

Y Grŵp Iechyd a Gwasanaethau Cymdeithasol

Health & Social Services Group



**Llywodraeth Cymru
Welsh Government**

LHB Directors of Primary, Community and Mental Health Services
LHB Directors of Finance
Optometrists and Ophthalmic Medical Practitioners on LHB lists

Eich Cyf/Your Ref:
Ein Cyf/Our Ref:

01 September 2021

Dear Colleague

GENERAL OPHTHALMIC SERVICES – NHS SIGHT TEST FEE, NHS OPTICAL VOUCHER VALUES, PAYMENTS FOR CONTINUING EDUCATION AND TRAINING AND PRE-REGISTRATION SUPERVISORS GRANT

Summary

1. I am writing to notify you of the:

- a) NHS sight test and NHS domiciliary fees from 1 April 2021;
- b) Optical voucher values from 1 April 2021;
- c) Hospital Eye Service maximum patient charge from 1 April 2021;
- d) Continuing education and training payment for 2020, payable in 2021; and
- e) Grant payable to supervisors of pre-registration trainees from 1 April 2021.

2. Please could you bring this information to the attention of all staff dealing with general ophthalmic services, i.e. clinicians, optometrists, ophthalmic medical practitioners and other staff concerned with the hospital eye service.

3. Local Health Boards should ensure that copies of this letter are distributed to all optometrists and ophthalmic medical practitioners in their areas.

NHS Sight Test Fee and NHS Domiciliary Fee

4. The NHS sight test fee has increased to £21.71 from 1 April 2021. For superannuation purposes please note that for ophthalmic medical practitioners the practice expense component of the sight test fee will be £5.51 from April 2021.

5. For NHS domiciliary visits carried out on or after 1 April 2021, the fee is £38.27 for the first and second patients seen at one visit and £9.58 for the third and subsequent visits.

NHS Optical Voucher Values

6. NHS optical voucher values and supplements will remain at the same level as 2020/21 – Annex 1 refers.

Maximum Patient Charge within the Hospital Eye Service

7. From 1 April 2021, the Hospital Eye Service maximum charges (Annex 2) will continue to be:

£70.00 for single vision lenses;
£113.80 in any other case; and
£57.00 per contact lens.

Payments for continuing education and training (CET)

8. The payment for 2020, in respect of continuing education and training, undertaken by optometrists and ophthalmic medical practitioners, without another medical appointment (i.e. who do no other remunerative work but the testing of sight) will increase to £584.

9. Payments will be made in respect of claims made by optometrists and ophthalmic medical practitioners relating to CET training undertaken during the year from 1 January to 31 December 2020. This year, the period during which optometrists and ophthalmic medical practitioners may make their claims will be from 1 September 2021 to 30 November 2021.

10. Payments should be made in accordance with the Statement of General Ophthalmic Services Remuneration at Annex 3.

11. A more detailed note on the payment is attached at Annex 4 with a claim form at Annex 5. Local Health Boards are asked to provide optometrists and ophthalmic medical practitioners listed with them a copy of the note at Annex 4, the guidance note on completing the claim form at Annex 5 and a copy of the claim form at Annex 6.

Pre-registration supervisors grant

12. From 1 April 2021, the allowance paid to supervisors of pre-registration trainees will increase to £3,762. Claims from trainers taking on pre-registration trainees on or after 1 April 2021 should be paid at this new rate.

13. A copy of this letter and the Annexes will be placed on the eye care website at <http://www.eyecare.wales.nhs.uk/legislation>

14. If optometrists or ophthalmic medical practitioners have any queries then they should contact their Local Health Board or Primary Care Services at the NHS Wales Shared Services Partnership (NWSSP).

Yours sincerely

A handwritten signature in black ink that reads "Claire Cullen". The signature is written in a cursive style with a small mark above the 'i' in "Claire".

Claire Cullen
Primary Care Division

cc Optometry Wales
NHS Wales Shared Services Partnership – Primary Care Services

Annex 1

Voucher Values and Supplements from 1 April 2021 Type of optical appliance	Value
A. Glasses with single vision lenses of a spherical power of not more than 6 dioptres with a cylindrical power of not more than 2 dioptres.	£39.10
B. Glasses with single vision lenses- (a) of a spherical power of more than 6 dioptres but less than 10 dioptres with a cylindrical power of not more than 6 dioptres; (b) of a spherical power of less than 10 dioptres with a cylindrical power of more than 2 dioptres but not more than 6 dioptres.	£59.30
C. Glasses with single vision lenses of a spherical power of 10 or more dioptres but not more than 14 dioptres with a cylindrical power of not more than 6 dioptres.	£86.90
D. Glasses with single vision lenses- (a) of a spherical power of more than 14 dioptres with any cylindrical power; (b) of a cylindrical power of more than 6 dioptres with any spherical power.	£196.00
E. Glasses with bifocal lenses of a spherical power of not more than 6 dioptres with a cylindrical power of not more than 2 dioptres.	£67.50
F. Glasses with bifocal lenses- (a) of a spherical power of more than 6 dioptres but less than 10 dioptres with a cylindrical power of not more than 6 dioptres; (b) of a spherical power of less than 10 dioptres with a cylindrical power of more than 2 dioptres but not more than 6 dioptres.	£85.60
G. Glasses with bifocal lenses of a spherical power of 10 or more dioptres but not more than 14 dioptres with a cylindrical power of not more than 6 dioptres;	£111.20
H. Glasses with prism-controlled bifocal lenses of any power or with bifocal lenses- (a) of a spherical power of more than 14 dioptres with any cylindrical power; (b) with a cylindrical power of more than 6 dioptres with any spherical power.	£215.50
I (HES) Glasses not falling within any of paragraphs 1 to 8 for which a prescription is given in consequence of a testing of sight by an NHS Trust.	£200.80
J Contact lenses for which a prescription is given in consequences of a sight test by an NHS trust or Local Health Board or NHS foundation trust.	£57.00

Note:

1. Where the small glasses supplement or special facial characteristics supplement applies, the amount payable for repair of:

the front of the frame is £57.00
the side of the frame is £30.80
the whole of the frame is £64.20

2. Where more than one repair is made to an optical appliance, the total paid must not exceed the aggregate of the amounts for replacing two lenses in the above schedule, and repairs to the part of the frame must not exceed £14.80.

Replacement - Contact lenses

3. If only one of a pair of contact lenses is replaced the voucher value is £57.00. These provisions for contact lenses only apply to clinically necessary contact lenses prescribed by the HES.

Maximum Charge

From 1 April 2021 the HES maximum charges will be:

£70.00 for single vision lenses; and
£113.80 in any other case.

Charge for Contact Lenses

From 1 April 2021, the charge for contact lenses will be £57.00 per contact lens supplied.

SUBORDINATE LEGISLATION

2016 No. 6**NATIONAL HEALTH SERVICE (WALES) ACT 2006****The National Health Service (Charges for Optical Appliances) Directions
2016**

Made 31 March 2016

Coming into force 1 April 2016

The Welsh Ministers, in exercise of the powers conferred by section 128 of the National Health Service (Wales) Act 2006⁽¹⁾ and regulation 2(1) of the National Health Service (Optical Charges and Payments) Regulations 1997⁽²⁾, makes the following Directions:

Title, commencement and application

1.—(1) The title of these Directions is the National Health Service (Charges for Optical Appliances) Directions 2016, and come into force on 1 April 2016.

(2) These Directions apply in respect of the supply of glasses or contact lenses by a Local Health Board, or other persons acting on behalf of a Local Health Board, where the testing of sight leading to the supply of glasses or lenses, or the first such testing, takes place on or after 1 April 2016.

Interpretation

2. In these Directions—

“the Act” means the National Health Service (Wales) Act 2006;

“actual cost of lenses” means the amount equal to the cost to the Local Health Board, or other persons acting on its behalf, of the purchase of the lenses;

“dispensing cost” means the amount equal to the cost to the Local Health Board, or other persons acting on its behalf, of the dispensing of the lenses; and

“full cost of a frame” means the amount equal to the cost to the Local Health Board, or other persons acting on its behalf, of the purchase of—

in the case of an adult, an adult’s frame; and

in the case of a child, a child’s frame.

Maximum charge for lenses

3. —(1) The maximum charge for lenses is an amount equal to—

- a) in the case of a single vision lens, £70.00; or

⁽¹⁾ 2006 c.42.

⁽²⁾ S.I. 1997/818.

b) in the case of all other lenses, £113.80,
and “appropriate maximum charge” will be construed accordingly.

Charge for glasses

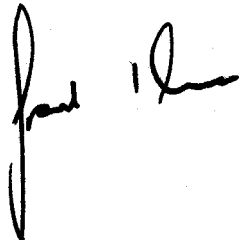
4. —(1) The charge payable in respect of the supply of glasses is determined in accordance with the following provisions.
- (2) Subject to paragraph (4), where the actual cost of the lenses and the dispensing cost is together less than an amount equal to the appropriate maximum charge, the charge payable is an amount equal to the total amount of—
- a) the actual cost of lenses;
 - b) the dispensing cost; and
 - c) the full cost of the frame.
- (3) Where the actual cost of the lenses and the dispensing cost if together equal to, or greater than the appropriate maximum charge, the charge payable is an amount equal to the total amount of—
- a) the appropriate maximum charge; and
 - b) the full cost of the frame.
- (4) In the case where it is clinically necessary to supply a frame the cost of which is more than the cheapest full cost of a frame in an adult or child’s range supplied by the Local Health Board or by other persons acting on behalf of the Local Health Board, the charge payable for the frame is an amount which must be equal to the cost of the cheapest full cost of a frame in the range supplied.

Charge for a contact lens

5. The charge authorised by section 128 of the Act in respect of the supply of contact lenses under the Act is to be £57.00 for each contact lens so supplied.

Revocation

6. The Directions to Local Health Boards 2015(3), which came into force on 1 April 2015, are revoked.



Signed by Dr. Grant L. Duncan, Deputy Director, Primary Care Division, under the authority of the Minister for Health and Social Services, one of the Welsh Ministers

Date: 31 March 2016

STATEMENT OF GENERAL OPHTHALMIC SERVICES REMUNERATION

The Welsh Ministers, in exercise of the powers conferred by sections 76 and 77 of the National Health Service (Wales) Act 2006⁽⁴⁾ and regulation 10 of the National Health Service (General Ophthalmic Services) Regulations 1986⁽⁵⁾, after consultation with the organisation recognised by them as representing contractors providing general ophthalmic services, make the following determination.

Part 1

Title, Commencement and Interpretation

Title, commencement and interpretation

2.—(1) The title of this determination is the Statement of General Ophthalmic Services Remuneration.

(2) This determination comes into force on 1 September 2021 but takes effect from 1 April 2021.

(3) In this determination—

“contractor” (“contractwr”) means a person who has undertaken to provide General Ophthalmic Services and whose name is included in the ophthalmic list;

“corporate optician” (“optegydd corfforedig”) means a body corporate registered in the register of bodies corporate maintained under section 9 of the Opticians Act 1989⁽⁶⁾, which is carrying on business as an optometrist;

“General Ophthalmic Services” (“Gwasanaethau Offthalmig Cyffredinol”) means the services which a contractor must provide pursuant to the terms set out in paragraph 10 of Schedule 1 to the National Health Service (General Ophthalmic Services) Regulations 1986;

“GOS” means General Ophthalmic Services;

“Local Health Board” (“Bwrdd Iechyd Lleol”) means a Local Health Board established in accordance with section 11(2) of the National Health Service (Wales) Act 2006;

“ophthalmic list” (“rhestr offthamig”) means the list prepared by a Local Health Board in accordance with regulation 6 of the National Health Service (General Ophthalmic Services) Regulations 1986;

“ophthalmic medical practitioner” (“ymarferydd meddygol offthalmig”) means a doctor whose qualifications have been approved as being prescribed qualifications in accordance with regulation 4 or regulation 5 of the National Health Service (General Ophthalmic Services) Regulations 1986; and

“optician” (“optegydd”) means a person registered in the register of optometrists maintained under section 7 (register of opticians) of the Opticians Act 1989 or in the register of visiting optometrists from relevant European States maintained under section 8B(1)(a) of that Act;

(1) 2006 c. 42.

(2) S.I. 1986/975. Regulation 10 was amended by S.I. 2007/1026 (W. 93) and S.I. 2008/577 (W. 56). There are other amendments but none are relevant.

(6) 1989 c. 44.

“patient” (“claf”) means a person to whom a contractor has agreed to provide general ophthalmic services.

Part 2

Sight Test Fees

Sight test fee

3. The fee payable to a contractor for carrying out an NHS sight test is £21.71.

Domiciliary visit fees

4. The fees payable to a contractor, in addition to the NHS sight test fee, for an NHS domiciliary visit carried out by the contractor are—

- (a) £38.27 for each of the first and second patients seen at one visit; and
- (b) £9.58 for each of the third and subsequent patients seen at one visit.

Conditions attached to payment of the sight test and domiciliary visit fees

5. A claim for sight test and domiciliary visit fees, or any part thereof, is only payable if the contractor satisfies the following conditions—

- (a) the contractor must make available to the Local Health Board any information which the Local Health Board does not have but needs, and the contractor either has or could reasonably be expected to obtain, in order to calculate the payment due to the contractor,
- (b) the contractor must maintain accurate records of all GOS activity undertaken, including emergency and urgent eye care, and
- (c) all information supplied by the contractor to the Local Health Board pursuant to or in accordance with this paragraph must be accurate to the contractor’s best knowledge and belief.

6. If the contractor breaches any of the conditions in paragraph 4, the Local Health Board may, in appropriate circumstances, withhold payment of, or any part of, a sight test fee that is otherwise payable.

Part 3

CET Allowance

7.—(1) In this paragraph—

“CET allowance” means the sum of £584.00; and

“relevant year” means the year beginning with 1 January 2020 and ending with 31 December 2020.

(2) Subject to sub-paragraph (5), the Local Health Board must pay a CET allowance to an optician, other than a corporate optician, if the optician—

- (a) was included in the ophthalmic list of the Local Health Board to which they make a claim for a CET allowance for a period of at least 6 months during the relevant year and maintained their professional registration for that period in the relevant year;

(b) has undertaken appropriate continuing education and training during the relevant year; and

(c) complies with sub-paragraphs (7) and (8).

(3) Subject to sub-paragraph (5), the Local Health Board must pay a CET allowance to an ophthalmic medical practitioner if—

(a) during the relevant year their only remunerated medical or optical activity was the conduct of NHS sight tests;

(b) they were included in the ophthalmic list of the Local Health Board to which they make a claim for a CET allowance for a period of at least 6 months during the relevant year and maintained their professional registration for that period in the relevant year;

(c) they have undertaken appropriate continuing education and training during the relevant year; and

(d) they comply with sub-paragraphs (7) and (8).

(4) Subject to sub-paragraphs (5) and (6), the Local Health Board must pay to a contractor a CET allowance in respect of each assistant employed by that contractor if the assistant—

(a) was either—

(i) an optician (other than a corporate optician), or

(ii) an ophthalmic medical practitioner whose only remunerated medical or optical activity during the relevant year was the conduct of NHS sight tests;

(b) was included in the ophthalmic supplementary list of the Local Health Board to which the contractor makes a claim for a CET allowance;

(c) has assisted in the provision of general ophthalmic services for a period of at least 6 months during the relevant year and maintained their professional registration for that period for the relevant year; and

(d) has undertaken appropriate continuing education and training during the relevant year,

and the contractor complies with sub-paragraphs (7) and (8).

(5) Only one CET allowance may be claimed in respect of any one person.

(6) Where an assistant is employed by two or more contractors, the CET allowance will be paid to the contractor which the assistant nominates for the purpose of payment of the CET allowance under this determination.

(7) A claim for a CET allowance must be made in writing on the form approved for this purpose by Welsh Ministers.

(8) A separate claim form must be completed for each CET allowance claimed.

PART 4

REVOCATIONS

8. The following determinations are revoked—

(a) the determination of the Minister for Health and Social Services which came into force on 27 August 2020; and

(b) the determination of the Minister for Health and Social Services which came into force on 25 February 2021.

A handwritten signature in black ink, appearing to read "Frances Duffy". The signature is written in a cursive style with a large initial 'F'.

Signed by Frances Duffy, Director, Primary Care and Health Science, under the authority of the Minister for Health and Social Services, one of the Welsh Ministers

Date: 31 August 2021

GENERAL OPHTHALMIC SERVICES – PAYMENTS FOR CONTINUING EDUCATION AND TRAINING

Following consultations with the profession, it has been agreed that a payment should be made in respect of loss of earnings associated with continuing education and training.

The payment

The payment in respect of CET undertaken between 1 January 2020 and 31 December 2020 is £584 and is to be claimed in 2021. The payment is due to –

- a. opticians, other than a corporate optician; and
- b. ophthalmic medical practitioners, who conduct only sight tests and have no other remunerated medical employment (such as hospital work or general practice),

who were on a LHB's ophthalmic list, or assisted a contractor in the provision of General Ophthalmic Services, for at least six months in the relevant year and had maintained their professional registration during that period in the relevant year. The payment is for having undertaken appropriate continuing education and training.

Claims

Claims must be made in writing to the appropriate LHB (or where appropriate Primary Care Services of the NHS Wales Shared Services Partnership (NWSSP) at the Pontypool site) and be made by persons who were contractors in the relevant year, whether the contractor is claiming for him/herself or for an assistant. For contractors claiming a payment for themselves the claim should be made to a LHB (or Primary Care Services NWSSP at Pontypool) where they are on the ophthalmic list and with which they undertake the most work (if they are listed with more than one LHB).

When claims are made for an assistant, the claim should normally be made by and paid to the contractor whom the assistant assists. Where an assistant is employed by two or more contractors, the CET allowance should be claimed by and paid to the contractor whom the assistant nominates for the purpose of payment of the CET allowance. The contractor shall make the claim to the LHB on whose supplementary list the assistant is/was entered (which may not be the area where the contractor is/was him/herself listed). The Determination provides the authorisation for LHBs to make payments in this instance to contractors who are not on their ophthalmic list.

A separate claim shall be made for each person in respect of whom an allowance is payable and only one claim shall be made for each person.

Payments must be made to contractors. Arrangements for payments to assistants are a matter for agreement between contractors and assistants and not a matter for the NHS. In

cases where the contractor has provided or made available to the assistant in paid time, or under an alternative arrangement agreed between them, sufficient CET to enable the assistant to meet the statutory requirements for compulsory CET (in the case of an optometrist subject to the requirements of the GOC) then the payment may be retained by the contractor. However, if the contractor has not provided or made available to the assistant sufficient CET to enable the assistant to meet the statutory requirements for compulsory CET, the payment is due to the assistant.

For ophthalmic medical practitioners the payment may only be made to practitioners who had no other medical appointment i.e. who did no other remunerative work than the testing of sight.

Practitioners are not required to produce direct evidence of undertaking CET as a compulsory part of the claim or pre-condition of payment. A claim may only be paid in respect of somebody who maintained their professional registration in the relevant year. However, LHBs may conduct sample or selective checks if they deem it necessary to test the probity of NHS payments.

LHBs (or Primary Care Services of NWSSP) should make the claim form available to contractors, employed/locum optometrists and ophthalmic medical practitioners on their lists. The claim form can also be downloaded from the eyecare website at <http://www.eyecare.wales.nhs.uk/legislation>

There is a three-month period for making claims, which this year runs from 1 September 2020 to 30 November 2020.

Guidance on how to complete the CET claim form

The following information will assist you in completing the CET claim form. It is important to read the guidance before completing the claim form.

Please do:

- ✓ Complete all relevant sections (further guidance below)
- ✓ Write clearly
- ✓ Return completed claim form between 01 September 2021 and 30 November 2021

Please do not:

- ✗ Complete claim form if you have not been on the Welsh Ophthalmic Performers List for at least 6 months during 2020.

Completing the CET claim Form:

Part 1 -To Be Completed By All

- ✓ Provide full name and address of practice to which payment will be paid
- ✓ Provide full body corporate number (CO-____) or Ophthalmic contractor number (OL-____)

Part 2- To Be Completed By All

- ✓ Tick Health Board with whom you were listed with during 2020 for a period of 6 months or more. If you changed Health Boards during 2020 you may wish to contact our office for clarification.

Part 3

- ✓ All sections to be completed by all SOL/employed/locum optometrists

Part 4

- ✓ All sections to be completed by Ophthalmic Contractors (OL-____)

Part 5

- ✓ To be completed only if part 3 is applicable and has been completed
- ✓ Body Corporate/Contractor number must be the same as in Part 1
- ✓ Authorised signatory must be included on the authorised signatory form held by NWSSP for GOS purposes
- ✗ Do not sign if you are not an authorised signatory for GOS purposes

How do I submit my claim form

Once completed return via email to: nwssp-primarycareservices@wales.nhs.uk

Should you have any questions regarding the process please contact:

nwssp-primarycareservices@wales.nhs.uk

CONTINUING EDUCATION AND TRAINING – CLAIM FORM FOR 2020

General Ophthalmic Services
CLAIM FOR PAYMENT OF CET GRANT**OPTOMETRIST/OMP CLAIM FOR CET UNDERTAKEN****IN THE YEAR TO 31 DECEMBER 2020**

Grants for CET are payable to a person who was or is a contractor and who was on a LHB Ophthalmic List in the relevant year.

A payment can be claimed by an optometrist/OMP in respect of either:

- (a) CET he/she has undertaken personally in the year between 1 January to 31 December 2020;
or
(b) CET undertaken in the year between 1 January to 31 December 2020 by employed/locum optometrists

CLAIMS MUST BE MADE BETWEEN 01 SEPTEMBER 2021 AND 30 NOVEMBER 2021

Part 1: Contractor Details

Name & Address of Contractor to whom payment is to be made (BLOCK CAPITALS)

Ophthalmic List number of Contractor(Employer) (including prefix & suffix):-
CO / OL 01- _____7A__

Part 2: Local Health Board details

This should be the LHB with whom you were listed during 2020. Payment will be made to the contractor at the address (Part 1) above.

Please indicate the LHB from whom the CET allowance payment is claimed:

- | | |
|--|--------------------------|
| Aneurin Bevan UHB (7A6) , St Cadoc's Hospital, Lodge Road, Caerleon NP18 3XQ | <input type="checkbox"/> |
| Betsi Cadwaladr UHB (7A1) , Ysbyty Gwynedd, Penrhosgarnedd, Bangor, Gwynedd, LL57 2PW | <input type="checkbox"/> |
| Cardiff & Vale UHB (7A4) , University Hospital of Wales (UHW), Heath Park, Cardiff CF14 4XW | <input type="checkbox"/> |
| Cwm Taf Morgannwg UHB (7A5) , Ynysmeurig House, Navigation Park, Abercynon, CF45 4SN | <input type="checkbox"/> |
| Hywel Dda UHB (7A2) , Hafan Derwen, St Davids Park, Jobswell Rd, Carmarthen SA31 3BB | <input type="checkbox"/> |
| Powys teaching HB (7A7) Glasbury House, Bronllys Hospital, Bronllys, Powys LD3 0LS | <input type="checkbox"/> |
| Swansea Bay UHB (7A3) , Baglan Energy Park, Baglan Port Talbot, SA12 7BR | <input type="checkbox"/> |

Part 3: Details of Employed/Locum optometrist

Name of employed/locum Optometrist (BLOCK CAPITALS) _____
Ophthalmic List number (including prefix & suffix) **SOL01-** _____ **7A** _____

Where the claim is in respect of an employed/locum optometrist the claim must be made by and payment made to a contractor in respect of that employed/locum optometrist (who should be nominated by the employed/locum optometrist if they have been employed by more than one contractor). The claim is made to the LHB in whose list they were included during 2020 and undertook the majority of their GOS work. Payment will be made to the contractor as identified in Part 1. Only one payment may be made in respect of each individual employed/locum optometrist, irrespective of the number of contractors they assist or the number of LHBs where they do so. The employed/locum optometrist confirms by signing the declaration below that to his or her knowledge only one claim is being made in their name.

Declaration by Employed/Locum optometrist

If the claim is in respect of an employed/locum optometrist the employed/locum optometrist must sign the following declaration:

I understand that my principal is claiming payment of the £584 CET grant in respect of myself and I declare that:

- I undertook appropriate CET during 2020.
- I maintained my professional registration in the relevant year.
- the information I have given on this form is correct and complete.
- I understand that if it is not appropriate action may be taken.

For the purpose of verification of this claim for NHS funds and the prevention and detection of fraud, I consent to the disclosure of relevant information from this form to and by the Local Health Board and the NHS Counter Fraud and Security Management Service.

I also confirm that I was included on a Supplementary List of a LHB in the relevant year and assisted in the provision of general ophthalmic services for a period of at least six months during the relevant year (during which period I maintained my professional registration). This is the only claim for the CET grant that has been submitted or will be submitted with my agreement in respect of my CET in 2020.

Signature of employed/locum optometrist _____

GOC/GMC No _____ Date _____

The Contractor to whom payment will be made must also sign this form at Part 5.

Part 4: Declaration by Contractor

For a contractor making a claim for himself / herself:

Name of Optometrist (BLOCK CAPITALS) _____
Ophthalmic List number (including prefix & suffix) OL01- _____ 7A _____

I claim payment of the £584 CET grant and I declare that:

- appropriate CET was undertaken during 2020

- I maintained my professional registration in the relevant year.
- I am properly entitled to claim the payment
- the information I have given on this form is correct and complete.
- I understand that if it is not appropriate action may be taken.

For the purpose of verification of this claim for NHS funds and the prevention and detection of fraud, I consent to the disclosure of relevant information from this form to and by the Local Health Boards and the NHS Counter Fraud and Security Management Service.

Where this is in respect of my personal CET, I also confirm that I was a contractor on the Ophthalmic List of the LHB from whom I am claiming this grant for at least six months during the relevant year (during which period I maintained my professional registration). This is the only claim for the CET grant that I have submitted or will submit in respect of 2020.

In the case of being an OMP, the only remuneration I received during the relevant year was for conducting NHS sight tests.

Signature of Optometrist who is a contractor making a claim for himself/herself:

_____ **Date:** _____

Part 5: Declaration by a Contractor for claims made in respect of the named Employed/Locum Optometrist in Part 3.

confirm that the information provided is correct to the best of my knowledge and that appropriate action may be taken if there is proved to have been more than one claim in respect of the named employed/locum optometrist.

For the purpose of verification of this claim for NHS funds and the prevention and detection of fraud, I consent to the disclosure of relevant information from this form to and by the Local Health Boards and the NHS Counter Fraud and Security Management Service.

I further confirm that, if I have not made CET available in paid time or under an alternative arrangement agreed between us, I will pass on the payment to the named employed/locum optometrist. In the case of an employed/locum optometrist, subject to the requirements of the GOC, if I have made available fewer than 12 GOC accredited points of CET I will pass on to the named employed/locum optometrist a proportion of the payment calculated either on a basis agreed between us or, failing that, pro rata, based on 12 points made available entitling me to retain 100% of the annual grant.

Body Corporate/Contractor number as in Part 1: - OL/CO _____

Name of Authorised Signatory/Contractor (BLOCK CAPITALS) _____

Signature of Authorised Signatory/ Contractor _____ **Date** _____

Authorised signatory must be included on the authorised signatory form held by NWSSP for GOS purposes

PLEASE RETURN YOUR CLAIM FORM BY 30 NOVEMBER 2021 TO: -

nwssp-primarycareservices@wales.nhs.uk