FAQ page 6 Contract Negotiations 25/26 Webinar

Information Governance

1. **Q: Information Governance (IG) Toolkit - will just one toolkit need to be done for a domiciliary practice?**

A: Digital Health and Care Wales (DHCW): It depends how it's set up. If it's one particular organization that covers an array of health boards, then it would only be one toolkit.
But if they had branches, that's where they'd utilise the parent and child relationship and potentially the copy down functionality, and they can configure that to suit them. But if it's one organization that covers a large remit, they would only have to complete one toolkit.

2. **Q: For those practices who complete the NHS England Data Security & Protection Toolkit, will the Welsh IG toolkit still be compulsory?**

A: DHCW: If they offer NHS services in Wales, then yes, they would have to complete the Welsh IG toolkit as well.

3. **Q: Does each individual practitioner have to register with the information governance toolkit? Is this just for practitioners or every member of staff in the practice? Or is it just for practice owners only?**

A: DHCW: It's entirely up to the practice. It is recommended that there's a user called the organization administrator, so they'd have some managerial responsibilities. It is recommended that they register for the IG toolkit in the first instance, but they would have functionality then within the platform to apply and create. So, for example, some of Digital Health and Care Wales (DHCW) stakeholders would have an organization administrator. They would have some IG colleagues that support them with the completion of the toolkit, but they'd also have some support staff that could also go into relevant sections and complete it for them. So, it's entirely up to the organization who they'd want to complete the toolkit.

4. **Q: Does it need to be an NHS e-mail used to register on the IG toolkit?**

A: DHCW: No, it does not need NHS e-mail, you can utilise any e-mail address you wish.

5. **Q: On the toolkit and with regard to the DHCW- DPO service, would that service then be named as the practice DPO or is it just a support service for the existing DPO in the practice?**

A: DHCW: No, we would become your DPO. So, if for example you pay for another service at the moment, we would be covered as your DPO. We inform the ICO of that for your registration as well and we get named as your data protection officer. So, we will cover all your data protection officer needs.

Service Insights

6. **Q: So, for some domiciliary providers, even if you don't see any children or haven't seen children for a number of years, are you still expected to complete the service insight three around myopia management?**

A: Yes, you would submit a nil return to it. So, you would tally your tally of patients you've seen, which would be none, and then you'd submit a nil return to NWSSP

7. **Q: Service Insights - can we have the results please? We haven't had anything from the service insights as yet.**

A: NWSSP: There is a plan to publish to the profession what's happened in the previous service insights, probably before the end of this year.

8. **Q: A few queries in about the e-mail and that NWSSP mentioned being sent to practice NHS emails yesterday, a couple of practices reporting that they haven't received that information. How do we find the information if they haven't received it so far?**

A: NWSSP: The e-mail address people need to be looking at is the one that starts Co. So if you haven't aligned your personal NHS e-mail with the practice one, you may not be seeing it.
The instructions for aligning your personal NHS e-mail address with your practice one are here: https://www.optometrywales.org.uk/wp-content/uploads/2024/10/Adding-A-mailbox-in-O365.pdf and the emails for audit only go to practice e-mail addresses because it's not for individual performers, individual optometrists, dispensing opticians, CLOs to complete, it's just for the practice.
To use that FAQ to set up your personal e-mail link to the practice one. And if you're saying even though you're linked to your Co NHS e-mail and you can't see it, then please e-mail shared services action point from your NHS account.
Tell us who you are, and colleagues who are responsible for distribution will make sure you're on the list. But my impression is that everybody who's got a CO e-mail should have got that e-mail. But if there's a problem and you're definitely linked as per the FAQ's to the e-mail address, then please e-mail shared services action point. And someone will pick that up without delay and get the information over to you

Clinical Fees

9. **Q: Are there any changes to the WGOS fee for non IP (for glaucoma and medical retina)?**

A: Welsh Government: No, those WGOS4 fees are being maintained at the current level. Most of those fees were increased in the last negotiations in February. The funding for this year has been concentrated mainly in the areas where all practices will be able to benefit from that increase in funding whilst we start to continue to look at WGOS4 figures and continue. We should look for feedback as well from contractors and the profession in terms of how that is

working whilst we haven't yet completed roll out of all pathways in all health boards.

Wellbeing Survey

10. **Q: For the Wellbeing survey, just to confirm that it is the end of this month is the deadline for completing that well-being survey?**

A: Optometry Wales: It's a Welsh Government released survey that was released earlier. It was released in the beginning of September, but the deadline I believe is fixed at the end of October. We don't believe that there's any opportunity to move that.
Welsh Government: It's a wider primary care survey, so the deadline is set. I would hope that practices have had the opportunity to look at it before this evening but appreciate that we've only got a week or so left, but it will be good to get as many response as possible now.

11. **Q: On the Wellbeing Survey, what's the minimum percentage you would expect just with people off next week and team members out on holiday etc. It there a minimum percentage of practice responses of staff members that we might expect there to complete the well-being survey?**

A: Optometry Wales: It is difficult because it's so late in the month that we're announcing changes. The requirement in the quality for optometry toolkit is that staff complete it.
As long as practices are encouraging all their staff to complete it. It's an anonymous survey. So, there is no way to prove one way or another. I don't know if Welsh Government has any thoughts in terms of any particular percentage, but it is like future years when it comes out, we will be reminding people that it's launched and that will be an absolute that everybody should aim to do it within the two months. But this year is obviously we are very late in the month, aren't we?
Welsh Government: I'd agree there isn't any particular percentage that has been set to this, but it's an important survey as well for anybody that's done it. It doesn't take that long to do it. It's just over 5 minutes to complete the survey. It aligns very much with the GOC standards of practice and some of the results that came from the Perceptions Survey this year, so I would encourage everybody to undertake the survey where you can and to encourage your staff to do so. It's an important survey. It does give some really important insights to providing services in NHS Wales as well. So, all we can do is encourage you. There are no minimum percentages that have been set for this, but it is something again that we've talked about being part of that NHS family and for future years to prepare to be involved, but it is worthwhile undertaking.

12. **Q: For the Wellbeing Survey. Should it be completed by reception staff as well as as practitioners?**

A: Welsh Government: It is for all practice staff - the request that it should be shared with all members of your team because it is about gauging that well-being across the whole team.

WGOS4

13. **Q: A query on the HEIW slide about practices that have signed up to deliver WGOS4. Are those sign ups for practices that have signed up, or they are actually based on based on activity that's being reported?**

A: Welsh Government: Yes, activity that's being provided at the minute.

14. **Q: Will anything be done to ensure that practices who hold higher qualifications within their workforce are providing the services that they are qualified to do? There are significant gaps in services where practices may be choosing not to provide the services.**

A: Welsh Government: I'm understanding it correctly, it is the question asking if we're going to a compulsory WGOS 3-4 and 5 service, there's no intention for us to go to a compulsory service. It is opt in. We've always said we need a range of services provided across the board, so there's no aim to go for compulsory. As we've said in our previous slides, the aim is to push for higher qualifications, but there's no aim to make that compulsory.

Pensions

15. **Q: As we're becoming more aligned to other primary care contractors and you know we're doing more and more as part of NHS Wales, are we any closer in being part of the NHS Wales pension scheme?**

A: Optometry Wales: In relation to alignment with other areas of primary care they are ongoing conversations that we have with Welsh Government and within our manifesto asks for the 2026 Senedd elections as well.
We continue to have those conversations in respect of pensions. I know that is something that has been discussed in the past that isn't a current opportunity, but that isn't to say that it never will be. But there is also the awareness that obviously the employer contributions for NHS pension are quite significant as well. So that is something that contractors would need to be aware of should we go down that route as well in in the future.