

Optometry Practice Newsletter

VOLUME 7: Issue 1 –September 2018

As summer draws to a close and minds and bodies are hopefully refreshed after a little down-time, this latest edition of your newsletter should give a flavour of ongoing work and activities across Northern Ireland's eyecare services.

In this edition primary eyecare colleagues will note outcomes from the 2017/18 Annual Quality Assurance returns. Your participation and engagement in this exercise is much appreciated. The annual QA returns help to improve governance and patient outcomes, and this high return rate is commendable. Also in this issue is important information on Enhanced Services, and also on ophthalmic prescribing. As always, cognisance and adherence to the NI Formulary is much appreciated (<http://niformulary.hscni.net/Formulary/Adult/PDF/PrescribingGuidelinesForDrEyEyeManagement.pdf>)

During the summer, planning and developments continued across important elements of healthcare policy: [Health and Wellbeing 2026: Delivering Together](#). As we continue to “expand capacity and capability in primary care” HSC Board are working with Belfast HSC Trust to roll out enhanced services aimed at monitoring stable ocular hypertension in the community setting. This initiative will be supported and underpinned Project ECHO®. In terms of improving the interface between primary and secondary care, a further new Project ECHO® knowledge network is being established with a Western HSC Trust hub sharing knowledge and experience with their optometry hinterland community, and I know many of you are enthused and excited by this development.

In addition, a long-awaited pilot of primary care optometry access to NIECR is primed to commence. We see this timely interface as having enormous patient, practitioner, and system benefits, integrating care and services.

Finally, work continues apace on the development of Elective Care Centres for cataract. These prototype centres aim to offer high volume surgical interventions, reducing waiting times and improving lives.

A handwritten signature in black ink, appearing to be 'Raymond Curran', is written over a white rectangular background.

Raymond Curran, Head of Ophthalmic Services

QUALITY ASSURANCE PROCESSES FOR OPTOMETRY CONTRACTORS

In the past few weeks the HSCB, with the support of contractor practices, have completed two quality assurance processes for Ophthalmic Service provision.

- 2017/18 Annual practice QA process
- Enhanced Service QA process

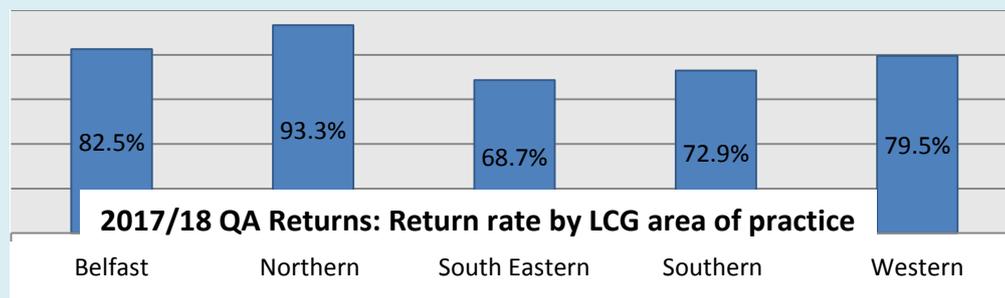
Thank you to all contractor practices that submitted their returns for both these QA processes; your support is appreciated



Optometry Annual Quality Assurance – Practice Returns

The annual QA returns deal with important elements of good governance including; complaints, adverse incidents, the implementation of ophthalmic service guidance.

- ✓ 81% of all Contractors submitted their annual return with return rates varying across LCG area as noted below



Seven contractor practices provided information in relation to **complaints** which they had dealt with during 2017/18. The majority of these complaints were informal complaints relating to ‘Treatment and Care’ and ‘Clinical/Professional Diagnosis’.

Contractors are reminded of **two important statutory obligations** in respect of the receipt and management of complaints:

- The need to have a formal complaints policy within their practice which patients can readily note and access
- The need to comply with HSC complaints procedures and inform the HSCB of formal written complaints within 3 days of receipt of the complaint

Other aspects of good governance such as; the receipt, dissemination and implementation of ophthalmic regulations, advice and guidance; business continuity planning and adverse incident reporting were also addressed in the annual QA return process for 2017/18. **Contractors, and individual optometrists**, should be aware of their responsibilities in respect of the reporting of adverse incidents. Full information on the process including the forms which are in place to report them are found at the following link (or [click here](#))

Adverse Incident Info: <http://www.hscbusiness.hscni.net/services/2563.htm>

Optometry Enhanced Service Provision – Practice Returns

From 2018 the Health and Social Care Board (HSCB) require **ALL practices that provide any one OR all of the enhanced services** which are in place at that time, to provide a declaration and return to the HSCB in respect of the services provided. If a contractor practice does not provide their declaration and return in respect of enhanced services accreditation to provide services will be suspended and services cannot be provided until the process for assurance is completed and processed by the HSCB. In 2017/2018, twenty practices did not submit their declarations and practice return in relation to enhanced service provision and accreditation was suspended.

OPTOMETRISTS PLEASE NOTE: NEW eHEALTH DEVELOPMENT!



Contractors and individual Optometrists will be aware from previous issues of the HSCB Optometry Practice Newsletter of the HSCB eHealth strategy **and the plans for Ophthalmic Services therein**. Over the past months plans were made and work progressed to enable Optometrists to gain access to the Northern Ireland Electronic Care Record (NIECR) and in particular, to develop a dedicated “Optometry-view NIECR” for primary care Optometrists. The NIECR will only be accessible from practices that are CCG enabled.

Optometrists who are using eReferral via CCG will be provided with NIECR user accounts which will allow them to look up and review relevant medical and ophthalmic information on their patient(s).

Northern Ireland Electronic Care Record
Information for Better Care

Please enter your user ID and password

User ID ?

Password

After an initial test pilot involving several Optometrists, the HSCB intend to roll out access **to optometrists who are using eReferral**. Unlike CCG user accounts an NIECR account is NOT specific to an Optometry practice and therefore these Optometrists will be

provided with ONE NICER user account..

IF YOU ARE AN OPTOMETRIST WHO USES eREFERRAL PLEASE ENSURE THAT YOU CHECK YOUR PRACTICE HSCNI EMAIL INBOX FOR THIS IMPORTANT COMMUNICATION. IT IS ANTICIPATED THAT THE COMMUNICATION WILL TAKE PLACE IN LATE SEPTEMBER/EARLY OCTOBER 2018.

****THE BENEFITS FOR OPTOMETRISTS & PATIENTS ARE SIGNIFICANT****

Optometrists who receive an NIECR account will be provided with access to essential NIECR governance information and online training resources. Access to the NIECR will provide Optometrists with a valuable opportunity to be fully informed about their patient’s ophthalmic and medical information and prior/current care which they have accessed in the hospital eye service. It will mean that Optometrists are more informed when making decisions about their management of patients **supporting clinical care and use of HSC resources and facilitating continuity of care.**

It is ‘trending’.....be a part of it?

Good communication is a key requisite in dealing with patients, service users, carers and other health care professionals. Mindful, effective and respectful communication is of utmost importance in health care provision. In recent years and months two high profile campaigns within health and social care have attempted to improve communication between health care professionals and patients and also communication between health care professionals. These movements within health and social care are aimed at breaking down barriers, building relationships and promoting compassionate care.

Hello my Name is ...

<https://www.hellomynameis.org.uk/>

This campaign started in 2013 and aims to ensure that all care professionals being all interactions with their patients/service users by introducing themselves. 'Hello my name is' can be used by anyone involved in care, administrative staff and clinical staff and further

information and resources are available at the link above (or [click here](#))



#DearColleague

This campaign was launched in March 2018 by the Royal College of General Practitioners in Northern Ireland. It aims to highlight the value and importance of using a 'Dear colleague' or personal greeting when health care professionals in all sectors communicate with each other – primary and secondary care. Respectful communication in referral letters, emails, social media and other fora demonstrates that as a health care professional, you are part of the one health and social care team. For further information please follow the following links:



[RCGP NI #DearColleague campaign](#)

[Interface work in Wales - Principles to improve effective communication](#)

Ophthalmic Public Health

It's National Eye Health Week24th – 30th September 2018

National Eye Health Week takes place this year from Monday 24th – Sunday 30th September. The week affords all eyecare professionals the opportunity to raise public awareness about the importance of eye health and eyecare.

A wide range of resources are available to assist in the promotion of eyecare and increasing public awareness of the importance of eye examinations. The catch phrase "My vision matters because...." is an ideal way of articulating and communicating the value and importance of eyecare and eye health.

National Eye Health Week can be celebrated both 'in practice' and 'out of practice' using the promotional materials and the various social media channels. For more information please visit the website at the following link (or [click here](#))

National Eye Health Week: <http://www.visionmatters.org.uk/>

Go onget involved!!



It's World Sight DayThursday 11th October 2018

This year World Sight Day is being held on 11th October and once again the overarching aim of the day is to create awareness about vision impairment, blindness and other sight related problems. World Sight Day was created and launched as an annual event to raise public awareness and understanding of the significance of providing support to people who cannot see properly and concentrates particularly on what all can be done to assist people with such conditions. This year the call to action and focus is “[Eye Care Everywhere](#)” The IAPB provide promotional materials for World Sight Day and these can be accessed from the IAPB website at the following link (or [click here](#))
[World Sight Day 2018 – Promotional Material](#)

Locally in Northern Ireland World Sight Day is also being celebrated and two conferences are being hosted by Queens University to promote and celebrate World Sight Day 2018. Entry is free, but registration is required, please visit the conferences booking link by clicking the link below.

- **THURSDAY 11th OCTOBER 2018: WORLD SIGHT DAY CONFERENCE**
<https://www.eventbrite.co.uk/e/world-sight-day-2018-tickets-47419550151>
- **FRIDAY 12th OCTOBER 2018: PAN-IRELAND OPHTHALMIC CONFERENCE**
<https://www.eventbrite.co.uk/e/pan-ireland-ophthalmology-day-tickets-47422675499>

Information on the conferences was issued to all contractor practices on 1st August and further information on the events can be obtained by contacting Sara Shields at Queens University (Telephone: 028 9097 1666 | Email: sara.shields@qub.ac.uk)

A lesson in diligence...

It is easy in the course of a busy day and in a busy practice not to take particular notice of everyone around you. A recent letter issued jointly from the Health and Social Care Board and the Public Health Agency (PHA) to all Health and Social Care Trusts advised of an incident where a member of the

public impersonated as a nurse in an A&E department. Health care professionals are reminded of the importance of the diligence of all staff in all clinical settings; this advice is equally relevant in primary care Optometry practices. Please take a minute to read the letter hosted at the following link (or [click here](#)):

[Letter issued to HSC Trusts – Impersonation Incident June 2018](#)

Record Keeping: A Reminder

Comprehensive record keeping and full accurate and contemporaneous records are an essential part of clinical practice, whether they are maintained in paper or, electronic format. This requirement applies to all elements of service provision including; eye examinations; ophthalmic dispensing; contact lens care and enhanced service provision.

Good notes provide a record of the clinical episode (should defence of clinical care be required) and enable optimal continuity of care, but in addition, good records provide the necessary evidence of service provision in consideration of the probity and financial aspects of service delivery.

This applies to not only ophthalmic services provided through HSC funded avenues (General Ophthalmic Services (GOS) **and** Enhanced Services) but also to eyecare provided in a private capacity.

General Information
Name: _____
Age: _____
Sex: _____
Height: _____
Weight: _____
Eye Colour: _____

Current Medication					
Medication	Start Date	End Date	Visual Acuity	Notes	Comments

Visual					
Date	Test	Date	Time	Visual Acuity	Refraction
<input type="checkbox"/>	Monocular				
<input type="checkbox"/>	Binocular				
<input type="checkbox"/>	Distance				
<input type="checkbox"/>	Near				

Please note.....more specific advice on Enhanced Services

Contractors and individual optometrists are reminded that when **enhanced services** are provided there must be clear and unambiguous recording of all elements of service provision including:

- The indicators / reasons for eligibility for the service. ***For example:***
 - Where IOP is elevated beyond 24mmHg and this is recorded, this would be the eligibility criteria/ clinical reason for Level I enhanced service provision – Suspected OHT
 - Where there is a sudden onset of a sore red eye and this is recorded, it would be the eligibility criteria/clinical reason for NI PEARS enhanced service provision

- Where there is a suspicious disc and elevated IOP and this is recorded, this would be the eligibility criteria/clinical reason for Level II enhanced service provision
- The details of any presenting symptoms, previous/relevant history
- The details of the clinical tests performed
- The details of the observations/findings of the clinical tests
- The details of the outcome of the assessment – including where necessary any advice, recommendations, management, referral etc...

Contractors and individual optometrists providing enhanced services should be aware that in a situation where the above elements of record keeping are not recorded, there is the real potential for service provision not to be assured, and any remuneration for the service which had been claimed / paid may be taken back. Please ensure your records are comprehensive to avoid any such issues arising.

Level II LES Accredited Optometrists: **Important - Please Note **

Optometrists providing Level II enhanced service are reminded that in the case of suspect Ocular Hypertension i.e. **where the ONLY clinical indicator is elevated IOP $\geq 24\text{mmHg}$** that in the first instance Level I LES provision should be considered.

Level I enhanced service allows optometrists to repeat the IOP measurement when the initial IOP reading is $\geq 24\text{mmHg}$ in one, or both eyes. In this situation of suspect OHT it would not be known until *after the IOP measurement has been repeated*, if the patient could then step into Level II enhanced service. This is because only, if after repeat measurement, the IOP is still $\geq 24\text{mmHg}$ then the patient would fulfil the clinical criteria for Level II enhanced service. Hence when considering a patient with suspect OHT a Level II accredited optometrist may need to consider the booking of appointment times etc....given the potential outcome of the actual IOP repeat measurement – these possible outcomes are:

1. The IOP repeat measure might be all that is necessitated if IOP on repeat measure is less than 24mmHg (Level I enhanced service)
2. The patient may be eligible for Level II enhanced service if IOP on repeat measure is still $\geq 24\text{mmHg}$ and the patient can therefore proceed directly into Level II enhanced services and the additional investigations that this requires

Keeping information up to date

Contractors are reminded of the process for notification of changes to any aspect of service provision from their practices – this could be a change of practice address/relocation, changed opening hours/days, new staff (and requests for new CCG user accounts for these staff), withdrawal of enhanced service provision, change of ownership etc....

The most straightforward way of notifying the HSCB of a change which affects a practice is to use the updated online/web form hosted on the Optometry portal home page. The form is simple to complete and when submitted triggers the necessary actions within the various HSC organisations to manage and record the notice of change. An image of the webform is noted below highlighted with the red arrow:

For practices that are not currently accessing the FPS Optometry portal paper templates for the notification form are available at the following link (or [click here](http://www.hscbusiness.hscni.net/services/2561.htm)): <http://www.hscbusiness.hscni.net/services/2561.htm>

Reminder to check practice HSCNI email accounts regularly

Contractors are reminded to ensure that their practice HSCNI email account is checked on a daily basis. Email communications are now the primary means by which HSCB relay and issue important ophthalmic service information and guidance. Access to the accounts is from the Optometry portal as noted by the blue arrow above.

Ophthalmic Research: Call for help – Timeframe for recruitment extended



In the [March issue](#) (pg 24) of the HSCB Newsletter contractors and optometrists were advised of the Macustar Research study being conducted by Queens University.

Queens University require the help of primary care Optometrists in the recruitment of participants, and therefore have extended the deadline. It is appreciated that optometrists are busy and committed professionals but without your help this valuable research could not be carried out.

QUB need help from Optometrists **to recruit participants aged between 55-85 years of age, with bilateral soft drusen**. Recruitment is taking place between May2018 - February 2019 and the study visits will take place in the

Clinical Research Facility at Belfast City Hospital. Funding will be provided for patient's travel.

As primary care optometrists you are at the frontline and an instrumental link in the chain and your assistance is highly valued and crucial to this study.

QUB can undertake a visit to your practice to discuss and provide leaflets that you can give to your patients.

For further information on the study see: <http://www.macustar.eu>

To get more information on the inclusion criteria and referral procedure please contact the study Optometrist:

- Ms. Anita Gillen, a.gillen@qub.ac.uk Tel: 07768858583 or
- Dr Ruth Hogg, r.e.hogg@qub.ac.uk Tel: 028 90971654

A Reminder: Prescribing “Stop List” – Ophthalmic Preparations

In past issues of the [HSCB Optometry Newsletter](#) and other [HSC communications](#) Optometrists have been advised of Ophthalmic Preparations which are on the prescribing “Stop List”. Inclusion on the “Stop List” means that the item/medication should NOT be prescribed by a GP or Non-Medical Prescriber via HS21 prescription. The Ophthalmic preparations which have been added to the “Stop List” in recent months are

- Nutritional Supplements for Eye Health/ Eye Conditions ([click here](#))
- Blephaclean Wipes ([click here](#))

Optometrists should advise their patients that these items are **not available under HS21 prescription** and if they wish to access them they should be purchased by the patient.

For further information on the “Deprescribing and Limited Evidence List and Stop List” please visit the NI Formulary Website at the link below (or [click here](#)).

<http://niformulary.hscni.net/DePres/stoplast/Pages/default.aspx>

CET Opportunity

A free CET discussion workshop titled “**Seeing Beyond the Eyes**” will be held in the RNIB in Belfast on 26th September. The session is aimed at optical professionals providing them with information to support patients with sight loss including information on support services and referral pathways.

The course is suitable for Ophthalmologists, Optoms, DOs, CLOs and students. To book a place at the event, please use the following weblink: <https://www.eventbrite.co.uk/e/seeing-beyond-the-eyes-cet-belfast-tickets-45159916526>

Eye Drops: Patients be alert!



The Health and Social care Board have been alerted to a situation where a patient accidentally put Olbas oil into her eye mistaking the bottle for eye drops. The oil caused significant corneal staining and a reduction in vision. Other similar incidents have been reported in the literature and in consideration of this, for any of your patients who are using eye drops on a routine basis, it is worth reminding them to always check the bottle and label before they instil the drops.

Keeping Your Points Up

The Autumn CET event program is agreed and available on the BSO website for your information

<http://www.hscbusiness.hscni.net/services/2961.htm>

There is an interesting program for the afternoon covering many of the topics suggested by yourselves from previous events; PVD's vs Retinal Detachments, Dealing with Dementia and Disc Assessment in Glaucoma. We have been lucky to be able to get Mr Kam Balaggan, Consultant Ophthalmic Surgeon to present. For those of you who have not heard Kam before he is a vitreo retinal surgeon, but also a very engaging speaker. In fact he is a previous winner of “the best NHS teacher of the year award”; so worth the effort of the slightly earlier than normal start for the program. In addition we also have Dr Rakhee Shah an optometrist and lecturer at City University who has published widely

on Dementia. Our final speaker of the afternoon will be Dr Peter Campbell, a Northern Ireland local now working in London. Peter has been involved in shared care glaucoma clinics for many years and so very topical with the current service developments in Northern Ireland.

Please remember as always to pass the word around other colleagues who may not know about the event and secure your place by e mailing gareth.drake@hscni.net. The closing date for bookings is 22nd September 2018. Remember as always to allow plenty of time to get to Greenmount and parked, as we enforce a strict policy of not admitting late arrivals and only those who have attended the whole presentation are eligible for points. The afternoon has been approved for 3 Optometry points and 1 Dispensing Optician point.

We look forward to seeing you there.

GOS Update

Ophthalmic Portal – are you online?

235 optometry practices now have electronic access through the Ophthalmic Portal. Thanks to Portal access, 90% of all GOS claims are now being submitted electronically using the Ophthalmic Claims System OCS. Electronic claiming via OCS has many benefits including

- later date in the month for claim submission: up to 21st day of each month rather than the 10th day for paper claims, giving improved cash flow.
- more rapid issuing of approvals and sorting of claim queries.
- an easier reconciliation process.

Other significant benefits of access to the Ophthalmic Portal include use of CCG e referral, access to a HSC email account and, due within the next few weeks, the facility to access NIECR, the patient's electronic care record. All of these are very useful tools to assist you in the providing care for your patients.

If you are one of the 35 practices not yet having access to the Ophthalmic Portal and would like more advice or support to set it up

please contact the e business team at ebusiness@hscni.net or contact any of the optometric advisers.

Reminder - CET grant 2016 – closing date 30th September 2018

Any practitioner who provided GOS during 2017 should be eligible to apply for the CET grant. A grant application form, BACS payment form and MOS 318 providing information on eligibility and the grant claiming process were issued in early July. These documents may also be downloaded from:

Press control & click on link to open:

[Payments for Continuing Education & Training \(CET\)](#)

The closing date for submission of forms is **30th September 2018** and late claims cannot be accepted.

Please remember that it is your responsibility to check with BSO that your form has been received, within 2 weeks of submitting it. If you have any queries please contact either Angela Dowds tel: 028 95 363752 or any of the optometric advisers.