

# **May 2019**

# NHS England- South East (Kent, Surrey, Sussex) Newsletter

News and Information for Community Opticians

# Welcome to the latest edition of the newsletter from NHS England & NHS Improvement – Kent, Surrey and Sussex Eye Health Team

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## **Annual Complaints Reports**

Action Required Important Regarding Your 2018/2019 Annual Complaints forms submission

We recently emailed instructions to all contractors about a national change to the way we are asking you to submit your annual complaints reports.

NHS Business Services Authority (NHSBSA) will be undertaking this on behalf of NHS England for the 2018/2019 Annual Complaints forms submission.



The completion of the form will be online via the NHSBSA website. The link to the webpage to complete the form can be found at: <a href="http://www.nhsbsa.nhs.uk/what-we-do/ophthalmic-provider-assurance">http://www.nhsbsa.nhs.uk/what-we-do/ophthalmic-provider-assurance</a>

The survey opens on Saturday 22 June 2019 at 9am and closes on Friday 19 July 2019 at 11.59pm. All contractors are required to submit a report during this period; if there are no complaints contractors are required to submit a zero return.

If you have any queries, please contact the Provider Assurance Ophthalmic team via e-mail <a href="mailto:nhsbsa.ophthalmicproviderassurance@nhs.net">nhsbsa.ophthalmicproviderassurance@nhs.net</a> or telephone 0300 330 9403, lines are open 8.00am till 4.30pm Monday to Friday.

#### **Universal Credit Claimants**

#### Help with health costs for patients getting Universal Credit

If patients receive universal credit they may also qualify for help with health costs. Patients qualify if, on the date they claim help with health costs:

a) they receive Universal Credit and either had no earnings or had net earnings of £435 or less in their last Universal Credit assessment period. NB: Patients must have one or the other here – universal credit alone does not qualify)

or

b) they receive Universal Credit, which includes an element for a child, or them (or their partner) had limited capability for work (LCW) or limited capability for work and work-related activity (LCWRA), and they either have no earnings or net earnings of £935 or less in their last Universal Credit assessment period. NB: Patients must have one or the other here – universal credit alone does not qualify)

Note: If the patient is part of a couple, the net earning threshold applies to their combined net earnings.

Patients should present a copy of their Universal Credit award notice to prove entitlement.

Evidence should be produced by the patient upon signing the declaration at the bottom of the GOS form. GOS forms do not currently have a tick box for Universal Credit so the patient should tick the box for income-based Jobseeker's Allowance instead.

This information was issued December 2018 and derived from: <a href="https://www.nhs.uk/using-the-nhs/help-with-health-costs/free-nhs-eye-tests-and-optical-vouchers/">https://www.nhs.uk/using-the-nhs/help-with-health-costs/free-nhs-eye-tests-and-optical-vouchers/</a>

### **EU Exit plans**

#### Preparing for the possibility of a 'no deal' EU exit for primary care contractors

The Department of Health and Social Care (DHSC) is leading the response to EU exit across the health and care sector. DHSC published <u>Operational Guidance</u> in December which set out actions that providers of health services should take to prepare for, and manage, the risks of a no-deal exit scenario.

Some of the key contingency planning for a 'no deal' EU exit that may affect GOS contractors are:

**Continuity of supply**: Primary care contractors do not need to change their behaviour in terms of ordering stocks or engaging with suppliers, as this work has been undertaken nationally. This means contractors should not stockpile medicines, medical devices or clinical consumables and should advise patients not to do so either.

Information on how UK nationals can access healthcare in Europe can be found <a href="here">here</a>. This includes information on the validity of European Health Insurance Cards (EHIC) and travel and health insurance requirements.

Information on continuity of supply is available on <a href="NHS England's website">NHS England's website</a>.

Supporting Q&As are available which may be helpful in any discussion with patients about their medicines and medical products.

- Information for patients is also available on <a href="mailto:nhs.uk">nhs.uk</a>.
- Information for primary care staff on providing healthcare for overseas visitors from the EEA under the current rules can be found <a href="here">here</a>.

**Workforce:** Primary care contractors should publicise the <u>EU Settlement Scheme</u> to staff who are EU citizens.

NHS England and NHS Improvement will be sending out updates as and when things change so please ensure you monitor your emails regularly and please <u>tell us</u> if you change your email address.

#### **Domestic Abuse Awareness**

NHS England recently hosted the South East Domestic Abuse event that brought together various Primary Care safeguarding professionals and voluntary organisations. The event raised awareness that all health care professionals have a major role to play in identifying victims of domestic abuse.

An estimated 1.9 million adults aged 16 to 59 years experienced domestic abuse according to the year ending March 2017 Crime Survey for England and Wales (1.2 million women, 713000 men). 4 out of 5 victims do not call the police. Health professionals are ideally placed to identify victims as it is the first step towards ensuring appropriate care.

Patients accessing eye health services might be amongst the first face to face services that victims encounter and victims could exhibit the signs of abuse. It encouraged that any concerns are reported in line with your safeguarding procedures.

You can get involved by reading further guidance below, training your staff and displaying leaflets which can be ordered via the Health Resources, Signposting and Safeguarding Contacts listed on our Useful Contact Sheet (attached).

This <u>NICE guidance</u> aims to help identify, prevent and reduce domestic violence and abuse among women and men in heterosexual or same-sex relationships, and among young and elderly people. It is for everyone working in health care whose

work may bring them into contact with people who experience or perpetrate domestic violence and abuse.

This <u>DH guidance</u> helps health professionals to recognise factors that may indicate domestic violence and abuse and describes steps to ensure appropriate support and referral where necessary.

#### Some useful Safeguarding Signposting contacts:

24-hour National Domestic Violence Free-phone Helpline Number is 0808 2000 247

SafeLives Community <u>www.community.safelives.org.uk</u> is a new platform to support health care professionals in supporting others <u>www.safelives.org.uk</u>

ChildLine 0800 1111 <a href="https://www.childline.org.uk/">https://www.childline.org.uk/</a>

NSPCC 0808 800 5000

www.thehideout.org.uk Women's Aid assistance for young people suffering domestic abuse

http://www.getconnected.org.uk Mental Health Help for people under 25 years

### **Data Protection**

#### Information governance

We have recently received a few emails from contractors inadvertently containing patient identifiable sensitive information. Just a reminder that keeping patient information confidential, even if contacting another health professional or organisation, is everyone's responsibility.

If it is necessary to include sensitive information, please ensure it is sent via NHSmail only and in line with your Data Protection Policy.

A personal data breach is a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data. Not all breaches need to be reported, but contractors can take a <u>self-assessment</u> to decide whether to report a breach of information governance to the Information Commissioners Office (ICO).

For more information about what a personal data breach is and when you need to report it, please see the <u>personal data breach pages of ICO's Guide to the GDPR</u>

# Clinical Waste Transporting for Additional (Domiciliary) GOS Contractors

Anyone transporting clinical waste must register as a carrier. Registration is usually free if you only transport waste you produce yourself.

You must register if you do any of these things as part of your business:

- Transport waste
- Buy, sell or dispose of waste
- Arrange for someone else to buy, sell or dispose of waste

You may be fined up to £5,000 for not registering!

To register go to <a href="https://www.gov.uk/waste-carrier-or-broker-registration">https://www.gov.uk/waste-carrier-or-broker-registration</a>

Once you've registered, your organisation's details appear in the <u>public register of</u> waste carriers, brokers and dealers.

# Additional Service (Domiciliary) contractor's contact details

Earlier this year we asked all domiciliary contractors to provide up to date information about the areas where they provide services. This information has now been shared with NHS111 to give to people who contact them looking for domiciliary services. They are looking at listing these services on <a href="NHS UK website">NHS UK website</a>

We will be sharing this information with LOCs to see if they can publish a list of local providers on their websites. We are also looking to share this information with GPs

and mandatory GOS services providers so that they can direct patients to domiciliary providers if they are asked to do so.

## **NHS England Merges with NHS Improvement**

NHS England has recently merged with NHS Improvement; our new operating model brings together our organisations so collectively we can add greater value to the NHS. It represents a strong shift to regional delivery supported by expert corporate teams.

The NHS Long Term Plan focuses on delivering integrated care to patients at the local level and we can best support the NHS to deliver this as a single integrated organisation. We have made a lot of progress in coming together since our initial announcement last year and now have a single NHS Executive Group with single directorates beneath them.

But we know that structural changes alone will not be enough and this will be a work in progress for some time, just as the integration of local health and care systems is a lot more than corporate restructures.

We need a big change in our culture too to support, respect and inspire one another to do our best work and value diversity and creativity. We are working on much more fundamental changes to our mindsets, behaviours, processes and ways of working so that together we create something much better and greater than the sum of its parts – fit to support the NHS into the future.

# NHS England website and newsletter

Earlier this year members of our Optometry team met with digital communications to discuss the design of the <u>NHS England South East Eye Health web page</u>. As the page is intended to provide information to professionals, we'd welcome any suggestions to the type of content you'd like to see.

Likewise, with our newsletter, do you find it useful?

Is there any information we could provide that would help you?

Please send any comments or suggestions to <a href="mailto:england.southeastoptometry@nhs.net">england.southeastoptometry@nhs.net</a>

Best wishes from

The Eye Care and Eye Health Contracting Team

