

## OPHTHALMIC SERVICES

**COVID-19 UPDATE: No: 3**

**10 APRIL 2020**

- **COVID-19:** For all relevant COVID-19 pandemic information please ensure that you check the webpage <http://www.hscbusiness.hscni.net/services/3120.htm>
- **Evidence of Key Worker Status:** Please [click here](#) for a template letter which you can download and use to evidence that you are a key worker. You are permitted to use this should you be asked to provide evidence that you are a key worker whilst travelling to and from work. HSC Board is also working with Communications colleagues to secure a consignment of car stickers to denote HSC key worker status. HSCB will provide more details in a forthcoming bulletin.
- **Financial Support:** Please note that it is hoped that the Business Services Organisation (BSO) will provide details of the application process for Contractors who wish to avail of the HSC financial support service (FSS) for the time of the COVID-19 pandemic. The **BSO will communicate** this information and it is expected that Contractors will have a short time frame in which to consider the information, the requirements and the process. Please ensure that you regularly check your emails for this information in the incoming 7-10 days. On receipt of this please contact the BSO for queries relating to the FSS process.
- **Practice Allowance:** Many Contractors have applied for the Optometry Practice Allowance for the year 2019-20, pending completion of the annual Optometry Quality Assurance (QA) and enhanced service provision declarations (for 2020-21). The information to enable practices to complete their return and therefore receive the allowance, will be issued from HSCB within the 10/14 days.
- **Practice Contact:** The HSCB thank all Contractors who have worked hard to establish a level of business continuity, your support and commitment to service provision and care of your patients at this time is very much appreciated. Contractors are asked to ensure that, where possible, practice answering machines or, telephone divert, provide adequate information on how advice and services can be accessed. This is of particular importance during the upcoming Easter break when practices may be closed and patients require help.

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- **Public information:** The HSCB communications team have issued advice to the public on the HSCB website and through social media advising on how to access all of the primary care services including optometry. People with any concerns about their eyecare advised to contact their local optometrist. The information can be viewed at the following link: [Coronavirus \(COVID-19\) - HSCB](#)
- **Specific payments:** The HSCB are currently processing the payments to Contractors for the following where a return has been receipted:
  - **COVID-19 Business Continuity Plan**
  - **2020 Northern Ireland Sight Test Survey**
- **Personal Protective Equipment (PPE):** HSC Board is pleased to have access to appropriate levels of PPE recently endorsed by Health Silver, and approved by Health Gold. Ophthalmic services team is now engaged in scoping the procurement and logistical deployment of this resource, the nature of which is laid out in Department of Health CMO communication HSS MD 20 2020 ([click here](#) to read the letter, [click here](#) to view poster).

Further communication on use, disposal, and safeguarding of the scarce, valuable, but necessary, commodity will be available in the next bulletin.

## Essential and Urgent Clinical Services

- **Essential provision (GOS)**

You are reminded that 'essential' GOS services as outlined in [Bulletin No2](#) above should be claimed for through the OCS or by paper where applicable.

- **Urgent provision**

For the time of the COVID-19 pandemic, NIPEARS as a service is not currently being provided and has been replaced with this Urgent Care category of service. It is available for any patient who has a NI Health & Care number and who presents with an acute i.e. sudden or very recent serious problem, whether they are normally seen under GOS or privately. While this is broadly aligned to the NIPEARS framework, it is wider and may be provided and claimed for, by **all** contractors, whether NIPEARS accredited or not. All contractor practices are reminded to record their service provision for urgent care on the spreadsheet which was issued to all practices on 3<sup>rd</sup> April 2020 ([hosted here](#), item 21).

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This **urgent** care includes:

- telephone triaging and management of acute eye problems
- video consultation of acute eye problems
- in practice face-to-face examination of acute eye problems

As advised in [Bulletin No 2](#), the spreadsheet is for recording urgent clinical care provided by an optometrist. Telephone calls from or to a patient for the purposes of asking questions in order to decide whether the patient requires a remote consultation with an optometrist do not need to be recorded.

### Referral Guidance

At this time it is important to not only reduce the spread and transmission of COVID-19, but to identify and minimise the risk of **preventable** vision loss. Optometrists should:

- ✓ Balance the risk of significant visual loss and the risk of acquiring COVID-19 by face to face contact
- ✓ Consider that direct patient contact should ideally take place with a clinician capable of making appropriate management decisions
- ✓ Ensure that telephone triage is be a priority for all patients
- ✓ Keep any face to face contact to an absolute minimum

There will be challenges in managing certain clinical scenarios in this COVID-19 period. Please feel free to contact any of the advisers if you need support at anytime.

Two specific clinical scenarios are detailed:

#### 1. Patients with New and Sudden onset of Diplopia

If a patient contacts your practice with symptoms of diplopia the initial telephone triage should establish if it is new diplopia and any other presenting or associated risk factors.

- Remember if the patient is diabetic or has other comorbidities a face-to-face appointment may put them at more risk of COVID-19
- Consider who the most appropriate person to manage the diplopia is

Normally a **new presentation of diplopia** would be sent to eye casualty. Currently best advice for these patients, once you have established the facts, is to contact eye casualty and they will manage these patients in conjunction with orthoptic services. Please advise the patient that this may initially be by telephone, so ensure you have up to date contact details for patients. Remember at this time, seeing the patient face to face may be an additional unnecessary risk for everyone.

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If a patient has previously had a Fresnel prism fitted to their glasses and has lost or damaged it, and is subsequently complaining of diplopia, do **not** send/refer these patients to eye casualty or local orthoptic clinics. Try and contact the patient's local clinic and be mindful cover at these clinics may not be on a daily basis but messages are being dealt with and triaged.

If it is a previously diagnosed condition remember advising the patient to cover one eye will help in the interim until a longer term solution is practicable.

### **2. Urgent Hospital Refractions**

The Hospital Eye Service(s) have protocols in place for triaging and managing urgent refraction cases. If a patient has been refracted in the Trust they will receive a GOS (V) in the normal manner and a PD measurement will have also be provided. The patient may also, in some cases, have been provided with a frame which has already been adjusted to fit the patients. In this scenario, a patient/their carer will be advised to first make contact with the Optometry practice of choice by telephone, to arrange to have their glasses made up. Therefore, in some cases, you will just be required to make up the prescription as per the GOS voucher using the frame supplied – thereby reducing direct patient contact at this time of COVID-19 pandemic.

In cases were a patient does not have a frame provided by HES, you are advised to think carefully about the arrangements for dispensing in practice, including the consideration if it is better for you to make a professional judgement as to the best frame and dispensing it.

***Please, in all cases .....***

- ✓ ***Give telephone advice where appropriate***
- ✓ ***Only arrange a face- to-face assessment if it is in the patient's best interest***
- ✓ ***Be mindful that 'normal' practice and protocols need to be adapted***

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### Ophthalmic Advice and Support

If you have a query you can receive advice from the following people:

Janice McCrudden: [janice.mccrudden@hscni.net](mailto:janice.mccrudden@hscni.net)

Fiona North: [fiona.north@hscni.net](mailto:fiona.north@hscni.net)

Margaret McMullan: [margaret.mcullan@hscni.net](mailto:margaret.mcullan@hscni.net)

Scott Drummond: [scott.drummond@hscni.net](mailto:scott.drummond@hscni.net)

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COVID-19 Pandemic Online Resources:

HSC Optometry COVID-19 information:

<http://www.hscbusiness.hscni.net/services/3120.htm>

COVID-19 Public Health Agency Advice: <https://www.publichealth.hscni.net/>

General Optical Council:

[https://www.optical.org/en/news\\_publications/Publications/joint-statement-and-guidance-on-coronavirus-covid19.cfm](https://www.optical.org/en/news_publications/Publications/joint-statement-and-guidance-on-coronavirus-covid19.cfm)

College of Optometrists: <https://www.college-optometrists.org/the-college/media-hub/news-listing/coronavirus-2019-advice-for-optometrists.html>