



Community Optometry Newsletter – Winter 2024

Welcome to the Winter edition of the Community Optometry Newsletter on behalf of Leicester, Leicestershire and Rutland Integrated Care Board (ICB). We hope you have a wonderful festive break and wish you a new year filled with health, happiness and success.

As Practices are gradually onboarding onto the Cinapsis EeRS system, we give an overview on the type of referrals received this October. In order to get the most out of EeRS, ICB clinical colleagues will be hosting a webinar for optometrists to provide helpful guidance and give the opportunity for any queries and questions you may wish to raise.

Also in this edition there is useful signposting information about the important issue of safeguarding, with associated webinars scheduled in the new year. Some important information around ophthalmic payments is also included and the steps taken to rectify recent issues with the EyeV system.

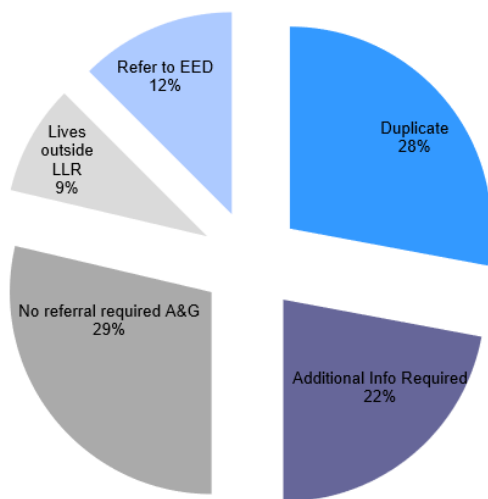


Update on EeRS Cinapsis Referrals

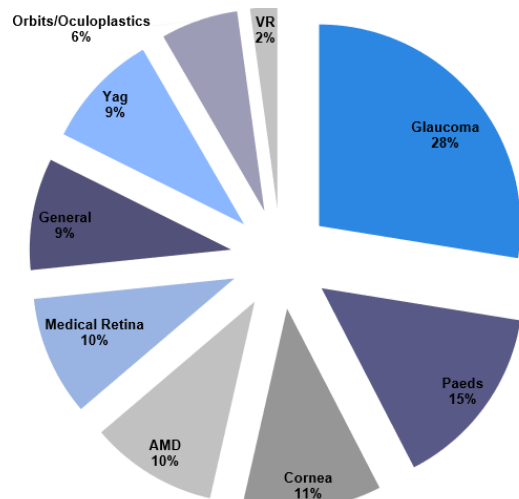


Now as more Practices have onboarded onto Cinapsis, we are able to use the system to produce a snap shot of ophthalmology activity. 926 non emergency referrals were received in October 2024, with two thirds being sent via Cinapsis platform. 1 in 5 of these were not accepted and reasons are illustrated in diagram below. Glaucoma and paediatrics are the two specialities most impacted by optometrist's referrals once accepted:

Reasons for Rejected Referrals



Accepted Referrals into Specialities



In order to support optometrists get the most out of the system, an MS Teams webinar will be arranged in the early part of 2025 to provide a greater understanding where we are with EeRS, future Cinapsis developments and to go through scenarios that would be covered in a sight test and those that need onward referral to UHL.

SAFEGUARDING BITESIZE SESSIONS – 2025

ICB Safeguarding Team are holding Safeguarding Bitesize Sessions for ICB Staff, GP Practice Staff and PODs (Pharmacists, Optometrists and Dentists). These sessions provide a brief overview of subjects in the world of Safeguarding. In addition, **appendix 1** accompanying the newsletter provides useful signposting support.

[No need to book, please click on the link below for each session to join.](#)
[All sessions are being held: 12.00 – 1.00pm via MS Teams](#)

January 15th – Best Practice Guidance Sharing Health Information [Join the meeting now](#)

March 18th – Child Exploitation Update [Join the meeting now](#)

May 14th – Learning from Child & Adult Safeguarding Reviews [Join the meeting now](#)

July 2nd – Safeguarding Babies [Join the meeting now](#)

September 10th – Recognising Self Neglect & Hoarding [Join the meeting now](#)



Update on Interim PCSE System Change— introduced overnight 28/29 November 2024

As you will be aware, the minimum frequency intervals for sight tests were set out in a Memorandum of Understanding (MoU) between the Department of Health and Social Security (as it was known at the time) and the optometry profession in 2002. Whilst this is not changing, we have become aware that for four of the clinical scenarios the current PCSE system does not contain the necessary business rules for processing these claims correctly. As a result, performers have been required to process claims for the following clinical scenarios using an early retest code:

- Ocular hypertension and not in a monitoring scheme – 1 year frequency
- Under 16 with binocular vision anomaly – 6 month frequency
- Under 7 years with corrected refractive error – 6 month frequency
- 7 years and over and under 16 with rapidly progressing myopia – 6 month frequency

Interim PCSE system change

A full system fix is planned during the 2025/26 financial year. However, to avoid contractors and performers needing to use an early retest code to proceed with claims for these patients, a new set of clinical priority codes will enable contractors to accurately process claims in the meantime. These will be added at the end of the drop-down menu for early retest codes within PCSE Online. We expect that PMS providers will take varying approaches to implementing this change and you should check with your service provider.

The additional clinical priority codes are as follows:

- 7.1 Under 7 years - corrected refractive error
- 7.2 Under 16 years – binocular vision anomaly
- 7.3 7-16 years - rapidly progressing myopia
- 7.4 Ocular hypertension and not in a monitoring scheme

These codes should be used when processing a claim for a patient who meets one of the above clinical circumstances and are seen at, or after, the minimum frequency interval.

If there is a clinical justification for these patients to have a sight test sooner than the minimum frequency, performers should add an early retest code as per standard procedures, rather than the clinical priority code.

Please note that the introduction of the new clinical priority codes does not alter the MoU, which remains unchanged.

Long term solution

NHS England is currently working with PCSE to scope a long-term solution that enables the clinical circumstances to be recorded and processed correctly. It is envisaged that this will be introduced to the PCSE system in 2025/26.

Important information regarding the EyeV Electronic Platform

We have been made aware of difficulties experienced by Practices attempting to onboard onto the EyeV electronic platform to be accredited to deliver the post op cataract pathway. We apologise for the inconvenience this has caused.

We have been assured by the EYEV Team that all new practices will now be referred to a direct point of contact for approval as of 28 November 2024. Please follow the link below, complete the Optometrist details and backing data request and then select "Optom not listed" this will then open a following form to complete for the Practice itself and we will ensure you are fully onboarded and at pace.

<https://cataractnhs-llr.eyev.health/optometrist-onboarding/>

Once notification has been received this has been completed, details will be checked along with proofs provided and the onboarding will be approved. In the meantime should you need any help or assistance please get in touch with Luke Craig directly: Email: lukecraig.llrpl@nhs.net Mobile Number: 07818531289