



Dear Colleague

GENERAL OPHTHALMIC SERVICES (GOS) – COVID-19 RECOVERY:

FIRST PORT OF CALL RESPONSIBILITY DURING THE FESTIVE PERIOD; REVISED FINANCIAL SUPPORT ARRANGEMENTS FOR PRACTICE PREMISES; FINANCIAL SUPPORT ARRANGEMENTS FOR MOBILE PRACTICES AND PERIPATETIC SERVICE PROVIDERS

Summary

1. This letter advises on the following:
 - 'First Port of Call' responsibility during the festive period;
 - Revised financial support arrangements for practice premises;
 - Financial support arrangements for mobile practices and peripatetic service providers.

Action

2. NHS Boards are asked to urgently copy and issue the Memorandum to this letter to all optometrists, ophthalmic medical practitioners, body corporates and practices on their ophthalmic lists.

Yours sincerely,

Tom Ferris
Deputy Director

27th November 2020

Addresses

For action
Chief Executives, NHS Boards

For information
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nss.psdgospayments-covid19@nhs.scot (for any practice-specific queries about the financial support measures)

eyecare@gov.scot (for any other queries)

Summary

1. This Memorandum advises on the following:
 - 'First Port of Call' responsibility during the festive period;
 - Revised financial support arrangements for practice premises;
 - Financial support arrangements for mobile practices and peripatetic service providers.

'First port of call' responsibility to manage patients with an emergency eye problem during the festive period

2. Optometrists and Ophthalmic Medical Practitioners (OMPs) were reminded in [PCA\(O\)2020\(15\)](#) that they have a professional responsibility to ensure that anyone presenting to them with an emergency eye problem is appropriately managed.
3. This professional responsibility is set out as a requirement in regulation 21B of the National Health Service (General Ophthalmic Services) (Scotland) Regulations 2006, as amended.
4. During the festive period, optometrists and OMPs must ensure that 'first port of call' will continue to be provided during normal practice opening hours, with the exception of designated public holidays. Practitioners are reminded that they may carry out remote consultations, where this is deemed to be appropriate. Remote consultation activity must only be submitted via eOphthalmic under supplementary eye examination reason codes 2.5, 2.8 and 2.9.

Revised financial support arrangements for practice premises

5. Activity levels within community optometry practice premises have continued to increase since the resumption of routine eye care, and recent data from across the sector shows that the volume of eye examination activity in October 2020 is approximately 90% of the level seen in October 2019.
6. Practitioners are reminded that emergency and essential eye care should continue to be prioritised over more routine services, and this should be reflected when scheduling appointments; those patients who are at greatest risk of detriment to sight or wellbeing should be seen first.
7. Activity rates at an individual practice level vary greatly. As a result, the provision of ongoing financial support will continue, where required, to community optometry. However, practice premises will move to a new remuneration model **on and after Tuesday 1 December 2020**, as follows:

- “Top-up” payments in line with [PCA\(O\)2020\(14\)](#) will continue to be available to practice premises, but in order to qualify for this payment, a practice must now meet a minimum level of GOS(S)1 activity.
 - Where the total value of primary and supplementary eye examination claims submitted within the monthly payment schedule for a practice is less than **20%** of the GOS(S)1 element of the monthly average financial support payment (the average monthly GOS(S)1 item of service income across the 2019/20 financial year), **no** “top-up” will be paid. This percentage is defined as the minimum activity level applicable to “top-up” payments.
 - In instances where a practice does not qualify to receive a “top-up” payment, they will be paid on an actual activity only basis for claims submitted via eOphthalmic.
 - Where a practice has exceeded the minimum activity level, but remains below its GOS(1) monthly average from the 2019/20 financial year, the “top-up” **will** be paid.
 - Where a practice exceeds its GOS(S)1 monthly average from the 2019/20 financial year, its payment for that month will be based solely on submitted GOS(S)1 activity.
 - GOS(S)3 and GOS(S)4 vouchers and domiciliary visit fees will continue to be paid on an actual activity basis of claims submitted via eOphthalmic.
8. **On and after Friday 1 January 2021**, the minimum activity level will be increased to **40%**. Therefore, where the total value of primary and supplementary eye examination claims submitted within the monthly payment schedule for a practice is less than 40% of the GOS(S)1 element of the monthly average financial support payment (the average monthly GOS(S)1 item of service income across the 2019/20 financial year), **no** “top-up” will be paid.
9. **On and after Monday 1 February 2021**, the minimum activity level to which “top-up” payments apply will be increased to **50%**. Therefore, where the total value of primary and supplementary eye examination claims submitted within the monthly payment schedule for a practice is less than 50% of the GOS(S)1 element of the monthly average financial support payment (the average monthly GOS(S)1 item of service income across the 2019/20 financial year), **no** “top-up” will be paid.

Impact of COVID-19 on practice activity levels

10. It is recognised that there may be instances where a practice is unable to meet the minimum activity level as a direct result of COVID-19.

11. Should a practice anticipate that this may happen it should in the first instance contact its NHS Board and explain the exact circumstances. The NHS Board will, where appropriate, contact Practitioner & Counter Fraud Services to discuss the issue further, and in particular to review the level of GOS(S)1 claims that have been submitted within the relevant timeframe. A decision will then be made as to whether the “top-up” will be paid.
12. Examples of applicable circumstances may include:
 - higher than expected staff absence following the receipt of positive COVID-19 test results;
 - higher than expected staff absence on the basis of self-isolation due to symptoms, or on the advice of NHS Scotland Test & Protect;
 - closure of a practice for deep cleaning as a result of COVID-19.
13. This list is not exhaustive, and it is for NHS Boards to discuss the exact circumstances with relevant practices on a case-by-case basis.
14. For the avoidance of doubt, circumstances impacting on GOS(S)1 activity levels which are unrelated to COVID-19 will not be considered.

Financial support arrangements for mobile practices and peripatetic providers

15. Mobile practices (those which operate only on a mobile basis) will continue, for the time being, to receive monthly support payments equating to 100% of their average monthly GOS(S)1, GOS(S)3 and GOS(S)4 income across the 2019/20 financial year, as set out in [PCA\(O\)2020\(4\)](#).
16. The Scottish Government will commence the review of the appropriateness of the financial support provided to mobile practices in early December 2020, and will provide further advice in relation to the revised financial support arrangements to be implemented in due course.
17. Peripatetic service providers, will continue, for the time being, to receive monthly support payments as detailed in paragraph 8 of [PCA\(O\)2020\(14\)](#), which is in line with paragraphs 14-18 of [PCA\(O\)2020\(04\)](#).

Enquiries

18. Any practice-specific queries about financial support measures should be emailed to P&CFS at: nss.psdgospayments-covid19@nhs.scot.
19. Any other queries about this Memorandum should be emailed to the Scottish Government at: eyecare@gov.scot.

PCA(O)2020(19)

**Dentistry and Optometry Division
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Scottish Government**