

FAO: Optometrists, Dispensing Opticians and Optometry Practice Managers in Wales

26.7.2023

Dear Colleagues,

Communication 2: Holding statement, information only- Advance notice of implementation of Wales General Ophthalmic Services

This statement provides an update on key General Ophthalmic Services (GOS) regulations and service provision developments in Wales. More detailed information outlining actions that need to be taken will be provided in weekly bulletins from August. This advance notice provides time for you to consider how the changes may affect you, your workforce and business, and to make any necessary preparations that may be required.

The Welsh Government and NHS Wales have recognised primary eye care as a major part of the solution to deliver exceptional eye care in Wales, with ambitions for more modern, agile and patient-centred primary eye care services. This progressive approach of fully utilising the skills and experience of optometrists and their colleagues, will help to improve the capacity issues currently being experienced by hospital eye services and provide care closer to patients' homes, ultimately improving patient outcomes.

The work underway to implement the new optometry contracted terms of service has been progressing well following national agreement reached between Welsh Government, NHS Wales and Optometry Wales in July 2022, and ratified in the subsequent Ministerial statement of September 2022. This is a welcome step forward for the whole profession in Wales, NHS Wales and the citizens they serve.

The recent Welsh Government consultation "*Proposals to reform the ophthalmic services delivered in primary care in Wales*" closed in June 2023. Following due consideration of the responses received, the required regulatory changes are nearing completion, subject to standard Senedd Cymru processes, with a view to laying the regulations in **September/October 2023**. Whilst regulatory changes will not be confirmed until they are laid before the Senedd, they will come into force (cif) **21 days after** laying the regulations.

1. Minimum standard of service provision in Wales

Core service provision in Wales requires the delivery of WGOS 1 and WGOS 2 services. WGOS 1 services are similar to the current GOS sight test, with additional elements of prevention and well-being advice together with the development of a patient management plan. WGOS 2 services align with current Eye Health Examination Wales (EHEW) services.

All optometrists practicing in Wales, including locums and providers of mobile services (domiciliary), and contractors are required to be EHEW accredited prior to the cif date, alongside 4 new modules (see section 4).

2. Premises and equipment

The minimum standard of service delivery in Wales of WGOS 1 and WGOS 2 services will apply to fixed premises and providers of mobile services (domiciliary).

Providers of mobile services will need to register and complete a declaration with NHS Wales Shared Services Partnership (NWSSP) to confirm the appropriate equipment is available to provide NHS Wales services.

3. Ophthalmic Lists

At the cif date all contractors and practitioners currently on either the Local Health Board (LHB) ophthalmic or supplementary list in Wales, will transition onto a new LHB Ophthalmic List. This list will consist of two parts, the first being for contractors (previous ophthalmic list), and the second being for practitioners (previous supplementary list).

3.1 To remain on the ophthalmic list, contractors will be required to confirm within 28 days of the regulations cif, with their LHB responsible for maintaining the ophthalmic list that.

- a. all practitioners providing WGOS (Primary Ophthalmic Services) have the necessary qualifications to do so (OMP or Optometrist plus EHEW accreditation).
- b. staff performing NHS Wales primary ophthalmic services or employed or engaged to assist in the performance of services, have undertaken all the necessary and required introductory training (section 4).

3.2 Contractors will be required to provide details of all dispensing opticians registered with the General Optical Council (GOC) and employed by the contractor, to the LHB for the purposes of maintaining an administration list of dispensing opticians and contact lens opticians.

3.3 Student optometrists, registered with the GOC and employed by a contractor, are required to be included in part two of the ophthalmic list. This applies to all current pre-registration optometrists. The same duties with regards to undertaking all necessary and required introductory training will apply to student optometrists for inclusion onto the list.

The cif for student optometrists will be later in the financial year, and this is anticipated to cif early in 2024; however, further detailed information will be shared in the coming weeks.

4. Mandatory training prior to inclusion in the ophthalmic list for Wales.

The new mandatory training modules provided by Health Education and Improvement Wales (HEIW) will be available through a new online training platform in September 2023.

This consists of four additional modules (approximately 4 hours in total) and must be completed by all groups detailed below. Further information will follow in future bulletins. -

➤ Optometrists:

- Four online mandatory modules
- Must be EHEW accredited (EHEW training does not need to be repeated for those already accredited).



- **Dispensing opticians**
 - Four online mandatory modules

- **CL opticians who will be providing acute anterior eye assessment under new WGOS 1.**
 - Four online mandatory modules
 - Must be EHEW accredited to provide this service (EHEW training does not need to be repeated for those already accredited).

- **Other practice staff deemed by the contractor to be engaged or assisting in the performance of WGOS services (delegated tasks)**
 - Four online mandatory modules

5. Duty to make available a basic appliance

At the cif date, all contractors who provide optical appliances will have a duty to make available appropriate spectacles to patients who are entitled to an optical voucher, and at no additional cost to the value of the voucher (free of charge to the patient). This does not prevent the patient from upgrading their frames and lenses if they wish, neither does it prevent the contractor from making appropriate charges for the patient to do so.

6. Agreement of core clinical hours between the contractor and the local health board

Contractors already have a duty to inform the LHB of their opening hours and any variation of their opening hours; however, as WGOS core services will now include WGOS 1 and WGOS 2 services, planning and delivery of clinical services becomes essential for LHBs. Therefore, the times that contractors provide “clinical services” (WGOS 1 and WGOS 2) will replace the current “opening times” duty. The clinical opening hours will be agreed between the contractor and their LHB.

7. Quality for Optometry

Quality for optometry (and associated payments) consists of four elements which are included in regulations:

- a. Workforce reporting.** At the cif date, contractors will have a duty to provide workforce data for all registrants working within their practices (quarterly reporting). Further details will be provided with regards to the mechanism of reporting, and cross referenced to the ophthalmic and administrative lists described above and used for service planning and delivery by LHBs.
- b. Quality for Optometry.** Annual submission of a nationally agreed template - further details will follow in a future bulletin.
- c. Foundation in Quality Improvement.** Completion of this will be a requirement for anybody performing primary ophthalmic services or employed or engaged to assist in the performance of services (mandatory training section 4)
- d. Audit (data collection).** Completion of annual national audits (up to 3 audits per annum)- further details will follow in a future bulletin.

8. Optometry Cluster Collaboratives

The Optometry Collaboratives network of professionals, with shared expertise and working together to use their unique skills, will assess the needs of their local cluster populations. Collaboratives will capture the knowledge and experience of local professionals to map service provision, identify gaps and consider solutions to address development needs. Working with professional peers and across service boundaries enables the workforce to deliver the appropriate standards of care for patients and to advocate for their community to achieve wider system improvements.

At the cif date there will be a duty placed upon contractors to develop Optometry Cluster Collaboratives. This structure will support connection with peers to review the quality and safety of local services, share experience and good practice for the area of expertise and to advocate for service improvement. Further details will follow in a future bulletin.

9. Referrals

At the cif date where a contractor, or qualified practitioner assisting the contractor in the provision of primary ophthalmic services, is of the opinion that a patient who has received a sight test shows on examination signs of injury, disease or abnormality in the eye or elsewhere which may require medical treatment; or is not likely to attain a satisfactory standard of vision notwithstanding the application of corrective lenses, the contractor must, if appropriate, and with the consent of the patient, take the following steps:

- a. in the first instance, a referral to an optometrist with qualifications appropriate to the needs of the patient.
- b. if the contractor considers that a referral of the kind specified in paragraph (a) would not meet the patient's needs, a referral to an ophthalmic hospital.

This important change requires optometrists to refer patients, in the first instance and where appropriate, to a practice providing WGOS 3, WGOS 4 or WGOS 5 services.

We appreciate there will be further detail that contractors and practitioners will require. This detail will be provided through weekly bulletins and regular webinars for the profession over the coming weeks and months.

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