INTRODUCTION

As part of NHS Scotland’s eHealth agenda, a programme to deliver eOphthalmic services is now underway. Many of you will recently have filled in IT surveys to help with this. The programme consists of two projects:

- electronic referral of patients between optometrists/ophthalmic medical practitioners and hospitals; and
- electronic transmission of General Ophthalmic Services (GOS) claims for payment.
The programme is aligned with the eHealth Programme Strategy visions and aims, and is supported by NHS Boards. There is ongoing dialogue with the professions through Optometry Scotland and Eyecare Scotland.

BACKGROUND

With the improved levels of equipment and technology in community optometry practices, new treatments available in ophthalmology and rising numbers of elderly patients, there will be huge benefits through improving the information flow between optometry and ophthalmology.

Some NHS Boards have already made significant progress on integrating eye care. However, there is still real potential to deliver reduced costs and improve patient outcomes and the patient journey.

With this in mind, the Scottish Government Health and Social Care Directorate (SGHSCD) is looking to build on progress achieved locally and integrate eye care nationally with NHS Boards and optometry professionals in Scotland.

In 2010 the SGHSCD/eHealth departments approved a national optometry programme to deliver electronic payment and electronic referrals for the optometry community.

The Eye Care Integration programme will be owned and delivered by local Health Board projects, and facilitated and co-ordinated by a small central team.
National Services Scotland Information Technology (NSS IT) has been commissioned to support Health Boards in delivery of the Eye Care Integration programme by providing connectivity and a means to allow referrals to be sent electronically to Hospital Eye Services. This connectivity will also allow electronic payments. Practitioner Services Division (PSD) has prime responsibility in delivering electronic payments along with the Health Boards. However, any proposed solution by NSS IT for referrals needs to be practical for payments and future services such as community dentistry.

Targets have been agreed. However, the surveys you completed have identified different levels of IT capability in optometry practices. As a result there is likely to be a more staged implementation plan to allow optometry practices to get the IT capability they need in place.
DRIVERS FOR CHANGE

• improve ophthalmology waiting time targets;

• continue to shift the balance of care to the community (associated with changes in NHS eye examinations introduced in 2006) by allowing Hospital Eye Services to make diagnosis and identify the need for treatment based upon images taken by optometrists rather than through outpatient appointments; and

• enhance patient safety – by improving timely delivery of sight-saving treatments.

It will also remove the dependency on GPs, allowing optometrists to refer patients directly, supporting the Scottish Government strategic commitment to connect all primary care practitioners to the NHS Scotland electronic community.
BENEFITS FOR PATIENTS

The benefits to eye care patients will include improved patient care through:

- quicker, more accurate, more reliable referral processes including providing image information critical for clinical decision making;
- quicker assessment of urgent referrals;
- better use of existing Primary Care resources to identify patients who can be followed up in the community particularly in the chronic disease areas of glaucoma suspect, dry macula pathology, known diabetic retinopathy and non sight threatening retinal pathology;
- reduced waiting times for patients;
- enhanced patient safety – by improving timely delivery of sight-saving treatments;
- maximising the number of patients with wet macular degeneration disease that can receive potentially sight-saving intraocular injections within a ‘golden’ two-week window;
- a reduction in first time appointments in Hospital Eye Services, saving patients time, expense and anxiety; and
- process improvements within hospital based services – smoothing the patient journey.
BENEFITS FOR OPTOMETRISTS AND OPHTHALMOLOGISTS

eReferrals

- early identification of patients needing urgent treatment;
- increased number of patients getting essential sight treatment within the limited window where treatment is effective;
- reduced number of new patients having to go to hospital thus also reducing the required follow up appointments;
- maximised benefit of investment in community eye care (digital imaging);
- reduced eye care waiting times;
- improved access to and quality of data, resulting in improved reporting and planning;
- improved quality of information exchange: from optometrists to Hospital Eye Services;
- increased integrity and audit of hospital referrals;
- immediate transmission of referrals; no postage needed;
- able to see that the referral has been received and viewed; and
- required items and improved legibility reduce the number of referrals returned to sender.
**ePayments**

The key benefits associated with this programme, for you and your practice are:

- it will reduce the amount of paper that has to be processed at both ends;
- the quality of the data captured will be of a much higher quality – there will be no need to scan claim forms, so scanning errors will be removed;
- practices will be able to carry out validation of a claim while the patient is still available to answer any queries that may arise. This will resolve most clerical issues at source, reducing the burden on practice resources to correct and re-submit forms that have been rejected;
- it will all but eliminate the need for ‘return to contractor’ letters for those practices which adopt the new system; and
- it will also provide a more robust check of patient entitlement so that practices are not carrying out a primary exam only to discover that it is time barred.
THE PROGRAMME BOARD

The programme board has been in place since January 2013 and involves a number of highly experienced professionals from a variety of organisations and backgrounds including: Health Boards, the Scottish Government (SG), Optometry Scotland, National Services Scotland (NSS), and Eye Care Scotland which includes representatives of RNIB and the Scottish Eyecare Group.

STRATEGIC OBJECTIVES

The strategic objectives of the Eye Care Integration programme are:

- improved patient safety and care through the use of electronic referrals to enhance the eye care referral process;

- improved efficiency of payment claims through electronic submission of claims; and

- optimised affordability and efficiency without compromising quality of patient care.
What is Eye Care Integration?/How does it work?

**TECHNOLOGY**

Making better use of existing technology will be key to supporting the business change, and will:

- provide an electronic referral process for optometrists through access to NHS applications;
- replicate the benefits of automated payments experienced by other primary care practitioners (GPs, Pharmacists, Dentists); and
- improve the effectiveness and efficiency of clinical services to patients.

**CONNECTIVITY**

There are two main approaches for connecting optometry practices to services within the NHS network to allow sending of eReferrals and ePayments:

- using the internet and a Virtual Private Network (VPN) token to connect to a secure tunnel to make referrals and process payments. This approach will be used where an optometrist is an independent practitioner or where the company does not have a corporate network linking practices.
- using a corporate network via firewalls to make referrals and process payments. This will be used mainly by the larger multiples. This will allow connection directly to services via a secure corporate route without the need to use a VPN token.
eReferrals

All referrals to Hospital Eye Services will be done through the national referral system, SCI Gateway.

A national optometry list of practices has been created for use in SCI Gateway. This list will be maintained by taking an extract from the PSD payments system.

TIMESCALES FOR eREFERRALS

Health Boards are starting to pilot eReferrals with a small number of practices. We envisage that this pilot will increase during the summer of 2013 with a significant number of practices connected by the end of 2013.

• referral guidance documentation for optometrists is being written and will be available late summer 2013; and

• a national training and implementation pack is available for Health Boards to use and adapt for local implementation purposes.
NATIONAL TEMPLATES

Five national templates have been agreed for eReferrals to Hospital Eye Services.

These templates are cataract, glaucoma, wet macular degeneration, paediatric and general.

The templates will be completed by inputting data into the national referral system SCI Gateway.

Once the referral has been received by the Hospital Eye Service, the optometrist will be able to see that the referral has been received and opened. Optometrists will also receive automatic electronic feedback in four categories:

1. Appointed;
2. Appointed urgently;
3. Not appointed - those which, based on the referral with or without digital images are deemed not to require hospital appointment. A hard copy letter will follow to optometrist/GP/patient explaining the decision with or without continued community care; and
4. Awaiting further information - hospital notes and other information is awaited before final decision.
The aim is to provide a facility that will allow practices with a Practice Management System (PMS) to connect to PSD’s ‘Optix’ payment system, to submit claim data. This removes the need for those practices to submit paper GOS claim forms.

The service will have three elements:

- when a patient calls to make an appointment for an eye examination, practices will be able to link to PSD’s system and retrieve the date of the last primary eye examination, get details of any prescription issued at that time and check the patient’s Community Health Index (CHI) number and appropriate details;

- having completed the treatment and recorded it on their practice system, the practitioner can then validate the claim, check that it has all of the required information correctly recorded and will be accepted by PSD’s systems before signing it off; and

- submission of claim for payment. PSD will let practices know, through the system, that their claim has been received and is being processed.

It is also the intention to send payment schedules out electronically to eOphthalmic practices.

This will bring GOS contractors into line with other primary care streams, with the ability to transfer data electronically.

Initially, the payments project will focus on development of ‘system to system’ transmission of claims. This will allow those practices whose Practice Management System (PMS) hold the necessary data to submit electronic claims directly
to PSD, using the same connectivity that is being established for referrals. This will help deliver one of the project’s key aims (to improve data quality by reducing the need for ‘double keying’ of claims). Currently practices can enter claims onto their practice system, then write/print them onto paper claim forms, post them to PSD who then scan them and only then process the actual data. When practices already have that data on their systems it makes sense to transfer the data directly to PSD and miss out the unnecessary stages in between. This will be quicker, more accurate and less bureaucratic.

However, PSD are mindful that many practices that use computers don’t use a full PMS. Therefore, they are also intending to develop a ‘web form’ that will allow practices to enter their claims onto a form on a web page and then submit them to PSD (by an appropriately secure process). This will still involve some double-keying, but will allow any practice with a broadband connection to submit claims electronically.

TIMESCALE FOR ePAYMENTS

The intention is to have the ePayment system in place by spring 2014. PSD will introduce an accreditation process for those PMS suppliers whose systems are upgraded to meet the required specifications. We will keep you updated as this progresses.
Further information

In the coming months we will send you updates of what is happening with the Eye Care Integration programme.

For more information about Eye Care Integration and how it might affect you:

- Visit our website: [www.eyecareintegration.scot.nhs.uk](http://www.eyecareintegration.scot.nhs.uk)
- Contact your Health Board Lead.

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