

All Optical providers
Sent via the Gateway and via LOCs

East of England
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Dear Optical Providers

RE: RESUMPTION OF OPTICAL SERVICES

Today, a letter and Standard Operating Procedure (SOP) was sent from Matt Neligan (National Director of Primary Care and System Transformation) and Poonam Sharma (Clinical Advisor, Optometry) to all NHS optical providers in England. The documents are attached for ease of reference.

The letter outlines that following Government guidance allowing retail premises to re-open from the 15 June 2020, it is now appropriate to enable optical premises to commence re-opening and for practices to begin the resumption of routine GOS services.

Practices will be able to resume GOS services where it is safe to do so and where practices have assessed that they have the necessary infection prevention and control (IPC) and personal protective equipment (PPE) requirements in place. To this end we have developed the attached Risk Assessment for Resumption of GOS services, that you may wish to use. This self-assessment tool will help to gauge your practices readiness to re-commence services.

You should now review the attached SOP and self-assessment documentation.

Having completed the self-assessment document, please detail the date of your anticipated re-opening and the level of service you will be able to provide as detailed below:

1. Able to open and provide full GOS services including Aerosol Generating Procedures (AGP)
2. Able to open and provide advice only
3. If you have answered No to all of the above, please provide an explanation and the projected date by which you will be open and the level of service you are able to provide.

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It would be appreciated if you could respond to the questionnaire via the link in the Gateway message as soon as possible and by no later than **5pm on 24 June 2020**. For ease of reference the link is included below:

[Optometry Re-Opening](#)

Please note that if you have any queries or your answers to the questions above change post submission, you should contact NHS England as soon as possible via england.optometryeast@nhs.net

It is as important as ever that the principles set out in the SOP and self-assessment checklist are adhered to in order to minimise the risks, as far as possible, of virus transmission within the practice.

NHS Test and Trace

The NHS test and trace service forms a central part of the government's coronavirus (COVID-19) recovery strategy, which seeks to help the country to return to normal, as soon as possible, for as many people as possible in a way that is safe and protects the NHS and social care sector.

This service ensures that anyone who develops symptoms of coronavirus (COVID-19) can quickly be tested to find out if they have the virus. It also includes targeted asymptomatic testing of NHS and social care staff and care home residents.

The service helps trace close recent contacts of anyone who tests positive for coronavirus, and if necessary, notifies them that they must self-isolate at home to help stop the spread of the virus. For further information see <https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works>

As essential workers, you and your household can apply for a coronavirus (COVID-19) test if you have symptoms of a high temperature, a new continuous cough or a loss of, or change to your sense of smell or taste. This test can tell you if you have coronavirus at the time the swab sample is taken. For further information see <https://www.gov.uk/apply-coronavirus-test-essential-workers>

As NHS test and trace arrangements are scaled up over the coming days/weeks, the likelihood of staff being asked to self-isolate becomes a matter for which we need to recognise and plan. Unless relevant and appropriate guidelines are effectively followed, this could create significant consequences for the delivery of Primary Care Optical Services. We would advise you to review your business continuity plans to ensure that they are in alignment with current guidance, with relation to COVID-19.

Antibody tests are used to detect antibodies to the COVID-19 virus to see if you have previously had the virus. The test works by taking a blood sample and testing for the presence of antibodies to see if you have developed an immune response to the virus. Antibody tests differ to virus swab (PCR) tests, which test to see if you currently have the virus.

NHS England and NHS Improvement



There is no strong evidence yet to suggest that those who have had the virus develop long-lasting immunity which would prevent them from getting the virus again. Therefore, the value of antibody tests is currently limited to answering the question of whether someone has had the virus or not and providing data and a greater understanding on the spread of the virus.

In the first phase of the government's antibody testing programme, NHS staff can choose to be tested. For further information see:

<https://www.gov.uk/government/publications/coronavirus-covid-19-antibody-tests/coronavirus-covid-19-antibody-tests>

All contract holders are reminded of the necessity to ensure all clinical staff working in their practice have appropriate professional indemnity / insurance in accordance with GOC regulations in place for when face to face clinical work resumes. This requirement extends to all clinical personnel.

In addition, we would highlight the following guidance that has been published:

1. The College of Optometrist's to help practices prepare for the Amber phase of the pandemic: <https://www.college-optometrists.org/the-college/media-hub/news-listing/primary-eyecare-covid-19-guidance-amber-phase.html>
2. The Association of British Dispensing Opticians COVID-19 related guidance: <https://www.abdo.org.uk/coronavirus/>
3. The Association of Optometrists advice: <https://www.aop.org.uk/coronavirus-updates/novel-coronavirus-covid-19-advice>

In view of the guidance in the letter from Matt Neligan (National Director of Primary Care and System Transformation) and Poonam Sharma (Clinical Advisor, Optometry), NHS England and NHS Improvement – East of England asks practices to use the following priority framework for sequencing and scheduling patients for treatment:

- Urgency of needs
- Particular unmet needs of vulnerable groups
- Available capacity to undertake activity

We are grateful for the professionalism shown by providers during these unprecedented times.

Yours sincerely



Rachel Webb

Director of Primary Care and Public Health

