



OPHTHALMIC SERVICES NEWSLETTER

July 2022

It has been some months since our last Ophthalmic Services Bulletin with a total of fifteen Bulletins issued since the onset of the COVID-19 pandemic in March 2020. As we move forward, the 'COVID Bulletins' have ceased with a move back to regular newsletter-type updates which it is hoped will provide contractors and individual practitioners with information on the ongoing work and activities within HSC ophthalmic services. On 1st April 2022, the Health and Social Care Board (HSCB) closed with migration of ophthalmic services to the Strategic Planning and Performance Group (SPPG) within the Department of Health. On a practical level these changes will not affect the way contractors and individual optometrists work and staff contact details etc...are unchanged.

Please take time to read this update and share with colleagues in your practice.

Thank you for your continued efforts to rebuild and sustain primary care optometry services; a steady increase in service provision across all areas is evidenced with service activity levels at near pre-COVID levels. Primary care optometrists continue to evidence on a daily and weekly basis that they are a critical component of the health and social care workforce, providing clinical care across a range of areas. It is acknowledged that challenges and pressures prevail and opportunities exist to improve how services are provided. Your feedback and views on current services and proposals for new service developments and improvements is vital and valued. Ophthalmic services are currently considering the options for how feedback and suggestions can be easily facilitated for you, but in the meantime the existing email (ophthalmic.services@hscni.net) can be used if you have suggestions or feedback which you wish to give.

Working with you, your representatives in Optometry Northern Ireland (ONI), DoH colleagues and partners in the HSC Trusts and the voluntary sector, it is hoped that the work of the [Northern Ireland Eyecare Network](#) can be progressed. Primary care optometry has been, for many years, at the fore in introducing new initiatives, developments and improvements and you have been central to all of this work. It could not have happened without your dedication, support and input. It is hoped that further work to sustain and improve services can take place and once again, your input will be essential as ideas and plans are made.



A fond farewell to Scott.....

Many of you will know Mr Scott Drummond, the dedicated and diligent Scott, who has assisted and worked in supporting ophthalmic services since 2018. Scott has moved to work within Pharmacy in SPPG, taking up a new post in the medicines optimisation team. Ophthalmic services, although very sorry to see him leave, wish him the best of luck for his new post. Scott has been a wonderful colleague to everyone in the ophthalmic team and has formed relationships with many primary care optometrists and contractors over the past 4 years. Many of you will have 'heard' Scott in the HSC Optometry webinars as he got to grips with ophthalmic terminology whilst coordinating questions and answers!!

Scott's successor is Ms Kathryn Bradley who took up post on Monday 27th June '22 and she is brilliantly supported by Colin Lyle in the team whom many of you will also know. Colin will be a valuable help to Kathryn as she gets to know the breadth of work within ophthalmic services. We all welcome Kathryn to ophthalmic services and know that the service will be in good hands going forward.

We know that you will all join the ophthalmic team in saying a sincere thank you to Scott and best wishes for the future..... *Thank you Scott* 😊

Passing of Susan Caskey, Eye Care Liaison Officer (ECLO)

It was with deep sadness that ophthalmic services heard of the recent passing of Susan Caskey, Eye Care Liaison Officer, RNIB.

Susan was a valued and long-standing member of the ECLO team providing an important and patient centred service for people receiving a diagnosis of an eye condition and those experiencing sight loss. Susan was a sincere person with great warmth and kindness. During her years in the service Susan was at all times a wonderful ambassador for the ECLO service and RNIB and she will be sorely missed by everyone.

May she rest in peace.

Congratulations! Northern Ireland Optometrist and Academic joins prestigious programme

Ophthalmic services in SPPG are delighted to hear that Dr Julie-Anne Little has been accepted onto the prestigious Future Leaders in Innovation, Enterprise and Research ('FLIER') programme run by the Academy of Medical Sciences. The two year programme brings together people from life science backgrounds to train and support them in leadership and collaborative working, helping them as emerging leaders in their sphere of work. We are sure you will all join us in saying congratulations and well done to Julie-Anne!!

Congratulations Dr Julie-Anne Little!

Congratulations

Contractor 'Annual Practice Returns'

Thank you to all contractors for completing their returns for the Annual Quality Assurance (QA) process and the 2022/23 Enhanced Services provision. Following reminders and a final extension to the deadline for returns, 234/271 (86%) contractors completed their annual QA return and will receive their practice allowance payment as support for this piece of work. Ophthalmic Services will review the returns including the information in respect of complaints and adverse incidents and undertake any necessary follow-up with a contractor.



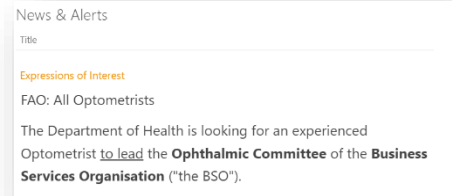
Ophthalmic services staff will also contact any contractor that has not submitted their declarations for 2022/23 Enhanced Services provision. Non-returners will be **removed** from the relevant enhanced service providers lists from **11th July 2022** after which time claims for enhanced services will be suspended. Please ensure that if you have been contacted that you action your return by Friday 8th July 2022 (close of business).

Contractors are reminded to check your HSCNI email account (for practices that are 'portal users') on a very regular basis. HSC will use this email address for communicating with ALL practices that utilise the portal for submitting claims. If you require a password reset for this account please contact the IT helpdesk on 028 9536 2400 or, email supportteam@hscni.net.

A small number of practices still do not access the HSC Optometry portal for claim submission (n=11) and agreed alternative business email contacts are in place for this small number of practices.

Ophthalmic Committee of the Business Services Organisation

The Business Services Organisation (BSO) is currently seeking applicants for the position of Chairperson of the Ophthalmic Committee. Information on the position including the application process can be found at the following link. Please do take time to consider this opportunity to represent your profession on the BSO Ophthalmic Committee. Please follow the link to the information and 'expression of interest' form hosted on the "news section" of the HSC Optometry Portal. The information may also be accessed on the BSO website *Click link* [Forms & Information Library \(hscni.net\)](#) (first two documents)



On the Horizon for Optometry.....

Ophthalmic services have been an integral part of the ongoing work to innovate and transform how health and social care is provided in Northern Ireland. Over the past decade much has changed in primary care optometry practice with investment in workforce training, the introduction of new enhanced services, the introduction of electronic applications to aid referral and information sharing and, very importantly, investment by contractors in their practices – in their physical premises, their clinical diagnostic equipment and their staff. All of this has resulted in enhancements and improvement in the services patients access on a daily basis from their optometry practice. Acknowledging the work thus far, there is still however much work to be done in scoping of opportunities and options for further developments. It is important that you, and your colleagues, are aware of this work so that you have an opportunity to both discuss with your representative body, ONI, but that in addition, you feel comfortable approaching ophthalmic services in SPPG.

NI PEARS Plus...? An opportunity for a new pathway and way of working

Scoping work is underway in relation to the planning for an Optometrist Independent Prescriber 'NI PEARS Plus' (+) Service. Secondary care ophthalmology (Belfast HSC Trust) have raised the possibility of clinical care for patients with an agreed range of 'acute' eye conditions being provided in practice by an Optometrist with the Independent Prescriber (IP) qualification and access to HS21 prescription pad. The aim is to enable these patients to be managed to completion in primary care where appropriate. Optometrists who hold the IP qualification have welcomed these early discussions and it is hoped that in conjunction with ONI discussions can progress.

Examples of the conditions which could potentially be included in an NI PEARS Plus service are: foreign body removal, recurrent iritis and keratitis. Suggestions as to how this pathway might clinically and operationally function are being investigated including the referral pathway for this service. If you have any comments or views on this potential service development please contact ONI in the first instance or, alternatively, email ophthalmic.services@hscni.net.

✚ Ocular Hypertension Review & Monitoring Service....plans for extension of clinical care

Contractors and optometrists have previously been informed of the primary care optometry Ocular Hypertension (OHT) Review and Monitoring Service which is provided across a number of practices regionally. This service requires significant commitment from a practice perspective, both in terms of clinical input and administrative work, and optometrists providing this service attend regular engagement sessions (ECHO sessions) with secondary care glaucoma service consultants as part of the accreditation to provide the service. The service has been in place since January 2019 with a gradual increase in the number of patients being discharged (approximately 1,300 at February 2022) to the service from the HSC Trusts, and optometrists providing this service are respectful that they will be undertaking the review of a patient who may not attend their practice for their regular and 'usual' eye care. This inter-practice professionalism and high level of commitment from providers is key to enabling this service to succeed.

The OHT Review and Monitoring Service is underpinned by a high level of governance and supporting failsafe processes requiring continual oversight by the optometrists involved. The clinical arrangements and protocols for the service take into account a number of guidelines and requirements including NG81 and other commissioning guidance for glaucoma & OHT care pathways to ensure that the service is clinically appropriate, effective and safe. Currently a review of the service is underway with consultation taking place between ophthalmic services and the optometrists providing the service with plans for full and open discussion with ONI in the near future. It is hoped that the service can be enhanced to align with recent updates to NG81 and open discussion is planned with the aim of securing agreement on the way forward for the service.



Have you any positive and constructive suggestions for how optometry services could further develop and improve?

If so please email ophthalmic.services@hscni.net with your ideas – all suggestions will be welcome.



Ophthalmic Services: Some Points to Remember.....

1. Myopia Control and GOS Provision

Currently General Ophthalmic Services (GOS) does not support the provision of ophthalmic lenses for the treatment of myopia (myopia control) using an 'optical voucher'. HSC have noted an increasing number of queries from contractors in relation to this area of optometric practice and should you have a query in relation to this please email ophthalmic.services@hscni.net for advice.

2. GOS and 'Top-up' Charges for additional services

Contractors and optometrists are reminded that a 'top-up' fee cannot and should not be 'added' as supplement to a GOS Sight Test. If a practice chooses to provide additional services, including but not exclusive to diagnostic tests, which require a fee to be paid by the patient, it must be explained to the patient that these are being provided in a private capacity separate to the HSC funded Sight Test so that the patient is clear as to the costs and detail of the services being provided.

It is essential that the patient does not feel under obligation to undertake, and pay for, these additional tests as part of the provision of their GOS sight test or HSC funded Enhanced Service. Compliance with GOC Standards of Practice in providing GOS or Enhanced Services is essential, please refer to Standard 7 and 16 in particular at the following links:

[7. Conduct appropriate assessments, examinations, treatments and referrals | GeneralOpticalCouncil](#)

[16. Be honest and trustworthy | GeneralOpticalCouncil](#)

3. GOS and "free" sight tests

Any contractor offering "free" sight tests are reminded of the importance of making it very clear to the patient accessing the sight test whether it is genuinely free, in other words funded by the practice, or whether the patient is accessing their GOS eligibility to have a "free" i.e. HSC funded, sight test.

Problems arise if a patient is not aware that they have been provided with a GOS sight test and therefore may not access HSC funded care until they are next due as aligned to the GOS sight test intervals. Please read [MOS 282](#) carefully as a reminder of guidance in regard to "free" sight test provision.



4. GOS and 'Second Opinions' – a reminder of guidance

There is a continuum of queries and complaints received by HSC from patients who have sought a "second opinion" and did not know/understand that a GOS voucher could not be issued following the second, private, sight test.

Practitioners are reminded that, in line with MOS 303 ([access in MOS Library](#)), any patient who attends a practice expressing concerns about a previous sight test should be encouraged to return to the original practice to resolve the problem. It should be made very clear to the patient that if a sight test is provided as a "second opinion" (following agreement with the patient), that it cannot be provided under GOS. Furthermore as the sight test is being provided in a private capacity the patient should be advised that any prescribed glasses resulting from that private eye examination are also a private transaction. Please read [MOS 303](#) carefully and ensure that patients seeking "second opinions" are advised appropriately.

5. NI PEARS

- ✓ **a reminder to check for previous claim activity**
- ✓ **guidance & information shared with GPs**
- ✓ **guidance for patients who have had recent surgery**

NI PEARS has enjoyed tremendous success since its initial implementation. Currently approximately 3000 patients per month attend for an NIPEARS assessment, a significant increase from 2000 per month in 2019. NI PEARS is provided in 266 Optometry contractor practices and currently 518 individual optometrists are accredited to provide the service. Analysis of service claims demonstrates that approximately 80% of patients who receive an NI PEARS assessment are fully managed in optometric practice with 12% requiring urgent referral to Eye Casualty.

Given this substantial level of clinical activity ALL optometrists in contractor practices (supported by their staff) are reminded of the need to check with all patients who present for an NI PEARS assessment, if a previous assessment has been provided, particularly within the past year. Many patients may not be aware of NI PEARS as a named service but may have accessed a 'free-of-charge' service for an acute eye problem in the past. It is important to ask appropriate questions at the time of making the appointment including "have you attended anyone else with this problem already e.g. your GP, pharmacist or another optometrist?" If the answer to this is "yes" the patient should be directed back to the clinician who has already undertaken management of their condition. Contractors and staff are asked to check for previous claims history prior to undertaking an assessment as eligibility rules for NI PEARS apply.



In addition you are encouraged to refer to the service as NI PEARS when discussing with patients so that they have and can retain an awareness of what HSC funded service they are receiving and provide with the NIPEARS information sheet previously sent out to practices with the window sticker.

It is appreciated that GPs direct patients for NIPEARS assessments who do fall into the eligible criteria. It is challenging to manage patient expectation if they have been advised that they will be seen “today and for free under NIPEARS” and NIPEARS is not the appropriate service for them. Guidance has been issued on several occasions to GP practices, most recently in May. Attached is a copy of this GP guidance which may be useful if you need to in contact a local GP practice about the appropriate use of NIPEARS: GP Acute Eyecare Information :NIPEARS Triage

NOTE: Patients with acute problems following recent ocular surgery

Patients who develop an acute problem **within 6 weeks** of ophthalmic surgery e.g. cataract surgery, should not be managed under NIPEARS but should be directed back to the hospital and ophthalmologist that performed their surgery. The patient should have been given this advice and provided with contact phone numbers at the time of discharge following their surgery.

6. Using eReferral and Access to NIECR and changes to the CCG templates

As stated in the previous Bulletins noted above, if you are not a user of the electronic referral system (CCG) or NIECR you are strongly advised to arrange to have access to both of these applications.

Information on NIECR is hosted at the following link: [NIECR Resources \(hscni.net\)](http://hscni.net/NIECRResources) and you are encouraged to utilise NIECR to assist in your care for patients.

CCG information is hosted at the following links:

- I. [Electronic Referral & CCG Information \(hscni.net\)](http://hscni.net/CCGInformation)
- II. [Electronic Referral & CCG Training Videos \(hscni.net\)](http://hscni.net/CCGTrainingVideos)

The application forms for NIECR and the notification form to request a CCG user account for a member of staff are both hosted on the HSC Optometry Portal via the “[Optometry eForms](#)” link. If you have any queries in relation to NIECR or CCG please email ophthalmic.services@hscni.net

Optometrists are reminded that ophthalmic services staff cannot reset passwords and contact details for the IT helpdesk are by email supportteam@hscni.net or by telephone on 028 9536 2400.

Continued Professional Development (CPD)



The new CPD system has now been running for 6 months so you are likely very familiar with the changes. Remember you are no longer awarded points from providers, the onus is on registrants to claim points either from registered provider led sessions or from other learning elsewhere you may have found useful. These are classified as self-directed learning sessions and allow flexibility of learning that may be useful but not from an accredited provider. You will need to provide proof of all learning undertaken and write a reflective statement for each piece you are claiming CPD points for. The GOC website has additional information for anyone not familiar with the new scheme. https://optical.org/media/qo3pshey/cpd_a-guide-for-registrants_v2_june-2022.pdf

Thank you to everyone who completed the recent SPPG CPD/CET survey, it is important to capture the views of the profession locally to ensure training organised is in line with users' needs. As the CPD run by SPPG/BSO is funded from SPPG it needs to be cost effective and relevant to GOS and enhanced service provision. A significant number of you asked for learning on the emerging myopia control treatments. This is certainly a very interesting area but General Ophthalmic Services (GOS) does not support the provision of ophthalmic lenses for the treatment of myopia (myopia control) so funding training would not at this point be appropriate. There are however a number of other organisations who have recently provided training on this subject and attached is a link to a series of lectures the AOP ran on the topic which you may find useful. [Webinar recordings \(aop.org.uk\)](https://www.aop.org.uk/webinars).

It is great so many of you have enjoyed the webinar format we started during the COVID pandemic. It certainly offers a greater flexibility in organising sessions and allows us the use speakers from outside Northern Ireland more easily. The attendance numbers at such sessions was great and often in excess of 300, much greater than we could ever have accommodated at face to face events.

The feedback suggested you are keen to carry on with the remote sessions and we will be continuing with the webinar format for this coming year. It is always a challenge to please everyone at training events and, ensuring the days and times of CPD sessions suit everyone, is impossible. People and practices have varying life and work patterns, childcare responsibilities and free time, therefore we aim to offer sessions at varying times and in line with speakers' availability, so hopefully you will find at least some of the sessions convenient and accessible.

We hope to organise another NI PEARS session in early October, a children's red eye session and a macula/OCT session, so watch out for details of these when speakers have confirmed and book your place.

Please also note the following session which is open for booking currently. This is a LES 2 accredited session, so ensure those LES 2 practitioners in your practice are aware of it. Annual training is mandatory for provision of the LES 2 service but this will be useful learning also for everyone as it will explain the new guidance in respect of patients with angle closure/ narrow angles.

Mon 17th Oct 09.30 -10.45 – “Angles and the Eye - What’s important to know”.

This will be an approved NI LES 2 session (CPD point available)

Dr Anish Jindal – Specialist Optometrist Moorfields Eye Hospital, London
<https://attendee.gotowebinar.com/register/81292815315719435>

Thank you for all your suggestions and feedback to date it really is very useful and essential for ongoing planning of events.



HSC Trust Ophthalmology Waiting Lists

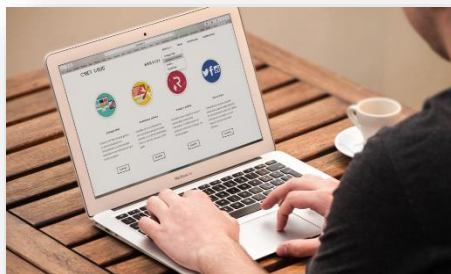
As HSC Trusts rebuild services from reduced pandemic levels, Minister Swann is keen to see all elective areas (including Ophthalmology) up to pre-Covid levels as soon as possible.

The pandemic has undoubtedly had a profound negative effect on service delivery in all clinical subspecialty areas, including cataract. A recent article in “Optometry Today”, the journal of The Association of Optometrists (*Volume 62:03, June/July 2022*) has caused a degree of consternation around cataract waits among practitioners and patients alike. Some of the figures quoted in the article, around routine waits, particularly those on Western HSC Trust lists, are not formally recognised within the normal HSC reporting system, and efforts are being made to validate both source and accuracy.

However, in order to allow you, the practitioner, to have an informed discussion with a patient presenting with cataract, and whom you feel might benefit from referral, Ophthalmic Services has asked SPPG Waiting List Management Unit (WLMU) to consider a process where accurate, consistent, and up-to-date information on average waiting times for cataract assessment and surgery is made available to you on a regular, consistent basis.

Whilst you are reminded that decisions on whether to refer should always be made in the patient's best interests, and informed by existing HSC [Cataract Pathway Referral Guidance](#), it is hoped that access to WLMU data will help inform clinical decision-making and choice during your patient consultation.

We will keep you updated on progress on this important area.



GOC Public Perceptions Research

Recently-published research commissioned by the General Optical Council¹ (GOC) makes for interesting reading.

[¹GOC reveals insights from public perceptions research | GeneralOpticalCouncil](#)

This 2022 public perceptions research¹ gathers insight into the public's views and experiences of opticians/optometrist practices in the UK. The research measures and tracks experiences and perceptions over time. This year, public satisfaction remains high, with **94 per cent** of respondents who had had a sight test/eye examination in the last two years reporting they were satisfied with their last visit to an opticians/optometrist practice.

Key findings include:

- **34 per cent** of respondents said they would go to an opticians/optometrist practice first if they woke up with an eye problem – an all-time high for the profession and in line with those who would first approach a GP (35 per cent). Differences were found between nations: 51 per cent of respondents in Scotland would go to an opticians/optometrist practice first, compared to 45 per cent in Northern Ireland, 42 per cent in Wales and 27 per cent in England.



- **42 per cent** of respondents stated that they would consider undertaking their sight test or eye examination remotely, with **more than half** of respondents (52 per cent) being likely to choose a service in which a computer diagnosed an eye condition without an optometrist being involved.
- **87 per cent** said they were satisfied with the protections in place during their last optician visit to protect them from coronavirus.

The figure of 45%, the percentage of people who would contact their optometrist with an acute eye problem (above) is encouraging. It demonstrates a high level of public awareness in the existence, and clinical effectiveness of, NI PEARS and provides evidence that the service can have the desired impact on reducing attendances in both eye casualty and general practice. Patients increasingly know that the service is there, and that it works.

Other figures to note are very high satisfaction rates with community optometry-delivered services in N.Ireland, and low levels of complaints. There are also some useful insights into the potential use of AI and remote diagnosis in future eye examination modalities.

Ophthalmic Information and Support

If you have a query you can receive advice using the following sources of information:



1. SPPG, DoH Ophthalmic Services: ophthalmic.services@hscni.net
2. COVID-19 Online Resources:
 - COVID-19 Public Health Agency Advice:
<https://www.publichealth.hscni.net/>
 - HSC Optometry COVID-19 information:
<http://www.hscbusiness.hscni.net/services/3120.htm>
3. General Optical Council: [News | GeneralOpticalCouncil](#)
4. College of Optometrists: [Home - College of Optometrists \(college-optometrists.org\)](http://college-optometrists.org)