SEL COTS Practice Participation Standards and Procedures

1. Background

Timely triage and access to clinically appropriate appointments are essential to ensuring safe patient care, positive patient experience, and effective operation of the South East London Community Optometry and Triage Service (SEL COTS).

These Practice Participation Standards and Procedures are intended to:

- Promote consistency of service provision across participating practices.
- Support equitable patient access to care.
- Define the responsibilities of participating practices when appointment capacity is limited.
- Establish expectations regarding service continuity, communication, staffing changes, and participation.
- Provide operational procedures to support the effective administration of the service.

These requirements apply to all subcontracted SEL COTS providers participating in the service.

PART A – SERVICE STANDARDS

2. Timely Appointments

Participating practices are responsible for ensuring that all relevant members of the practice team are appropriately trained to identify patients who may require an urgent assessment.

Practices are expected to:

- Offer appointments within a clinically appropriate timeframe based on presenting symptoms.
- Where clinically appropriate, provide appointments within 24–48 hours of patient contact, aligned to the practice's advertised opening hours.
- Ensure urgent presentations are prioritised appropriately to minimise delays in care.

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3. Practice Responsibilities When Capacity Is Limited

Primary Ophthalmic Solutions recognises that practices may experience legitimate short-term capacity pressures due to sickness absence, staffing shortages, or unforeseen operational issues.

Where a practice is unable to offer an appointment within an appropriate timeframe, the practice is expected to actively support the patient in accessing alternative care.

The level of support provided should be proportionate to:

- The urgency of the patient's symptoms.
- The patient's ability to independently access alternative care.

Support may include:

- Providing details of alternative SEL COTS providers.
- Assisting the patient in identifying suitable appointment availability.
- Directly coordinating or facilitating referral to another participating provider where appropriate.

Practices should not simply turn patients away without reasonable support or guidance.

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4. Service Continuity and Notification Requirements

Practices must ensure that their participation status and appointment availability remain accurate and up to date at all times.

As part of the annual self-declaration process, practices are required to declare their typical level of SEL COTS provision, including clinic availability and expected service capacity.

Practices must notify Primary Ophthalmic Solutions promptly where there is a significant reduction in service availability.

Significant changes include:

- A reduction of one or more regular clinic days per week for a period exceeding two consecutive weeks.
- Temporary cessation of SEL COTS appointments for more than one week.
- Any operational issue likely to materially impact patient access or service delivery.

Where a practice experiences a significant reduction in service availability or requires temporary cessation, it must follow the Temporary Cessation Procedure detailed in Section 8.

Primary Ophthalmic Solutions may review the ongoing suitability and viability of practices where significant reductions in service provision occur.

Practices may be suspended from participation where service levels fall below those reasonably required to support safe, equitable, and sustainable delivery of the wider SEL COTS service.

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5. Compliance and Enforcement

Compliance with these standards will be monitored through existing governance and operational oversight processes.

Where concerns regarding service delivery are identified, the following staged approach may be applied:

1. Initial communication and supportive guidance.
2. Formal warning where concerns persist.
3. Temporary suspension from participation.
4. Removal from the service in cases of ongoing or serious non-compliance.

Primary Ophthalmic Solutions reserves the right to take immediate action where patient safety, service integrity, or commissioner confidence may be compromised.

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PART B – OPERATIONAL PROCEDURES

6. Practice Leaver Procedure

A subcontractor may withdraw from the service by serving the appropriate notice period as set out in its contract.

A contract may also be suspended or terminated by Primary Ophthalmic Solutions following a breach of contractual requirements.

Following withdrawal, suspension, or termination, the practice must:

- Ensure all patient episodes are complete or arrange transfer of care to another provider.
- Update practice websites, leaflets, and other communications to reflect the change in service status.
- Ensure NHS email accounts continue to be monitored or that an appropriate autoreply is in place directing referrers appropriately.
- Ensure all e-RS worklists are cleared within one month of withdrawal from the service.
- Return e-RS laptop provided for service delivery once worklists have been cleared.
- Provide details of all smart card holders to Primary Ophthalmic Solutions so that access can be cancelled where required.

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7. Optometrist Leaver Procedure

Where an accredited SEL COTS optometrist leaves a participating practice, the practice must:

- Notify the SEL COTS Admin Team by email.
- Confirm, where known, whether the optometrist continues to work elsewhere within South East London.
- Provide details of any smart cards associated with the service so access can be removed.
- Remove the optometrist's access to PharmOutcomes where applicable.

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8. Temporary Cessation Procedure

Where a practice believes it cannot fulfil its contractual obligations for a temporary period due to staffing shortages, long-term absence, or other operational pressures, the practice must contact the SEL COTS Admin Team to request a temporary cessation.

Where temporary cessation is agreed, the practice must:

- Ensure NHS email accounts continue to be monitored or that a suitable autoreply is enabled.
- Take reasonable steps to resolve the issues causing the temporary cessation.
- Keep Primary Ophthalmic Solutions informed of progress towards resuming service delivery.

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- Notify Primary Ophthalmic Solutions when the practice is ready to recommence service provision.

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9. Optometrist Starter Procedure

Before an optometrist is permitted to provide SEL COTS, the practice must notify the SEL COTS Admin Team and submit the following documentation:

Mandatory Training and Accreditation Evidence

- Safeguarding Adults Level 2 certificate (or equivalent) completed within the previous three years.
- Safeguarding Children Level 2 certificate (or equivalent) completed within the previous three years.
- WOPEC PEARS/MECS online module certificate.
- WOPEC Glaucoma online module certificate.
- WOPEC Cataract certificate.
- Enhanced DBS certificate completed within the previous three years.
- Prevent Radicalisation / Basic Prevent Awareness certificate completed within the previous three years.
- Email address for inclusion on the SEL COTS mailing list.

Accreditation Requirements

The optometrist must:

- Attend an SEL COTS accreditation session.
- Receive confirmation from Primary Ophthalmic Solutions that accreditation requirements have been met.
- Be added to PharmOutcomes only after approval has been confirmed.
- Attend a minimum of two SEL COTS Peer Review events per calendar year.

Optometrists commencing from May onwards are required to attend a minimum of one Peer Review event during their first calendar year.

Important

Practices must not allow an optometrist to provide SEL COTS until Primary Ophthalmic Solutions has confirmed that all accreditation requirements have been met.

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10. Review

These standards and procedures may be reviewed and updated periodically to reflect service requirements, commissioner expectations, operational learning, and changes in clinical demand.

The latest version will supersede all previous versions.

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