

Directorate for Community Health and Social Care
Primary Care Division

Dear Colleague

**GENERAL OPHTHALMIC SERVICES (GOS) –
COVID-19: Further important information for community eye
care providers**

Summary

1. This communication provides details of a number of important COVID-19 updates for community eye care providers in Scotland, including: revised Health Protection Scotland guidance and Personal Protective Equipment requirements; Emergency Eyecare Treatment Centres; emergency dispensing; submission of eOphthalmic claims; conditions for continued eligibility to receive financial support from the Scottish Government; miscellaneous other updates.

Action

2. NHS Boards are asked to **urgently** issue this letter and the enclosed Memorandum to all optometrists, ophthalmic medical practitioners and practices within their Board area.

Yours sincerely,



Heather Campbell
Interim Deputy Director of Primary Care,
Scottish Government

1 May 2020

Addresses:

For action

Chief Executives, NHS Boards

For information

Chief Executive,
NHS National Services
Scotland

NHS Board Optometric
Advisers

NHS Education for Scotland

Optometry Scotland

Enquiries to:

Community Eyecare Team
Primary Care Division
1st Floor East Rear
St Andrews House
EDINBURGH
EH1 3DG

Email: eyecare@gov.scot

**MEMORANDUM TO NHS:
PCA(O)2020(7)**

Summary

1. This Memorandum provides a further important update to all community optometry practices and staff regarding the provision of emergency and essential eye care services during the COVID-19 pandemic.
2. It includes information on:
 - Revised Health Protection Scotland COVID-19 guidance and Personal Protective Equipment requirements;
 - Emergency Eyecare Treatment Centres;
 - Emergency dispensing: general rules and issuing/claiming of optical vouchers;
 - Submission of payment claims via the eOphthalmic system;
 - Conditions for continued eligibility to receive financial support from the Scottish Government;
 - Responsibility to provide accurate email addresses and the regular checking of inboxes for information issued by Health Boards;
 - Eligibility of some furloughed optometrists to provide services within an Emergency Eyecare Treatment Centre;
 - Indemnity cover for optometrists working in Emergency Eyecare Treatment Centres;
 - COVID-19 testing for key workers;
 - Medical examination reports for renewal of bus or lorry driver licences;
 - Emergency Care Summary system access for optometrists providing emergency eye care;
 - Minor Ailment Service extension and postponement of Pharmacy First Scotland;
 - Health and wellbeing support;
 - Mandatory training reminder for General Ophthalmic Services practitioners.

Revised Health Protection Scotland (HPS) COVID-19 guidance and Personal Protective Equipment (PPE) requirements

3. The HPS COVID-19 guidance for community optometry is now included within its overall primary care guidance:
<https://www.hps.scot.nhs.uk/web-resources-container/covid-19-guidance-for-primary-care/>.
4. The HPS guidance and latest guidance issued by the [College of Optometrists](#) set out the latest PPE requirements for practitioners. Where a practitioner is unable to maintain at least a two metre distance at all times with a patient, the following appropriate PPE **must** be donned: single use disposable aprons and gloves, and a fluid-resistant (type IIR) surgical mask which can be worn for a whole session rather than changed for each patient, unless the mask becomes soiled, damaged or uncomfortable. A plastic breath shield must be attached to the slit lamp and disinfected between patients. Practitioners are advised to avoid speaking whilst at the slit lamp. In addition, where practitioners have access to a face shield or visor, they may wish to consider using it.

Emergency Eyecare Treatment Centres (EETC)

5. As set out in [PCA\(O\)2020\(6\)](#), in order to reduce the risk to patients and optometry practice staff from COVID-19, designated EETCs have been established in each NHS Board for the provision of face-to-face emergency eye care services to patients who have had a prior telephone triage or consultation with an optometrist, and who have been assessed as not experiencing COVID-19 symptoms. If a patient requires an emergency face-to-face appointment but is suspected of having COVID-19 symptoms, guidance must be sought from the Hospital Eye Service.
6. **In line with [national guidelines](#), until further notice a practice which is not an EETC must not undertake face-to-face consultations with patients beyond that required for emergency dispensing, even if the practice has appropriate PPE.**
7. A National Eye Health Framework to support the implementation of EETCs has been developed by EyeHealth Scotland in collaboration with NHS Boards, the Scottish Government, Optometry Scotland and RNIB Scotland. Each EETC has also been provided with an initial supply of appropriate PPE.
8. Optometrists referring a patient to an EETC must do so following the relevant NHS Board's local EETC pathway and protocol which have been separately communicated to practitioners and practices. This is particularly important as the nearest EETC to the patient's location may be in a different NHS Board to the referring community optometry practice. Practitioners are reminded that patient confidential information must only be exchanged via secure email (e.g. NHS Mail).

9. An up-to-date list of EETCs can be found on the Practitioner and Counter Fraud Services (P&CFS) ophthalmic COVID-19 webpage:
<https://nhs.uk/services/practitioner/ophthalmic/covid-19-update/>.
Any changes to the details on that list must be communicated as soon as possible to the relevant NHS Board.

Emergency dispensing: General rules and issuing/claiming of optical vouchers

General rules for emergency dispensing

10. As set out in [PCA\(O\)2020\(5\)](#), emergency dispensing should **only** take place in instances where delaying the provision of spectacles would be detrimental to a patient's sight or wellbeing, or where key workers have lost or broken their spectacles. **Refractions should not be undertaken as part of an emergency dispense.** In deciding whether to undertake emergency dispensing, a practice should discuss with the patient all alternative options that may be possible e.g. temporary repairs.
11. It should be possible to conduct most emergency dispenses whilst maintaining a distance of at least two metres at all times between the patient and practitioner. However, where this is not possible the practitioner **must** don the appropriate PPE as specified at that time in the HPS guidance.

Issuing and claiming of optical vouchers for emergency dispensing

12. For patients under the age of 16, the GOS(S)4 optical voucher process fully supports these emergency measures and will remain in place, subject to the determination of need. However, a number of changes are being introduced for patients aged 16 and over, as follows:
- Any element of the normal optical voucher system which requires pre-approval from an NHS Board is suspended.
 - Patients who require an emergency dispense and fall within the list of patient categories listed under the 'NHS optical voucher' heading on the [NHS Inform ophthalmic webpage](#) will have their entitlement extended in order that a GOS(S)4 voucher can be issued, regardless of when their routine General Ophthalmic Services (GOS) eye examination is due.
13. Practitioners are reminded that a GOS(S)4 voucher should only be issued where the full cost of any replacement or repair cannot be met under the terms of any existing warranty, insurance or other arrangement with the supplier or manufacturer of the spectacles. In addition, a GOS(S)4 voucher should only be issued in respect of a full replacement where it is not possible to repair the spectacles.
14. Practices will require to utilise a patient's existing prescription in order to facilitate the order. Where the prescription cannot be obtained from the patient, the practice should make all reasonable efforts to obtain this from other sources, including the practice which carried out the original dispense.

15. In order to submit GOS(S)4 claims for emergency dispensing services for patients aged 16 and over, the following must be entered when processing the claim via eOphthalmic: 'Has universal credit' under the 'Voucher Entitlement' drop-down list; '0019' in the 'Reason Code' field; "Covid" in the "Reason" field (see the example screenshot below from the GOS(S)4 web form).

Patient's Declaration

Voucher Entitlement
Has universal credit

Person who gets benefits (if not Patient):

DoB Forename Surname

Number on current HC2 Number on current HC3

Amount of HC3

☐ Evidence Not Shown

Signed? ☒ Yes ☐ No Date Signed

Signed By ☒ Patient ☐ Guardian/Carer 27/04/2020

☒ If over 16, explain how illness or disability resulted in loss/damage of glasses/contact lenses

Reason Code: 0019 Date Signed: 27/04/2020

Reason: Covid

16. This is a temporary arrangement to ensure that emergency dispense optical voucher claims for adults can be submitted and processed efficiently during the COVID-19 pandemic. Practitioners will be advised when this is revoked and normal claiming processes for GOS(S)3 and GOS(S)4 optical vouchers are reinstated.
17. Any GOS(S)3 and GOS(S)4 claims submitted by eOphthalmic on or after 23 March 2020 will be offset against the practice's monthly average payment.

Submission of payment claims via the eOphthalmic system

18. Where it is safe to visit the practice to undertake administrative activities, the following payment claims should still continue to be submitted via eOphthalmic, and should not be unnecessarily delayed:
- GOS(S)1 claims for eye examinations carried out before 23 March 2020 (the date on which routine eye care services were suspended);
 - GOS(S)3 claims where the date of order of the optical appliance is before 23 March 2020;
 - GOS(S)4 claims where the date of repair or replacement of the optical appliance is before 23 March 2020.

19. Practices are reminded that the rules regarding patient signature have been relaxed at this time, which should assist with the submission of the GOS(S)3 and GOS(S)4 claims detailed above. Further information on this can be found in [PCA\(O\)2020\(4\)](#).
20. Payment claims for emergency or essential telephone consultations carried out on or after 23 March 2020 should be submitted via eOphthalmic using supplementary eye examination reason codes 2.8 or 4.8, in accordance with [PCA\(O\)2020\(4\)](#) and [PCA\(O\)2020\(5\)](#).
21. Payment claims for emergency dispensing carried out on or after 23 March 2020 should be submitted via eOphthalmic, and only in accordance with the conditions set out in paragraphs 10 to 17.
22. Remuneration for practices involved in the provision of EETC services are subject to separate arrangements, and the practices to whom this applies will receive direct communication from their NHS Board setting out the position within their area. EETC practices are requested to familiarise themselves with these arrangements, and should **only** make claims via eOphthalmic where they are clear that it is appropriate to do so.

Conditions for continued eligibility to receive financial support from the Scottish Government

23. [PCA\(O\)2020\(4\)](#) set out a package of specific financial support measures for community optometry practices that the Scottish Government introduced to preserve the integrity of NHS community eye care services during the current COVID-19 pandemic.
24. In order to continue to be eligible to receive either part of the financial support (monthly payments equating to the practice's average monthly item of service income across the 2019/20 financial year, and additional payments for provision of emergency and essential eye care), practices must meet **all** of the following conditions:
 - Condition 1: There must be no amendments to the information held in association with the practice on the relevant NHS Board's Ophthalmic List during the financial support period - except where this applies to:
 - the practice's operating hours or contact details;
 - the practice ceasing to trade;
 - the withdrawal of a Part 1 contractor from an Ophthalmic List who is providing GOS at the practice's address, which has been agreed by the relevant NHS Board in accordance with regulation 10(1)(b) of the National Health Service (General Ophthalmic Services) (Scotland) Regulations 2006 ("GOS Regulations"), as amended;
 - a Part 1 contractor indicating that they intend to provide GOS from the practice's address.

Part 2 optometrists and ophthalmic medical practitioners (OMP) are not associated with practices on an Ophthalmic List, and therefore fall outwith the scope of Condition 1.

To help assist with monitoring of this condition:

(a) NHS Boards are reminded of the importance of keeping their Ophthalmic Lists up-to-date;

(b) optometrists and OMPs are reminded that, if any details held about them on an NHS Board's Ophthalmic List have changed, under regulation 7(2)(a) of the GOS Regulations they are required to notify the relevant Board about the details of the change within seven days of that change occurring. This includes the details of any practice(s) the address(es) of which the optometrist/OMP has indicated is where they provide GOS as a Part 1 contractor.

- Condition 2: Where a practice has closed temporarily (i.e. it is not providing a telephone triage or consultation service), it must have the following arrangements in place to notify patients of that fact and to provide clear signposting to another local practice where possible which is providing a remote telephone triage and consultation service:
 - a message on the practice's telephone answering service;
 - (where applicable) a prominent message on the practice's website.
- Condition 3: Where a practice has closed or changed their operating hours for the foreseeable future as a result of the COVID-19 pandemic, the contractor must notify the relevant NHS Board of that fact, and of the date the change took effect. Practice closures which occur during the COVID-19 pandemic will be classed as temporary and the contractor shall not be removed from the Board's Ophthalmic List, unless otherwise advised. Contact details for each Board can be accessed via the P&CFS website: <https://nhsnss.org/services/practitioner/ophthalmic/claiming-and-regulations/>.
- Condition 4: In line with [national guidelines](#) during the current COVID-19 'lockdown', until further notice a practice which is not an EETC must not undertake face-to-face consultations with patients beyond that required for emergency dispensing, even if the practice has appropriate PPE.

25. A practice which fails to meet all of the above conditions is liable to have future financial support payments suspended by the relevant NHS Board.

Continuing to protect community eye care infrastructure and workforce

26. The Scottish Government recognises that this continues to be a particularly unsettling time for all community eye care service providers and staff. Community optometry practices and staff are key to the delivery of eye care in Scotland and

our reform agenda in the longer term. It is imperative therefore that, as far as possible, the current infrastructure and workforce are protected during the COVID-19 pandemic, and the ongoing financial support measures are a key enabler of this. The Scottish Government and Optometry Scotland will therefore continue to work together to ascertain ways in which these outcomes can best be achieved in a phased, safe and sustainable manner.

Responsibility to provide accurate email addresses and the regular checking of inboxes for information issued by Health Boards

27. Practitioners and bodies corporate have a responsibility to ensure that they are in a position to receive up-to-date information pertinent to GOS. Any changes to the email address held by the Board for them should be notified no later than seven days of the change taking place. Practitioners and bodies corporate are also reminded of the importance of regularly checking inboxes (and, in particular, an NHS Mail account where this has been provided) for information issued to them by NHS Boards, including circulars such as this one.

Eligibility of some furloughed optometrists to provide services within an EETC

28. An optometrist furloughed by their employer for the purposes of the [Coronavirus Job Retention Scheme](#) can provide emergency eye care within an EETC, where they have been employed by the relevant NHS Board to provide that service. Furloughed staff cannot generate any additional income for their normal employer via an EETC.

Indemnity cover for optometrists working in EETCs

29. The Cabinet Secretary for Health and Sport wrote to NHS Boards on 7 April 2020 directing that indemnity cover under each Board's membership of the Clinical Negligence and Other Risk Indemnity Scheme (CNORIS) must extend to optometrists in Scotland engaged by a Health Board to work in an EETC. This will not apply where indemnity arrangements are already in place for the optometrist to be indemnified, i.e. where the optometrist is covered under their employer's indemnity and the EETC is owned by the employer or the optometrist is a locum and is covered under their personal indemnity.

COVID-19 testing for key workers

30. PCA(O)2020(6) confirmed that all community optometrists in Scotland are category 2 key workers, and all other practice staff are category 3 key workers. Key workers who are self-isolating (unable to leave home) can now apply to be tested for COVID-19 (along with their household) either at <https://self-referral.test-for-coronavirus.service.gov.uk/> or via local arrangements.

Medical examination reports for renewal of bus or lorry driver licences

31. The UK Government announced on 17 April 2020 that temporary provisions have been introduced for medical examination reports for renewal of a Group 2 (bus or lorry) licence: <https://www.gov.uk/guidance/dvla-coronavirus-covid-19-update>.

32. Bus and lorry drivers aged 45 and over will not need a D4 medical examination (including a vision assessment) in order to renew their driving licence. These changes are temporary and will only apply where the driver does not have any existing notifiable health conditions, and their licence has not expired before 1 January 2020.
33. The licence will only be valid for one year instead of five years and the driver will need to submit a completed D4 form when the licence is due for renewal in 12 months. Drivers with health issues will still need to declare these, and those with health issues that prevent them from driving safely will not have their licence renewed.

Emergency Care Summary (ECS) system access for optometrists providing emergency eye care

34. Following agreement from the Scottish General Practitioners Committee (SGPC) of the British Medical Association, the Scottish Government wrote to territorial NHS Boards on 10 April 2020 permitting all optometrists providing emergency care as part of a Board's COVID-19 response (whether in an EETC or remotely via telephone) to be given access to the ECS system. This will provide these optometrists with important additional information to manage patients safely. Further information on the provision of user accounts will be provided to optometrists by their NHS Board.
35. The ECS system extracts the following data from GP electronic patient records and holds it in a central database from where it can be accessed by specific staff groups at Health Boards:

Demographic Information:

- Patient first name
- Patient family name
- CHI number
- Date of birth
- Telephone number
- Address
- Opt out status
- GP practice the patient is registered with

Clinical Information:

- Allergies
- Adverse reactions
- Active acute medications (in the last 30 days)
- Active repeat medications (in the last year)

36. With the SGPC's agreement, the Scottish Government also plans to eventually facilitate access to the ECS system for all optometrists in Scotland. Ministerial Directions regulating this access are being prepared and will be issued in due course.

Minor Ailment Service (MAS) extension and postponement of Pharmacy First Scotland

37. Practitioners are asked to note the content of [PCA\(P\)2020\(6\)](#) issued on 31 March 2020 to pharmacy teams in Scotland. It advised of:

- the extension of eligibility to the MAS, to enable pharmacists to be able to support more patients and reduce pressure on other parts of the NHS during the COVID-19 pandemic. MAS consultations can now be provided to anyone (apart from care home residents) registered with a GP practice in Scotland on a permanent basis or registered with Defence Medical Services, being the medical services of the air force, army and navy of the United Kingdom.
- the postponement of the NHS Scotland Pharmacy First service which was due to go live on 22 April 2020. Due to the current pressures on pharmacy teams responding to the COVID-19 pandemic, the service will now go live when pharmacy teams have the capacity to deliver the new service as fully intended.

Health and wellbeing support

38. Many health and social care workers are likely to feel stressed and under enormous pressure during the COVID-19 pandemic. A range of health and wellbeing support for individuals and organisations is available from NHS Education for Scotland (NES) on the Turas system:

<https://learn.nes.nhs.scot/28063/coronavirus-covid-19/psychosocial-mental-health-and-wellbeing-support-for-staff>.

Mandatory training reminder for GOS practitioners

39. Optometrists and OMPs providing GOS are reminded that they are required to satisfactorily complete the following two exercises during the first mandatory training period (1 October 2018 to 31 December 2020) – ‘First Port of Call Reflective Account of Practice’, and ‘Introduction to Consent and Capacity in Optometric Practice in Scotland’. Both exercises can be accessed on Turas at: <https://learn.nes.nhs.scot/26227/optometry/mandatory-training-page>.

40. As set out in [PCA\(O\)2019\(3\)](#), these exercises must be submitted to NES no later than 13 November 2020 to ensure adequate time is available for NES to acknowledge and confirm satisfactory completion by 31 December 2020.

Enquiries

41. Any enquiries arising from this Memorandum should be emailed to: eyecare@gov.scot.

Primary Care Division,
Directorate for Community Health and Social Care
Scottish Government