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Poster Abstracts

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Understanding acceptance of remote care amongst consumers and eye care professionals in the UK

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Purpose: Since the covid-19 pandemic, technological advancements have been made in remote and automated eyecare, but consumer and eye care professional (ECP) acceptance of these is not well understood. Levels of acceptance with remote care may help to direct where it is incorporated into the current contact lens (CL) patient journey and where innovation is needed.

Method: A UK-based, quantitative online survey (October, 2025). Respondents were shown five remote eye-examination concepts:

1. Remote ECP, ECP-led remote examination and recommendation.
2. Remote ECP, technician-led examination, ECP-led video recommendation.
3. Remote ECP, technician-led examination, written ECP recommendation.
4. Remote patient, automated examination, ECP-led video recommendation.
5. Remote patient, automated examination, written ECP recommendation.

Questions around each concept included appeal, trust, and future potential, with 5-point likert scales used.

Results: 274 respondents took part (50 ECPs, 224 consumers [131 CL wearers, 93 open to CLs]). Appeal of remote care across all concepts was significantly higher ($p<0.05$) in consumers than ECPs (1; 81% vs 40%, 2; 76% vs 38%, 3; 66% vs 26%, 4; 79% vs 42%, 5; 64% vs 28%). For both groups, concepts with live ECP involvement (1,2,4) ranked higher than without (3,5) for 'openness to try'.

Most appealing (rating 4/5 or 5/5) for consumers were concepts 1 (81%), 4 (79%) and 2 (76%). Most appealing for ECPs were 4 (42%), 1 (40%) and 2 (38%). Consumers were more likely to trust remote examinations versus ECPs ($p<0.05$). 'Trust' of concepts was rated similar to 'appeal' for consumers but rated lower than 'appeal' for ECPs.

Combined data ranked scenario 1 most preferred ($p<0.05$, 74% open to try (T2B)). Only 51% of respondents were open to an automated at-home examination with written ECP recommendation.

Conclusions: Whilst consumers are open to, and trust, remote care, ECPs do not share the same desire to consider remote care for the future. This lower openness to remote care may slow uptake of technological advancement in the category.

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