

BRADFORD LOC MECS EVENT

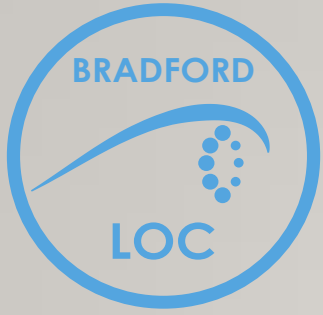
17th April 2019

www.bradfordloc.org.uk



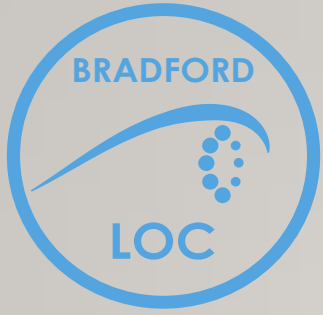
Ravi Naru

- Independent Practitioner
- Member of Bradford LOC
 - Enhanced Services Committee
 - Ravi Naru (Ravinaru@me.com)
 - David Howarth (lentic@aol.com)



Scheme Overview

- The MECS Service
- Accreditation
- Claiming Procedures
- Record Keeping and Audit
- Contracting



The MECS Service

- Minor Eye Conditions Service
- Patients with a GP in Bradford, Airedale, Wharfedale & Craven CCGs
- Not a triage service
- Aim is for the service to see and treat / advise

MECS

MISS RACHEL PILLING
CONSULTANT OPHTHALMOLOGIST
BRADFORD TEACHING HOSPITALS

Rachel.pilling@bthft.uk

SERVICE OVERVIEW

- What is the aim of the Bradford MECS
- What MECS is (and isn't)
- What is included
- How will it work
- Critical success factors
- Future possibilities

BRADFORD MECS: THE AIM

- To offer a suitable service to patients for them to be **SEEN AND TREATED** at an alternative point of care
- Closer to home
- Easier to access/parking
- Reduced wait

BRADFORD MECS: THE AIM.

THE BENEFITS

-
- To offer suitable with patients to be **SEEN AND TREATED** at an alternative point of care
 - Closer to home
 - Easier to access/parking
 - Reduced wait
 - Patient seen sooner
 - Reduced pressure on BRI Eye Casualty
 - Reduced attendances at GP practices and A&E
 - Improved patient experience

BRADFORD MECS: WHAT IT ISN'T

- Three years to get this far
- Eye Casualty “shutting the doors”
- An additional hurdle for patients to get past to get an Eye Cas appt
- PEARS
- Eye Casualty in the community
- “Case finding” for eye clinic
- Triage system
- Calderdale system/national MECS
- Primarily a business opportunity

BRADFORD MECS: WHAT PATIENTS ARE INCLUDED

- Symptom based approach
- Conditions which can be SEEN AND TREATED in the community
 - Referral to GP for routine appt
 - Second opinion diagnosis confirmed
 - Over the counter medication (dry eye, allergy, antibiotics)
- Many patients will be referred via a NON-ophthalmic trained person
 - GP care navigation
 - A&E triage
 - Optometry front desk
 - Self referral



MECS Service – Inclusion Criteria

- Epiphora (watery eye)
- Trichiasis (in growing eyelashes)
- Differential diagnosis of lumps and bumps in the vicinity of the eye
- Flashes/floaters
- Ocular pain or discomfort
- Dry eye
- Blepharitis
- Loss of vision including transient loss
- Sudden onset of blurred vision but always consider if a sight test would be more appropriate
- Differential Diagnosis or the red eye
- Foreign body and emergency contact lens removal (not by the fitting practitioner)



MECS Service – Exclusion Criteria

- Patients identified in advance to have severe eye conditions which need hospital attention eg orbital cellulitis, temporal arteritis
- Eye problems related to herpes zoster
- Adult squints, diplopia
- Removal of suture
- Patient reported symptoms that indicate a sight test is more appropriate than MECS
- Suspected cancers of the eye (or in the vicinity of the eye)
- Age related macular degeneration
- Patients that have seen in the MECS service in the previous 3 months for the same condition



MECS Service – Exclusion Criteria

Patients cannot be seen or treated by the MECS service if their signs or symptoms indicate that they should be seen or managed by an alternative existing service

- Cataract – please use cataract referral service
- Repeat tests to aid referral decision – please use Referral Refinement
- Diabetic Retinopathy – please refer to local DESP

Other Points

- It is recognized that as many patients will be self referring, it is possible that they may access the service with a condition which is excluded for treatment but requires examination and onward referral to an appropriate eye service. This patient examination by the MECS service is classed as an episode of care and payment will be made.

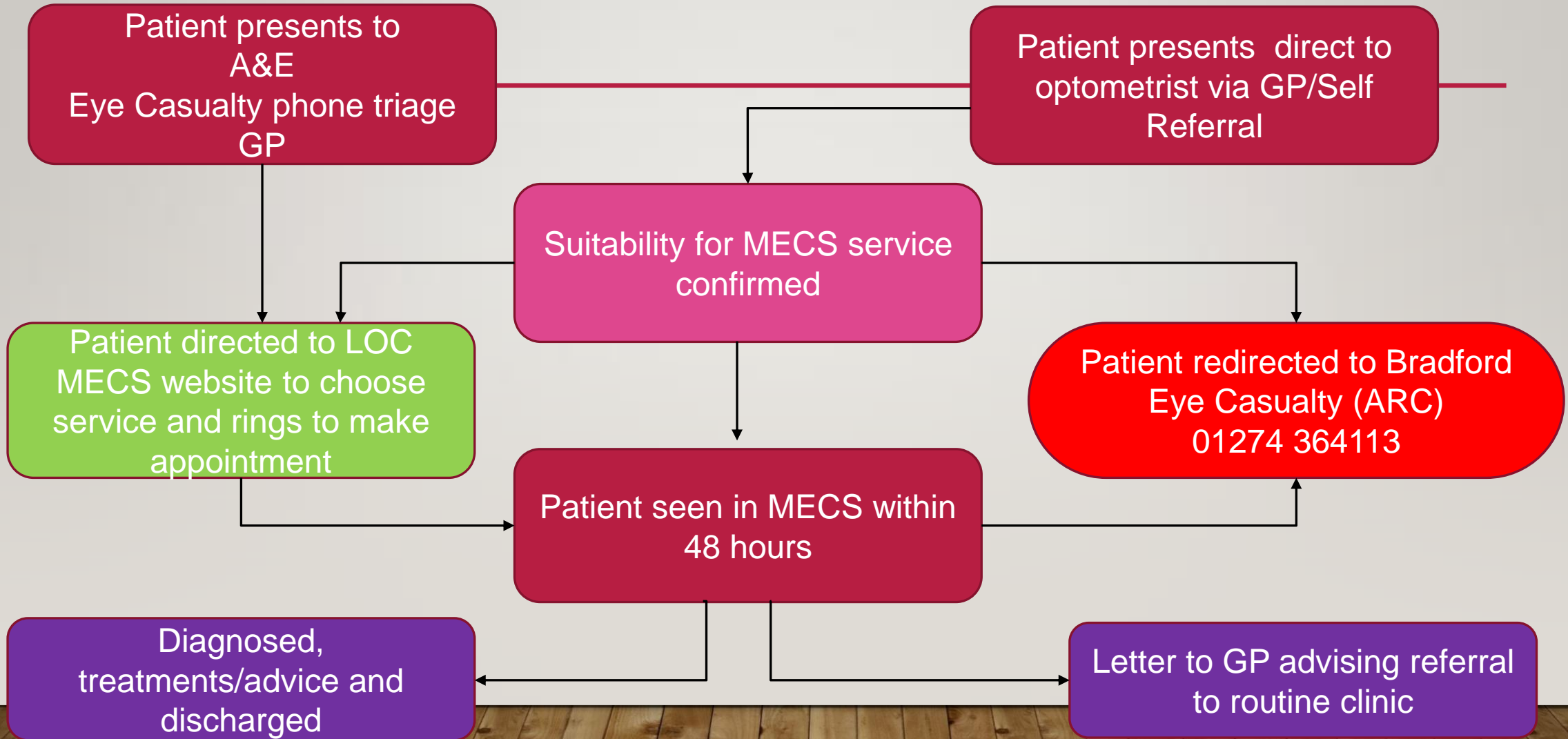
Other Points

- GPs may refer patients for non specific reasons – eg “get the optician to measure your eye pressures” or “get them to check the back of your eyes”.

These cases are not strictly for the MECS service but if an eye examination (either GOS or private) is not able to be carried out due to an early time interval then a MECS examination can be undertaken and a fee claimed.

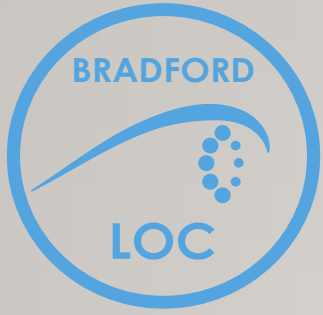
Please note – in these cases it is essential that the audit is completed and reflects this request so that we can get some concrete data of the frequency of this.

BRADFORD MECS: HOW WILL IT WORK?



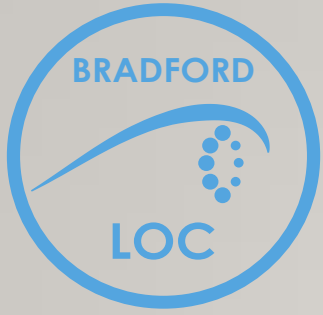
BRADFORD MECS: CRITICAL SUCCESS FACTORS

- Patience during inevitable teething problems
 - Inappropriate patients referred
 - Patients struggling to make an appointment
- Not an additional step
 - “Too successful”
 - Avoiding over reliance on “second opinion” in Eye Casualty
- Communication
 - What to say when ringing in
 - Training for GP, Optom, A&E, Eye Cas
- Compassionate approach
- Exciting opportunity for the future



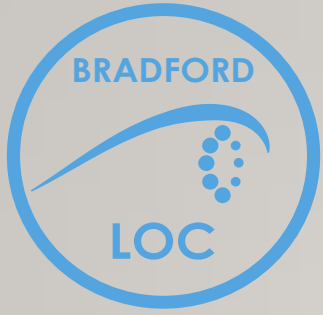
Accreditation

- Practitioners are accredited – not practices
- Must be a registered optometrist with the GOC and on the NHS Performers list
- WOPEC Distance Learning Modules
PEARS/MECS
- WOPEC Approved OSCE practical exam



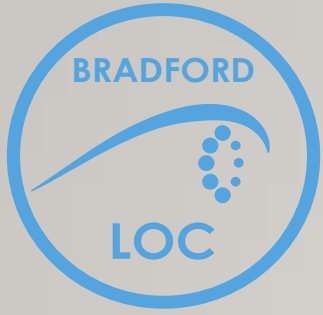
Accreditation

- Need a WOPEC Code – LOCSUP 123456
- Access to distance learning modules (& CET Points!)
- Organise OSCE – Keep an eye on the “Events” section of WOPEC site
- Send PDF Certificate to David Howarth or me



Accreditation

- To Get a Code:
- Please send me an email – Ravinaru@me.com
- Full Name,
- Practice(s) that you work in.
- I can then send you a code and the WOPEC instructions to get started.



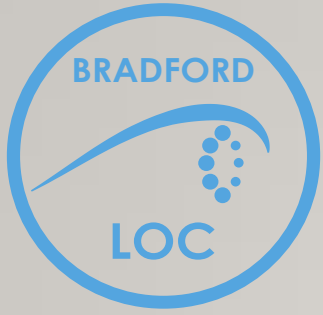
Accreditation

- I have some codes with me tonight
- Next available OSCE semi locally is Stockton on 25/4/19
- Contact Mike Dearlove
- mdearlove@sky.com



Accreditation

- Exemptions
 - IP qualification
 - N Yorks LES – exempt from Part 2 (OSCE) but will need to do Part 1 if you have not done this already.



Record Keeping

- Unsurprisingly there needs to be a full record of MECS appointment details
- Appreciate that there are many different systems for record keeping
- Specimen record card on the LOC website
- Don't have to use this but it illustrates the information that needs to be recorded.



Example MECS Appointment Record

You should record these clinical details as part of MECS.
 You can use this form or you can use your own record.
 Completion of the audit at www.bradfordloc.org.uk/mecsaudit/ (for each patient)
 and submission of the enhanced services claim spreadsheet is mandatory for
 payment.

Patient Name / ID _____	Referral into Service <input type="radio"/> Patient <input type="radio"/> Optometrist <input type="radio"/> GP <input type="radio"/> Other	Suitability of MECS determined (Please initial) _____ GP Practice [within B&AWC CCGs] _____
Date _____	_____	_____

Word and PDF version available
 on LOC website

Presenting Symptoms	Outcome / Decision
<input type="radio"/> Ocular Pain Discomfort <input type="radio"/> Red Eye <input type="radio"/> Loss Of Vision including Transient loss <input type="radio"/> Recent Onset Distortion of Vision <input type="radio"/> Recent Onset of Flashes / Floaters <input type="radio"/> Watery Eye <input type="radio"/> Foreign Body <input type="radio"/> Dry Eye <input type="radio"/> Other _____	<input type="radio"/> Discharged without treatment <input type="radio"/> Discharged with treatment <input type="radio"/> Referred to GP <input type="radio"/> Referred to HES Routine (via GP) <input type="radio"/> Referred to HES Urgent (via ARC) <input type="radio"/> Other _____

Clinical Notes (including treatment advised and/or diagnosis if determined)

Diagnostic Agent used _____ Batch No / Exp. _____

Patient Satisfaction	Name of Accredited Optometrist (Print)
<input type="radio"/> Very satisfied <input type="radio"/> Satisfied <input type="radio"/> Neither Satisfied or Dissatisfied <input type="radio"/> Unsatisfied <input type="radio"/> Very Unsatisfied	_____
	Practice Details

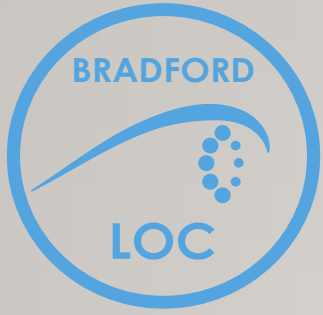
I confirm that I have had a MECS
 appointment undertaken

Signature _____



Audit

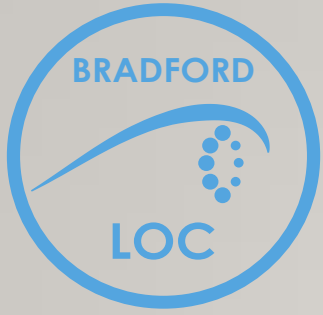
- Each appointment needs to have an audit record completed
- Online
- www.bradfordloc.org.uk/mecsaudit/
- CCG to be able to evaluate the scheme



Claiming Fees

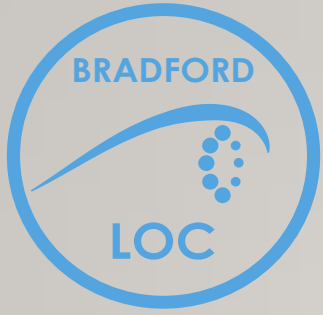
- Excel Spreadsheet
- Not 'Open Office' Not a 'Word' Table, or PDF
- Same as current spreadsheet for RR, OHTMS and Cataract referrals.
- Extra column for MECS





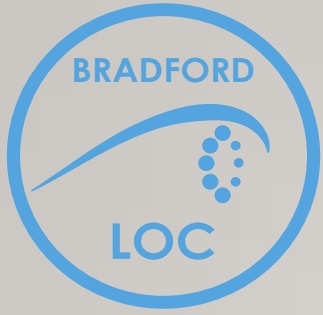
Claiming Fees

- No Personally Identifiable Data
- File will be returned unopened.
- Excel Spreadsheet available on LOC website



Contracting

- Practice needs to have an NHS Enhanced Service Contract
- Bradford, AWC CCGs
- Referral Refinement
- OHTMS
- Cataract Referral
- MECS



Contracting

Contracting Lead for Optometrists

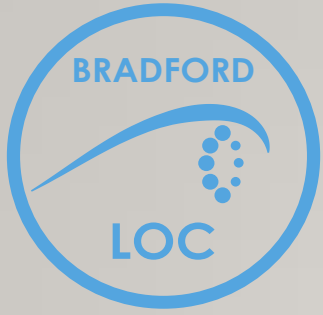
Mrs Surinder Garcha

Surinder.Garcha@bradford.nhs.uk



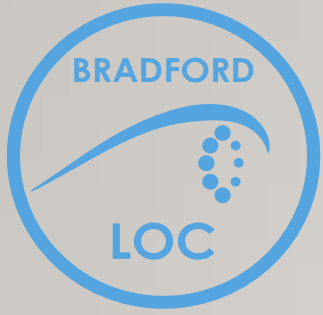
Summary

- Determine Suitability for MECS appointment
- Appointment
- Record and patient signature
- Audit form
- Claim fee!



Useful Contacts

- Ravi Naru – Bradford LOC [Enhanced Services committee]
Ravinaru@me.com
- David Howarth – Bradford LOC [Enhanced Services Committee]
lentic@aol.com
- Raj Billoo – Bradford LOC Secretary
secretary@bradfordloc.co.uk
- Rachel Pilling - Consultant Ophthalmologist, Bradford Royal Infirmary
Rachel.pilling@bthft.co.uk
- Surinder Garcha - Contracting Lead for Optometrists
Surinder.Garcha@bradford.nhs.uk
- Bradford LOC website
www.Bradfordloc.org.uk



Bradford LOC

- This presentation
- Audit link
- Example record form
- will be available on the Bradford LOC website
- www.Bradfordloc.org.uk