continued development of digitally enabled referral pathways, improving integration with primary care and ICB systems

Our approach to digital transformation is about designing smarter, safer, and more connected services for patients and staff alike. In 2025/26, we will continue to invest in systems that improve access, efficiency, and the quality of care.

Sustainability & Social Value

At ACES, we understand that our responsibility extends beyond clinical outcomes. As a national provider delivering care within local communities, we are committed to operating sustainably, contributing to the NHS’s Net Zero ambitions, and creating meaningful social value through the way we work.

Environmental Responsibility

In 2024/25, we continued to progress our environmental sustainability agenda, aligning with the NHS’s Greener NHS goals. Key achievements include:

- Reduction in paper usage through widespread adoption of digital documentation, and EMR-based patient pathways.
- Improved waste management, including clearer segregation systems and a reduction in single-use items across clinical sites.
- Energy efficiency upgrades across several locations, including LED lighting installations and environmentally conscious fitouts for new clinics.

Looking ahead, we are preparing to introduce carbon footprint monitoring across all sites in 2025/26, supporting targeted action plans to reduce emissions.

Community Engagement and Social Impact

ACES takes pride in delivering local care with national reach, creating jobs, improving access, and building community connections. In 2024/25, we:

- Launched a co-management scheme with local optometrists, supporting better continuity of care and more efficient patient journeys through aligned assessment and triage.
- Provided career insight days and work experience opportunities for local students interested in healthcare careers.
- Supported staff-led fundraising initiatives and charitable giving campaigns, including support for local vision charities and community health projects.



Inclusive Employment and Economic Contribution

With clinics operating across 17 ICBs, ACES continues to offer high-quality employment opportunities within the communities we serve. In 2024/25, we:

- Maintained fair pay and structured progression for all staff, including access to nationally recognised training.
- Prioritised local recruitment wherever possible.
- Promoted diverse and inclusive hiring practices, supporting individuals returning to the workforce, changing careers, or facing employment barriers.

Looking Forward

In 2025/26, we will develop and publish our first formal Sustainability and Social Value Plan, setting measurable goals in:

- Environmental performance
- Local investment and employment
- Ethical procurement
- Health equity

Our ambition is to be recognised not only for delivering exceptional eye care, but also for our contribution to a more sustainable and equitable health system.

Research & Innovation

At ACES, we are committed to advancing ophthalmic care not only through service delivery but through clinical research, data-driven insight, and continuous innovation. In partnership with our sister organisation and wider group and under the leadership of Dr Stephen Hannan, Clinical Services Director, our senior clinical team continues to contribute to the wider field of ophthalmology through peer-review published research, audits, national and international presentations plus thought leadership.

Clinically Led Research and Academic Contribution

ACES clinicians are actively engaged in research that explores surgical outcomes and technologies, patient safety, and quality of life. Throughout 2024/25, members of our senior clinical team contributed to several peer-reviewed publications and academic presentations, with work published in leading journals such as:

- Journal of Cataract & Refractive Surgery
- Clinical Ophthalmology
- BMJ Open Ophthalmology

These studies have explored areas such as:

- Predictability and stability of visual outcomes following advanced IOL implantation
- Real-world complication rates in high-volume cataract surgery
- The role of virtual assessments in pre-operative triage
- Post-operative quality of life and patient-reported outcome measures

Dr Hannan continues to lead our academic and clinical insight strategy, ensuring findings are translated directly into improvements in practice, training, and patient education.



Dr Stephen Hannan
Clinical Services Director

By embedding research into our day-to-day clinical activities, we ensure our patients benefit from the most current thinking in ophthalmic care, and that we remain a learning, future-focused organisation.

International Medical Advisory Board

ACES is proud to collaborate with our sister organisations, through the International Medical Advisory Board (IMAB). Established in 2005 and chaired by Professor Steve Schallhorn (former Head of Ophthalmology for the United States Navy and consultant to NASA and NATO) the IMAB comprises some of the world’s leading ophthalmic surgeons and opinion leaders.

The IMAB plays a pivotal role in ensuring that ACES are at the forefront of clinical excellence. The board provides continuous assessment and education, allowing surgeons to stay abreast of the latest developments in intraocular lens treatments and Ophthalmology. This collaboration ensures that our patients benefit from cutting-edge practices and technologies in eye care.

Through this partnership, ACES reinforces its commitment to delivering high-quality, evidence-based ophthalmic care, guided by global expertise and innovation.

“The International Medical Advisory Board is committed to ensuring that clinical excellence and innovation remain at the heart of ophthalmology. Through collaboration, shared expertise, and rigorous oversight, we help shape the safest, most effective treatments for patients and continually raise the standards for what outstanding care looks like.”

Professor Steve Schallhorn, Chair, International Medical Advisory Board



Professor Steve Schallhorn
Chairman



Dr Jan Venter



Dr Marguerite McDonald



Dr John Vukich



Dr Zaina Al Mohtase



Dr Stephen Slade



Dr David Teenan



Dr Colman Kraff



Dr Stephen Coleman



Dr Stephen Hannan



Professor David Spalton



Dr Julie Schallhorn



Dr Stephen Klyce



Dr Steven Dell



Dr Eric Donnenfeld



Quality Improvement

Creating a Culture of Continuous Quality Improvement

At ACES, quality improvement is more than a set of projects, it is a way of thinking, working, and leading across the organisation. In 2024/25, we continued to embed a culture where improvement is everyone's responsibility, driven by curiosity, collaboration, and compassion.

Leadership-Driven, Clinically Led

Our Quality Improvement (QI) agenda is strategically led by the Director of Care & Quality and supported by our Clinical Governance and Risk Committees. However, it is front-line staff, from surgeons and nurses to admin and support teams, who generate, test, and sustain improvement ideas in practice.

Through regular governance meetings, local learning events, and safety briefings, we encourage open dialogue, we challenge assumptions, and we actively listen to those closest to patient care.

Embedding QI into Daily Practice

We have taken key steps this year to move from reactive improvement to embedded, system-wide learning:

- Introduced real-time digital incident analysis through our integrated reporting system.
- Rolled out Swarm huddles and After-Action Reviews across all sites as reflective learning tools.
- Supported staff with training in PSIRF principles, and systems-based investigation techniques.

This ensures every incident, audit, complaint, or success story becomes a source of insight.



Mat McAvoy
Director of Care & Quality

“Quality improvement lives in the everyday decisions our people make, how they speak up, how they reflect, and how they solve problems together. At ACES, we're building a culture where everyone has the permission and the tools to lead change, however small. That's where real improvement happens.”

Empowering Staff to Lead Change

Our improvement journey is fuelled by empowered staff. In 2024/25, we invested in:

- Professional development through Level 5 and Level 7 clinical diplomas and nationally accredited training.
- Protected time for staff to participate in audits, pathway redesign, and training delivery.
- Recognition of clinical excellence and innovation through governance awards and learning showcases.

We continue to celebrate staff-led changes, from process refinements in booking systems to local patient experience improvements, that create safer, more efficient care.

Partnership, Transparency & Accountability

Improvement also means listening - to patients, partners, and peers. We have:

- Embedded feedback loops from PREMs, complaints, and community engagement.
- Shared learning across ICBs and professional networks.

This collective ownership of quality helps build trust, drive performance, and continually raise our standards.

At ACES, continuous improvement is not a project with an end, it's how we grow, adapt, and deliver better care every day. We are proud of the culture we've built and excited about the innovations still to come.

Quality Improvement Initiatives 2024/25

At ACES, we continue to embed innovation, learning, and system development into everyday care through structured quality improvement. In 2024/25, several impactful initiatives were delivered across clinical education, digital innovation, service efficiency, and remote care delivery.

YAG Capsulotomy Training for Optometrists

We introduced targeted training to enable qualified optometrists to perform YAG capsulotomy procedures - increasing access, reducing waiting times, and supporting clinical development.

Accredited Diplomas for Clinical Staff

ACES launched two new, internationally recognised qualifications

- Level 5 Diploma in Ophthalmic Care for Healthcare Assistants
- Level 7 Postgraduate Post Graduate Diploma in Cataract and Refractive Surgery for clinicians

These support advanced practice and consistent clinical standards across the group.

Virtual Consultations and Telemedicine Pathway

We expanded our remote consultation pathways, including virtual assessments for glaucoma and cataract patients, increasing flexibility, reducing travel, and improving access to specialist advice.

Theatre Efficiency Reporting via EMR

New real-time theatre efficiency tracking has been built into our EMR system. This enables clinical and operational teams to monitor performance, reduce delays, and optimise surgical flow.

Staff Education Webinar Series on Quality and Regulation

We launched a live webinar series to enhance understanding of healthcare regulation and safe, effective care. Sessions have helped embed key regulatory principles into frontline practice, empowering staff to deliver and document high-quality care with confidence.

These initiatives reflect ACES' ongoing commitment to continuous improvement, driving better outcomes, safer systems, and more efficient, patient-centred care across all services.



Regulation & Inspection

In 2024/25, ACES was pleased to undergo a Care Quality Commission (CQC) inspection at our Wisbech site, reflecting our continued growth and commitment to transparent, high-quality care. The inspection resulted in an overall rating of ‘Good’, with the ‘Caring’ domain rated as ‘Outstanding’, a testament to the professionalism, empathy, and dedication shown by our teams on the ground.

This recognition from the CQC affirms our strong culture of safety, patient focus, and continuous improvement. We are particularly proud that the inspectors highlighted the warmth, respect, and compassion with which care was delivered, values that are embedded across all ACES sites.

While Wisbech was the only site formally inspected during the year, we continue to uphold regulatory standards across all locations through:

- Regular internal inspections and quality assurance audits
- Mock CQC inspections, coordinated by our Quality team
- Continuous self-assessment against regulations.

These proactive approaches help us ensure that services are consistently safe, effective, caring, responsive, and well-led, regardless of inspection frequency.

As we look ahead, we remain fully committed to engaging openly with regulators, sharing learning across sites, and maintaining the highest standards of care in line with both CQC expectations and NHS values.



Location	Overall	Safe	Effective	Caring	Responsive	Well-led
Birmingham	Good	Good	N/A	N/A	N/A	Good
Cambridge	Good	Good	Good	Good	Good	Good
Fakenham	Good	Good	Good	Good	Good	Good
Thetford	Good	Good	Good	Good	Good	Good
Wisbech	Good	Good	Good	Outstanding	Good	Good

All members of the Team who were in attendance at the quality visit were very professional, very knowledgeable, engaging, proud advocates for their service and very keen to start serving NHS patients from the Liverpool area. I felt the Team were honest, open and transparent about the service and answered all the KLOE with easy and clarity.

Quality Team
Cheshire & Mersyside ICB

Patients and any family or carers with them were all positive about the staff treating them with warmth and kindness and providing effective care and treatment. Feedback surveys showed that nearly all patients would recommend the service, and people were satisfied with the outcomes and care provided. People said they did not feel anxious about raising concerns. We observed that staff interacted with people kindly.

Care Quality Commission
Wisbech, Dec 24

Audit Framework

ACES’s Clinical Audit Programme is a key component of our commitment to high-quality, evidence-based care. Through regular and structured audits, we continuously evaluate our clinical practices to ensure they align with best practices and meet regulatory standards.

Compliance with the audit programme has remained strong, with most scheduled audits completed on time and high adherence to clinical standards observed across the board. The results reflect our dedication to maintaining rigorous clinical governance, with identified improvements promptly integrated into action plans to further elevate patient care.

Our robust audit programme not only reinforces compliance but also drives ongoing quality enhancements across all ACES services.

Audit	Monthly	Quarterly	Biannually	Standard
Cleanliness of the Clinic Environment	★			100%
Cleanliness of the Theatre Environment	★			100%
Hand Hygiene	★			100%
Infection Prevention & Control		★		100%
Patient Records		★		100%
Team Brief		★		100%
Quality of Patient Care		★		100%
Surgical Safety Checklist		★		100%
Personnel File			★	100%
Clinic Document Control			★	100%
Medicines Management		★		100%
FP10 Management		★		100%

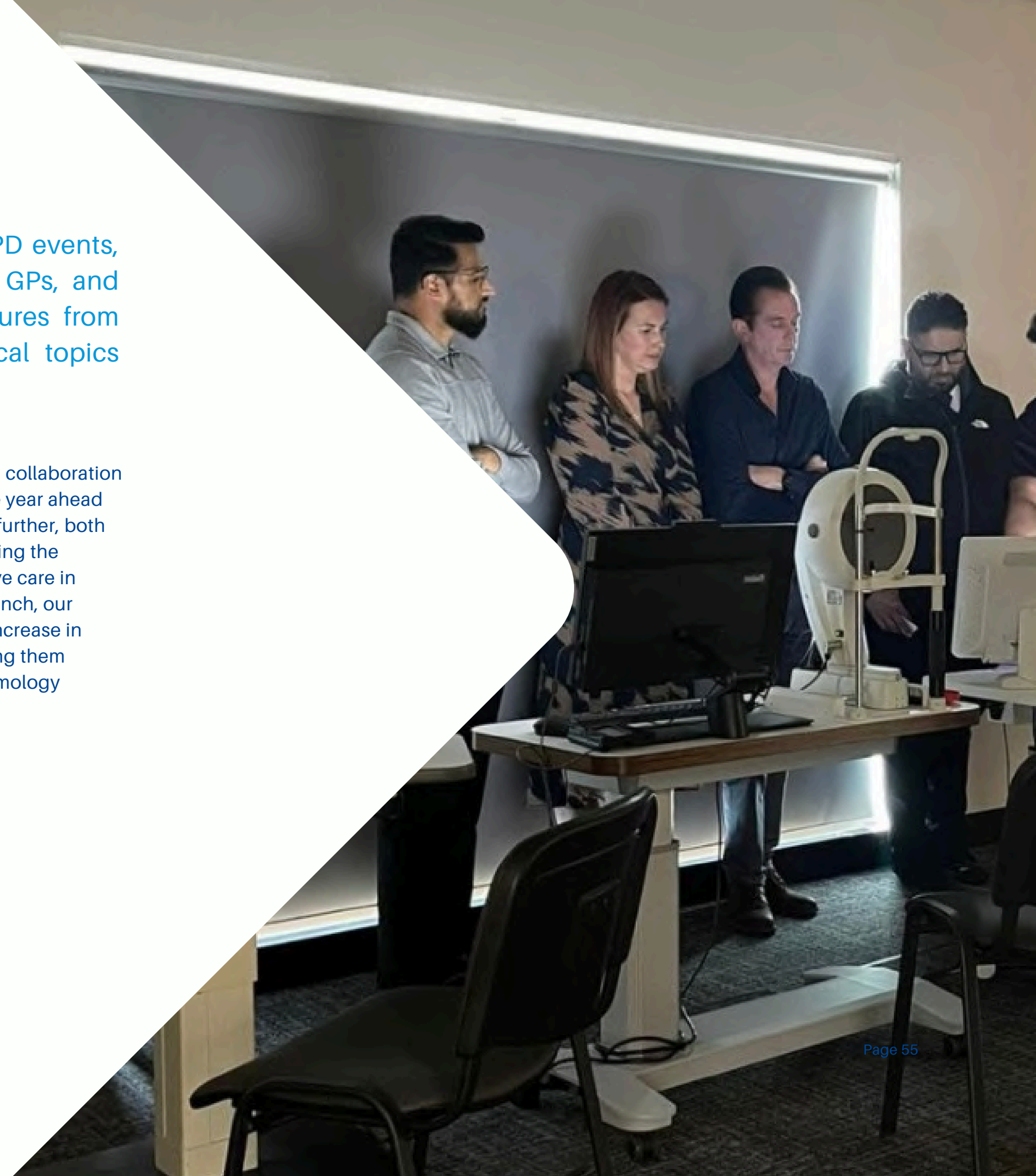
Continuous Professional Development

Throughout 2024/25, ACES continued to deliver a robust programme of CPD events, both online and in-person, aimed at supporting community optometrists, GPs, and other primary care professionals. These sessions featured expert-led lectures from leading ophthalmology consultants, covering a broad spectrum of clinical topics relevant to everyday practice.

Building on the success of previous years, 2024/25 events saw high levels of attendance and active participation from healthcare professionals across the UK. Feedback remained overwhelmingly positive, with attendees valuing the opportunity to enhance their clinical knowledge, engage with peers, and gain insights into the latest advancements in ophthalmic care.

These CPD initiatives form a key part of our commitment to knowledge sharing and integrated care. By empowering community healthcare professionals with up-to-date information and best practice guidance, we help ensure patients benefit from early identification, accurate diagnosis, and timely referrals.

ACES remains dedicated to strengthening collaboration across the care pathway. Our focus for the year ahead includes expanding our CPD programme further, both in content and reach, to continue supporting the delivery of safe, effective, and informed eye care in every community we serve. Since their launch, our online CPD sessions have seen a steady increase in attendees, and we plan to continue offering them weekly, covering a wide range of ophthalmology topics.



Accessible & Compassionate Care for All

In 2024/25, we worked to ensure our clinics, teams, and care pathways reflect not just clinical quality, but emotional intelligence, flexibility, and respect for the unique needs of every patient.

Making Services Easier to Navigate

We reviewed and simplified elements of the patient journey to reduce anxiety and confusion:

- Appointment letters and clinic information redesigned for clarity and tone
- Front-desk teams trained to offer proactive reassurance, not just instructions
- Staff encouraged to slow down, repeat information, and offer written summaries where needed

These changes make our services easier to use, especially for patients attending alone, those unfamiliar with healthcare settings, or anyone feeling anxious.

Listening With Intention

We've focused on creating a listening culture throughout the patient pathway:

- Staff are encouraged to ask before assuming, about communication needs, support preferences, or fears
- Patients are given time to explain concerns in their own words
- Clinical teams take extra care when discussing decisions or risks, especially with those who may feel overwhelmed

This approach builds trust and improves outcomes, because patients who feel heard are more likely to engage confidently with their care.



A group of healthcare professionals, including men and women of various ethnicities, are standing in a hospital corridor. They are all wearing blue scrubs and some are wearing hairnets. They are smiling at the camera. The background shows a typical hospital hallway with white walls, a door, and some medical equipment.

Removing Hidden Barriers

We've paid special attention to small changes that make a big difference:

- Ensuring chairs with arms are available in all waiting areas
- Making sure forms, pens, and hand sanitiser are within reach
- Offering flexible appointment times for carers or those with transport challenges

These adjustments may seem simple but they're often what determines whether someone feels able to access care at all.

Everyday Acts of Compassion

Our teams are trained to notice, adapt, and support. That might mean offering to walk a nervous patient to the waiting area, pausing to allow extra time for decision-making, or helping someone locate a family member after surgery.

These moments aren't always recorded but they define the kind of care we're proud to deliver.

Accessible care isn't just about ramps and leaflets it's about creating environments where every person feels safe, understood, and treated with kindness.

Community Engagement & Population Health Goals

At ACES, we recognise that our responsibility to improve health goes beyond the clinic. As a provider of NHS-funded services rooted in local communities, we are committed to promoting eye health, reducing health inequalities, and supporting the wellbeing of the populations we serve.

Local Presence, National Impact

With clinics now operating across 17 ICBs, we remain focused on building trusted relationships with local patients, optometrists, GPs, and voluntary sector partners. In 2024/25, we:

- Supported community outreach through patient education materials distributed via local optometrists and pharmacies
- Participated in local health and wellbeing events, raising awareness of preventable sight loss and how to access timely care
- Engaged with ICBs to better understand regional health priorities and barriers to access

Our NHS Partnership Executives regularly participate in local initiatives to spread awareness about clinical services in areas with little or no healthcare. One such initiative was the “Wellness on Wheels” (WOW) Bus funded by the Norfolk and Waveney ICB.

Population Health and Early Intervention

Preventing avoidable vision loss is a key part of our public health contribution. This year we focused on:

- Promoting early access to cataract surgery and glaucoma care in underserved areas
- Supporting co-management models with community optometrists to reduce referral delays
- Designing services that are inclusive, culturally sensitive, and responsive to the needs of diverse patient populations



Looking Ahead

In 2025/26, we will build on this work by:

- Expanding health promotion campaigns tailored to at-risk groups
- Exploring population-level data to inform service planning
- Strengthening partnerships with ICBs and local charities to improve awareness and access

ACES is proud to contribute not only to high-quality clinical care, but to broader efforts that improve eye health and health equity at a population level.

Statements From Key Stakeholders


Kent and Medway

2nd Floor
Gail House
Lower Stone Street
Maidstone
ME15 6NB

16th June 2025

Dear Mat,

We welcome the Quality Account for ACES and the Kent and Medway Integrated Care Board (ICB) confirm that this Quality Account has been produced in line with the National requirements and includes all the required areas for reporting.

The Quality Account demonstrates an overview of quality of care in your focus areas, looking at improving the safety, and effectiveness of your services, as well as improving patient experience. There is an overview of the work that you have undertaken this year with a focus on your enduring commitment to deliver the highest ophthalmic care to communities within Kent and Medway as well as nationally. The report has a clear flow that would be easy to follow for members of the public.

Your report sets out your Quality priorities for 2025/26 which you have provided clear reasoning for, and we support your work on continuing to grow your footprint and strengthen your foundations of excellence. These include launching services in new regions including underserved areas whilst maintaining referral to treatment times. We also welcome that you are looking to become an inclusivity driven provider by embedding autism-friendly pathways as well as dementia aware practice which is to be co-produced in service design with the patients themselves. We wholly support your company's ethos of ensuring every patient in every community has the right of equal access to care.

Thank you for your engagement and the opportunity to comment on these accounts and look forward to further strengthening the relationships with the organisation through continued collaborative working.

Kind regards
Chloe Dyer *(BA Hons)*
Quality Programme Manager
Kent & Medway ICB

Together, we can


www.kentandmedwayicb.nhs.uk

ACES



<https://www.aces-eyeclinic.co.uk/>



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ACES services are commissioned by ICBs across England.