

**Service specification for
Ocular Hypertension Repeat Measures**

Reference: - 203

Document Version Control

Version	Reason	Date	Author
1.0	Inherited from PCT	1st April 2013	unknown
1.1	Updating of document for contract incorporation	May 2014	Alison Dean/Sue Leeves/Hannah Oliver
2.0	Incorporating changes from review workshop	November 2014	Alison Dean / Sue Leeves
3.0	Revised in accordance with updated guidance on QiO Levels	23rd January 2015	Alison Dean / Sue Leeves
4.0	Changes to NICE guidelines [NG81]	21st December 2017	Debbie Ludlam/Rachel Cottam

1 SERVICE OUTLINE

- 1.1 The service provides for the repeat testing of patients where the initial testing gives an intra-ocular pressure of 24 mm Hg or above, in the absence of any other pathology. If a second test using applanation tonometry (Goldmann/Perkins) also gives an intra-ocular pressure of 24 mm Hg or above the patient will be referred to the Referral Management Service in the normal manner on the Brighton and Hove Glaucoma Referral form.
- 1.2 The service is provided by
- local ophthalmic practitioners working within the Brighton and Hove City boundaries
 - who are in possession of an applanation tonometer (Goldmann /Perkins)
 - able to provide a timely appointment
 - registered with the General Optical Council
 - following NICE Guidelines and GOC required procedures
- 1.3 The service is available to all patients registered with a GP practice which is a member of Brighton and Hove Clinical Commissioning Group (CCG).
- 1.4 Contractors will ensure that their professional indemnity is up to date and covers them for all tasks they are carrying out within this Locally Commissioned Service.
- 1.5 The CCG reserves the right to withdraw or amend this service and will give a minimum of 3 months' notice of any changes.

2 SERVICE AIMS

- 2.1 The service aims to improve health and reduce inequalities by providing increased access to eye care in the community.

- 2.2 Access to eye care for the conditions described will enable more patients to receive treatment closer to their homes.
- 2.3 The service is expected to reduce the number of unnecessary referrals from primary care to secondary care, supported by the provision of more accurate referral information.
- 2.4 The knowledge and skills of community ophthalmic practitioners will be better utilised.
- 2.5 Relationships between ophthalmic practitioners, secondary care, GPs, and the CCG will be further developed.

3 SERVICE PROVISION

- 3.1 The service shall be provided during normal practice hours.

4 SERVICE SPECIFICATION

- 4.1.1 When testing a patient presenting at the practice for a routine appointment, (either NHS or on a private basis), if the reading indicates an intra-ocular pressure of 24 mm Hg or above, the patient and optometrist to agree a mutually, convenient appointment for repeat contact tonometry e.g same day or a different day.
- 4.1.2 The practitioner will repeat the intra-ocular pressure test using applanation tonometry (Goldmann / Perkins).
- 4.1.3 All patients with IOP>31mmHg should be referred for OHT diagnosis without further IOP refinement.
- 4.1.4 If the intra-ocular pressure reading is less than 24 mm Hg the practitioner will discharge the patient.
- 4.1.5 In instances detailed in both 4.1.3 and 4.1.4 above the practitioner will record the events and readings in the patient's records.
- 4.1.6 The Contractor will submit an invoice quarterly to the CCG.

4.2 Symptoms and Signs at Presentation Not Included in the Service

- 4.2.1 Acute symptoms, for example:
- Sudden loss of vision
 - Very significant eye pain
 - Significant trauma
 - Chemical burns
- 4.2.2 The treatment of long term chronic conditions is not included within the service. Patients presenting with an abnormality not covered by this contract should be managed using the relevant guidelines e.g College of Optometrists guidelines, GOC guidelines and/or local East Sussex referral protocols (see ESLOC website <http://www.eastsussexloc.org.uk>)
- 4.2.3 An NHS sight test shall not be performed concurrently with this service.

4.3 Procedures

- 4.3.1 All tests undertaken and results obtained must be recorded in the Patient Records, even if the results are normal.
- 4.3.2 All advice given to the patient (verbal or written) must be recorded in the Patient Records.

4.4 Equipment

4.4.1 The Contractor shall have the following equipment:

- An applanation tonometer (Goldmann/Perkins)

4.5 Medication

4.5.1 Ophthalmic practitioners may use the range of medications allowed by virtue of their registration with the General Optical Council.

4.6 Accreditation - Education and Training

4.6.1 The Contractor shall ensure all ophthalmic practitioners employed or engaged by the Contractor are confident and competent in respect of the provision of the locally commissioned service.

4.6.2 The Contractor shall be responsible for ensuring that all persons employed or engaged by the Contractor in respect of the provision of the services under the Contract are aware of the administrative requirements of the service.

4.6.3 The Contractor shall ensure that any additional ophthalmic practitioners who are to provide the repeat testing eye care service for patients presenting at the practice premises, have read and understood this service specification and are qualified to provide the enhanced service

4.7 Patient Eligibility

4.7.1 The service is available to all persons registered with a GP Practice which is a member of the Brighton and Hove CCG.

4.8 Referral and Patient Pathway

4.8.1 Patients shall make a mutually convenient appointment with the Contractor.

4.8.2 If the Contractor is unable to provide for the assessment of the patient, the Contractor, ophthalmic practitioner or other responsible person shall direct the patient to the Hospital Eye Service.

4.8.3 The Contractor, ophthalmic practitioner or other responsible person shall provide the patient with a paper copy of their Patient Records, if requested.

4.8.4 The Contractor shall provide appropriate clinical advice and guidance to the patient in respect of the management of the presenting condition.

4.9 Record Keeping and Data Collection

4.9.1 The ophthalmic practitioner shall fully complete, in an accurate and legible manner, the Patient Records for each patient managed.

4.9.2 The Optometric Patient Record will be of an adequate standard to provide for–

- The clinical management of patients.
- The referral of patients by an ophthalmic practitioner to the hospital eye service or to another ophthalmic practitioner within the practice with appropriate experience.
- The claim for payment and sharing of data for contract monitoring and audit.

4.10 Performance Reporting

Reporting Requirements and Timescales

- 4.10.1 Clinical Governance issues shall be reported by the Contractor to the CCG by exception, in accordance with paragraph 5.
- 4.10.2 Patient complaints about this service shall be reported annually by the Contractor to the CCG.
- 4.10.3 Other relevant information required from time to time by the CCG shall be provided by the Contractor in a timely manner.

4.11 Service Review

- 4.11.1 The Contractor shall co-operate with the CCG as reasonably required in respect of the monitoring and assessment of the services, including:
- Answering any questions reasonably put to the Contractor by the CCG.
 - Providing any information reasonably required by the CCG.
 - Attending any meeting or ensuring that an appropriate representative of the Contractor attends any meeting (if held at a reasonably accessible place and at a reasonable hour, and due notice has been given), if the Contractor's presence at the meeting is reasonably required by the CCG.

4.12 Information

- 4.12.1 The Contractor shall provide all information specified in this Schedule in a timely manner, ensuring its accuracy and completeness.
- 4.12.2 From time to time, it may be necessary for either party to make ad-hoc requests for information from the other in order to respond to internal or external queries. On occasions, and depending on the sensitivity or relative risk associated with the issue, this information may be required in a short timescale. The parties, subject to this Contract, acknowledge this and agree to undertake the following:
- To minimise ad-hoc requests and ensure that short timescales for responses are not requested, unless absolutely necessary or where no choice is considered to exist.
 - Where an ad-hoc request is made, the party asked to provide the information commits to ensure that every reasonable effort is made to provide it within the given timeframe.
- 4.12.3 The Contractor shall within one month of the start of each CCG financial year agree a Data Quality Plan to address identified issues where the data and information requirements of this Schedule have not been met by the Contractor.

5 GOVERNANCE

- 5.1 The CCG requires the Contractor to comply with Quality in Optometry Level 1 and NHS Standard Contract Level including record keeping and infection control audits.

5.2 Infection Control

- 5.2.1 The Contractor shall specifically ensure that:
- The clinical environment is maintained appropriately to reduce the risk of healthcare acquired infections.
 - Waste is disposed of safely without risk of contamination or injury and is in accordance with national legislation and regulations.
 - Clinical equipment is managed appropriately to reduce the risk of healthcare acquired infections.
 - Hand washing is undertaken correctly using an appropriate cleansing agent. Hand washing facilities shall be adequate to ensure hand hygiene can be carried out effectively.

- The environment is cleaned to an appropriate standard and monitored regularly.
- Items in direct contact with the eye shall be disposable and shall not be re-used.

The Contractor is recommended to refer to the College of Optometrists' Infection control guidelines.

5.3 Facilities and Equipment

5.3.1 The Contractor shall meet the following non-exhaustive list of requirements:

- Goldmann or Perkins applanation tonometer
- Whilst managing a patient, the consulting room shall not be used for any other purposes
- Hand washing with hot/cold water to be available in the consulting room
- Liquid Soap
- Alcohol Gel
- Paper towels
- Single use items – including minims, tonometer heads
- Washable work surfaces
- Floor and wall surfaces maintained in a clean and hygienic manner
- Cleanable lighting, especially lighting close to the patient

5.4 Serious Untoward Incidents

5.4.1 The Contractor shall within seventy two (72) hours, specifically notify the CCG of any incidents of significant post examination/intervention infection.

5.4.2 Fitness to practice concerns shall be reported by the Contractor to the CCG Quality Lead and will be investigated by the CCG.

5.5 Clinical Audit

5.5.1 The Contractor shall participate in any clinical audit activity as reasonably required by the CCG, and maintain appropriate records to evidence and support such activity, including an electronic spreadsheet or database showing the outcome of each clinical audit. The Contractor should refer to the Quality in Optometry auditing section for guidance on clinical audit and record keeping.

5.6 Patient Experience

5.6.1 The Contractor will participate in an annual patient survey by engaging patients in the completion of a patient questionnaire.

6 PAYMENT

6.1 Payment for the service is on a cost per case arrangement.

The CCG shall pay the Contractor £25 for each patient on whom Goldmann / Perkins applanation tonometry is performed as a result of finding a first tonometry reading of 24mm Hg or higher.

This will be paid by the CCG on presentation of the invoice.

6.2 The Contractor shall invoice Brighton and Hove CCG for activity undertaken on a quarterly basis, i.e.

Claims for April to June - invoice required by 21st July;
 Claims for July to September - invoice required by 21st October;
 Claims for October - December - invoice required by 21st January;
 Claims for January to March - invoice required by 21st April.

- 6.3 The Contractor shall invoice Brighton and Hove CCG using the template attached at Appendix A. This invoice should include a summary of the activity undertaken, but should not contain any patient identifiable information.
- 6.4 The Contractor is required to maintain an adequate record of activity that is available for audit on request. This must include internal cross referencing within the practice to enable identification of patient records if required.
- 6.5 For the avoidance of doubt, no payment will be made by the CCG in respect of patients that do not attend a scheduled appointment (DNAs).

7. EXCLUSIONS

This repeat measures service is not to be used for patients who are being monitored for Ocular Hypertension or Glaucoma by the hospital eye service.

PARTICIPATING OPTOMETRISTS

The ophthalmic practitioners named below will provide the specified service.

The ophthalmic practitioners named below declare that they have read and understood this service specification.

Name		
Signature		Dated

Name		
Signature		Dated

Name		
Signature		Dated

Name		
Signature		Dated

Name		
Signature		Dated

Please continue on an additional sheet if required

The Contractor shall ensure that any additional ophthalmic practitioners who are to provide the specified service have read and understood this service specification, and have signed a copy of this service specification, which the Contractor shall provide to the CCG.

APPENDIX A

payee name
 address
 address
 address
 address
 address

INVOICE

Phone

Fax

Date

VAT Registration Number

Billing Address

HANNAH OLIVER
NHS BRIGHTON & HOVE CCG

09D PAYABLES L685
PHOENIX HOUSE
TOPCLIFFE LANE
WAKEFIELD
WF3 1WE

Delivery Address

NHS Brighton & Hove CCG
 Hove Town
 Hall
 Norton Road
 Hove
 BN3 4AH

Account Number	Purchase Order No	Requisitioner	Delivery Note	Terms
	n/a			

Quantity	Description	Unit Price	Amount
	Ocular Hypertension Repeat Testing Patients on whom applanation tonometry (Goldmann/Perkins) is performed as a result of finding a first tonometry reading of 24mm Hg or higher	25.00	

Bank Details

Sort Code
 Account Number

OR Please make cheques payable to:
 Remittance Address as above

Subtotal
 Discount amount
 Postage
 VAT

Total Due

£

Supplier comments or instructions:

The Contractor shall invoice Brighton and Hove CCG for activity undertaken on a quarterly basis as per the schedule provided. This invoice should include a summary of the activity undertaken, but should not contain any patient identifiable information. The Contractor is required to maintain an adequate record of activity that is available for audit on request.