

Contractor Checklist

Section A: All contracts

1: Practice details

| | |
|-----|--|
| 1.1 | Practice name |
| 1.2 | Contractor name (if different) |
| 1.3 | Practice/correspondance address (S1 pt2) |
| 1.4 | Practice manager (not required) |
| 1.5 | Telephone (S1 pt2) |
| 1.6 | Fax (S1 pt2) |
| 1.7 | Website (not required) |
| 1.8 | Email (S1 pt2) |

2: Visit details

| | |
|-----|---|
| 2.1 | Date of visit |
| 2.2 | Purpose of visit (new application / review existing practice / other) |
| 2.3 | Visited by (Name, Job Title, Representing) |

3: Business type

| | |
|------|--|
| 3.1 | Business type? (individual / partnership / body corporate) |
| 3.4 | Is the contractor using a protected title and is this correctly used? (Section 28 Opticians Act 1989) (65) |
| 3.5 | Owner or Chief Executive's name |
| 3.6 | Partners' or Directors' names |
| 3.7 | Registered address (if different) |
| 3.8 | Company secretary name (BC only) |
| 3.9 | Companies House registration number (BC only) |
| 3.10 | Are the business details held by NHS England/AT accurate and up-to-date? |

4: Contracts applied for / held

| | |
|---|--|
| 4 | Contracts applied for/held (mandatory / additional / both) |
|---|--|

5: Hours of practice opening (66.3)

| | |
|---|---|
| 5 | Hours of practice opening (including lunchtime closure) |
|---|---|

6: Hours GOS normally provided (29, 66.3)

| | |
|---|-----------------------------|
| 6 | Hours GOS normally provided |
|---|-----------------------------|

7: Performers in regular attendance (46, 66.4)

| | |
|-----|---|
| 7.1 | Optometrist / OMP name |
| 7.2 | DoB or first registration date |
| 7.3 | Ophthalmic Performers List (OPL) number |
| 7.4 | Professional indemnity insurance by? (specify AOP, FODO, etc) |
| 7.5 | Included in the Ophthalmic Performers List (OPL)? |

8: Other clinical staff in attendance (51)

| | |
|-----|--|
| 8.1 | Name |
| 8.2 | Position and tasks undertaken |
| 8.3 | DoB or first registration date (if applicable) |
| 8.4 | Professional registration number (if applicable) |

| | |
|------------|--|
| 8.5 | Licensing body (if applicable) |
| 8.6 | Qualifications for pos? (if unregistered, e.g. trained in house) |

9: Staffing procedures (51)

| | |
|------------|---|
| 9.1 | Does the contractor ensure that all clinical staff have up to date professional registration? |
| 9.2 | Does the contractor check the references of all registered clinical staff (including locums)? |
| 9.3 | Does the contractor check that all performers are covered by up to date professional indemnity insurance (where applicable)? |
| 9.4 | Has the contractor produced evidence that all employed optometrists and OMPs are included in the NHS England ophthalmic performers' list? |
| 9.5 | Does the contractor ensure that NHS England/AT is informed of any changes to the performers providing GOS at the practice? (Please include method e.g. email/phone/fax as a note.) |
| 9.6 | Does the contractor ensure that staff assisting in the provision of GOS are appropriately trained and supervised for the tasks that they undertake? |
| 9.7 | Does the contractor ensure that clinical procedures are appropriate, especially at times when a supervising practitioner is not on the premises, eg. repeat fields and pressures or child or blind or partially sighted dispensing? |

10: Insurances and registrations

| | |
|-------------|---|
| 10.1 | Contractor has up to date arrangements for cover in cases of clinical negligence? (89) |
| 10.2 | Current Employers liability cover? (Employers Liability [Compulsory Insurance] Act 1969) (100) |
| 10.3 | Current Public Liability cover? (90) |
| 10.4 | Medicines and Healthcare products Regulatory Agency (MHRA registration)? (assemblers/manufacturers only) (28) |

11: GOS sight test application procedures

| | |
|-------------|---|
| 11.1 | Practice staff routinely undertake Point of Service checks? (37) |
| 11.2 | Practice staff understand that they must routinely note date of last sight test (not just date of last NHS sight test) on GOS 1 and GOS 6 (37.3) |
| 11.3 | Practice staff are familiar with recommended minimum GOS sight test intervals as set out in the Memorandum of Understanding and reproduced in Vouchers at a Glance? |
| 11.4 | Contractor records reasons when sight tests are refused to patients except in cases where a sight test is not necessary or the patient is not eligible? (40) |
| 11.5 | Patient is offered a choice of performer where appropriate (25A) |
| 11.6 | The practice offers all GOS patient groups equal access to appointments during GOS hours (39) |
| 11.7 | The practice is aware of the ongoing requirement to notify NHS England/AT of changes to the times at which the contractor is willing to provide GOS (29) |

12: Information access and protection

| | | |
|-------------|---|---------------------------------------|
| 12.1 | Contractor has an up to date Freedom of Information Act statement and this is available to patients? (100) (Freedom of Information Act 2000) | |
| 12.2 | Registered with Information Commissioner for Data protection (patient data held on computer or other electronic device)? (100) (Data Protection Act 1998) | |
| 12.3 | Name and title of person responsible for practices and procedures relating to confidentiality? (56) | |
| 12.4 | The practice policy on handling patient data is available to patients? (100) (Data Protection Act 1998, Freedom of Information Act 2000) | |
| 12.5 | Staff are aware how to handle patient data correctly? (100) (Data Protection Act 1998) | |
| 12.6 | Has the practice received from NHS England/AT (or have you obtained for yourself) details of local child protection arrangements? (100) | |
| 12.6 | <i>If yes</i> | Has the practice had regard to these? |
| 12.7 | Has the practice received from NHS England/AT (or have you obtained for yourself) details of a recommended lone worker policy for optometry? (100) | |
| 12.7 | <i>If yes</i> | Has the practice had regard to this? |

| | | |
|------|--|--------------------------------------|
| 12.8 | Has the practice received from NHS England/AT (or have you obtained for yourself) details of a recommended chaperone policy for optometry? (100) | |
| 12.8 | <i>If yes</i> | Has the practice had regard to this? |

13: Record keeping (52)

| | |
|------|---|
| 13.1 | If gifts valued at more than 100 have been received does the contractor maintain a gifts register? (92) |
| 13.2 | Patient records are securely stored. If electronic, backups are made regularly and kept separately and securely? (52) |
| 13.3 | GOS records are retained for 7 years in either paper or electronic form? (54) |
| 13.4 | Contractor is aware of professional recommendations to keep records for longer? (i.e. adults and deceased patients for 10 years; children to 25th birthday) |
| 13.5 | The practice maintains full and accurate contemporaneous records for all GOS patients? (52) |
| 13.6 | Each clinical record contains items from the following list as appropriate to the individual patient: symptoms/reason for visit, ocular history, general health, medications, family ocular history, unaided vision/visual acuity, BV, etc. |
| 13.7 | Record is legible? |
| 13.8 | Is it easy to identify from the records which performer undertook the sight test? |

14: Referral and notification procedures

| | |
|------|--|
| 14.1 | Contractor is aware of any local protocols for referral to GPs / referral management or triage centre / ophthalmology department? (31)(100) |
| 14.2 | When required a written referral is made to the patients GP/referral management centre/ophthalmology department and the urgency of the referral is indicated when appropriate? |
| 14.3 | Is the patient informed in writing of the details of their referral? (Sight Testing [Examination and Prescription] [No. 2] Regulations 1989) (100) |
| 14.4 | Contractors ensure that patients are handed their prescription or statement? (33) |

15: Complaints and incidents

| | |
|------|--|
| 15.1 | Contractor has a written NHS compliant complaints procedure and is aware of requirement to report annually the number of complaints received? (It is helpful for NHS England/AT to provide a notification form for this purpose.) (103A) |
| 15.2 | The complaints procedure is available to patients and staff? (101) |
| 15.3 | Name of person responsible for dealing with complaints? (108) |
| 15.4 | Contractor maintains a separate record of all complaints and associated paperwork for 2 years? (112) |
| 15.5 | Contractor is aware and has ensured that all staff are aware of the obligation to report adverse incidents potentially affecting the performance of the contract? (66) |
| 15.6 | The contractor receives Safety Alerts from the NHS England/AT within an appropriate timescale? |
| 15.7 | Contractor adheres to the requirements or recommendations of MHRA medical device alerts (MDAs) and safety alert broadcasts (SABs)? (28) |
| 16.1 | Type of premises? (purpose built / converted / commercial / health centre / other) |
| 16.2 | Practice is on? (ground floor / first floor / other) |
| 16.3 | Car parking? (own parking / on-street parking / nearby public car park / difficult) |

Section B: Mandatory contracts only

17: Signage and documentation

| | |
|------|--|
| 17.1 | Current Notice of eligibility for NHS eye examination is displayed (description of services)? (57) |
| 17.2 | Current Notice of eligibility for NHS voucher towards the cost of spectacles is displayed? (57) |
| 17.3 | A complaints notice including the name of responsible person and contact details is displayed? (57) |
| 17.4 | Valid Certificate of Employers Liability is displayed? (Employers Liability [Compulsory Insurance] Act 1969) (100) |
| 17.5 | Details of business ownership/registered office are displayed? (Business Names Act 1985) (100) |

| | |
|------|--|
| 17.6 | Health and Safety Poster is displayed (or copies supplied to individual employees)? (25) |
| 17.7 | No smoking sign is displayed? (Health Act 2006) (100) |

18: General health and safety (28)

| | |
|------|--|
| 18.1 | Health and safety risk assessment done? (must be documented if >5 people working there) |
| 18.2 | Contractor has Health and Safety Policy? |
| 18.3 | Contractor is aware of reporting responsibilities under RIDDOR? (100) (Reporting Injuries Diseases and Dangerous Occurrences Act 1995) |
| 18.5 | A suitable first aid kit is available and location clearly identified? (100) (First Aid Regulations 1981) |
| 18.6 | Contractor has an identified person who is responsible for first aid arrangements? (100) (First Aid Regulations 1981) |
| 18.6 | Contractor has an accident record book? (100) (First Aid Regulations 1981) |
| 18.7 | Portable appliance and fixed installation electrical (PAT) testing and/or regular visual inspection of appliances is carried out? (100) (Electricity at Work Regulations 1989) |

19: Fire precautions (25, 100)

| | |
|------|---------------------------------|
| 19.1 | Fire Risk Assessment completed? |
| 19.2 | Fire extinguishers? |
| 19.3 | Fire extinguishers serviced? |
| 19.4 | Fire exit signs? |
| 19.5 | Fire exit clear? |

20: Risk assessment: non clinical areas (25)

| | |
|------|---|
| 20.1 | Non clinical areas (stairs, passageways etc) are clean and tidy? |
| 20.2 | Non clinical areas areas has adequate lighting? |
| 20.3 | Non clinical areas areas are clear of trip hazards? |
| 20.4 | Traffic routes in non clinical areas are clear of obstructions? |
| 20.5 | Reasonable patient access in non clinical areas? (100) (Disability Discrimination Acts 1995 & 2005) |

21: Risk assessment: reception and waiting areas (25)

| | |
|------|--|
| 21.1 | Reception and waiting areas are clean and tidy? |
| 21.2 | Reception and waiting areas have adequate lighting? |
| 21.3 | Reception and waiting areas are clear of trip hazards? |
| 21.4 | Traffic routes in reception and waiting areas are clear of obstructions? |
| 21.5 | Reasonable patient access in reception and waiting areas? (100) (Disability Discrimination Acts 1995 & 2005) |
| 21.6 | Suitable and sufficient seating in reception and waiting areas? |
| 21.7 | Layout of reception and waiting areas respects the need for patient confidentiality? |
| 21.8 | There is a facility for confidential telephone calls to be made by the optometrist/OMP, eg for urgent referrals? |

22: Risk assessment: dispensing area (25)

| | |
|------|--|
| 22.1 | Dispensing area is clean and tidy? |
| 22.2 | Dispensing area has adequate lighting? |
| 22.3 | Dispensing area has suitable and sufficient seating? |
| 22.4 | Dispensing area is clear of trip hazards? |
| 22.5 | Traffic routes in dispensing area are free from obstructions? |
| 22.6 | Reasonable patient access in dispensing area? (100) (Disability Discrimination Acts 1995 & 2005) |
| 22.7 | Layout of dispensing area respects the need for patient confidentiality? |

23: Risk assessment: consulting area (25)

| | |
|------|--|
| 23.1 | Consulting room is clean and tidy? |
| 23.2 | Consulting room has adequate lighting? |
| 23.3 | Consulting room is clear of trip hazards? |
| 23.4 | Traffic routes in consulting room are not obstructed? |
| 23.5 | Reasonable patient access in consulting room? (100) (Disability Discrimination Acts 1995 & 2005) |
| 23.6 | Suitable and sufficient seating in consulting room? (25) |
| 23.7 | Constructed to be suitable for confidential consultations? (25) |
| 23.8 | Adequate testing distance? (25) |

24: Clinical testing equipment (25)

| | |
|-------|---|
| 24.1 | Focimeter? |
| 24.2 | Frame ruler or similar? |
| 24.3 | Visual field test? |
| 24.4 | Tonometer? |
| 24.5 | Distance test chart for adults? |
| 24.6 | Distance test chart for children/non-English/learning disability? |
| 24.7 | Trial lenses and accessories? |
| 24.8 | Trial frame? |
| 24.9 | Retinoscope? |
| 24.10 | Ophthalmoscope? |
| 24.11 | Distance binocular vision test? |
| 24.12 | Near binocular vision test? |
| 24.13 | Slit lamp? |
| 24.14 | Indirect ophthalmoscope or Volk lens |
| 24.15 | Near reading chart? |
| 24.16 | Amsler grid? |
| 24.17 | Colour vision test? |
| 24.18 | Stereopsis test? |
| 24.19 | All equipment is in working order and is fit for purpose? |

25: Ophthalmic drugs (25)

| | |
|------|--|
| 25.1 | Mydriatic drugs available and in date? (e.g. tropicamide) |
| 25.2 | Cycloplegic drugs available and in date? (e.g. cyclopentolate) |
| 25.3 | Staining agents available and in date? (e.g. fluorescein/rose Bengal) |
| 25.4 | Anti-infective drugs available and in date? (e.g. chloramphenicol) (not required) |
| 25.5 | Topical anaesthetics available and in date? (e.g. proxymetacaine/oxybuprocaine) (not required) |
| 25.6 | Drugs are stored appropriately and securely? (e.g. proxymetacaine and chloramphenicol in a fridge) |
| 25.7 | Single dose drugs (eg. Minims) are used once and then discarded? |

26: Infection control (28)

| | |
|------|---|
| 26.1 | Access to a wash hand basin? (Good practice for this to be within the consulting room) (28) |
| 26.2 | Liquid soap? (28) |
| 26.3 | Paper towels? (28) |
| 26.4 | Alcohol gel or alternative anti-bacterial hand rub available? (28) |
| 26.5 | Staff aware of good hand washing practice? (28) |
| 26.6 | Suitable procedures in place for decontamination of hard surfaces? (28) |
| 26.7 | Suitable procedures for decontamination of reusable equipment? (28) |
| 26.8 | Appropriate use of disposable and single use items? (28) |

27: Waste disposal (100)

| | |
|------|---|
| 27.1 | Contractor aware of duty of care to appropriately dispose of waste? |
| 27.2 | Contract in place for disposal of pharmaceutical waste? |
| 27.3 | Record relating to medicines disposal kept for correct time period (transfer notes 2 years, consignment notes 3 years)? |
| 28.1 | Suitable patient leaflet available? (57) |
| 28.2 | Is contractor aware of domiciliary code of practice? |
| 28.3 | Is contractor aware of notification requirements for domiciliary visits? (24) |

Section C: Additional contracts only

29: Infection control (28)

| | |
|------|---|
| 29.1 | Liquid soap where this is unlikely to be available at the premises visited or alternative means of cleaning the hands? (28) |
| 29.2 | Paper towels where appropriate hand drying facilities are unlikely to be available on the premises visited? (28) |
| 29.3 | Alcohol gel or alternative anti bacterial hand rub available? (28) |
| 29.4 | Suitable procedures for decontamination of reusable equipment? (28) |
| 29.5 | Appropriate use of disposable and single use items? (28) |

30: Waste disposal (100)

| | |
|------|--|
| 30.1 | Contractor aware of duty of care to appropriately dispose of waste? |
| 30.2 | Contract in place for disposal of pharmaceutical waste? |
| 30.3 | Records relating to medicines disposal kept for correct time period (transfer notes 2 years, consignment notes 3 years)? |

31: Mobile equipment requirements (25)

| | |
|-------|--|
| 31.1 | Appropriate distance test chart (preferably internally illuminated)? |
| 31.2 | A distance test chart suitable for children / non-English / learning disability? |
| 31.3 | Measuring device? |
| 31.4 | Trial lenses and accessories? |
| 31.5 | Trial frame? |
| 31.6 | Retinoscope? |
| 31.7 | Ophthalmoscope? |
| 31.8 | Distance binocular vision test? |
| 31.9 | Near binocular vision test? |
| 31.10 | Magnification for anterior eye examination? |
| 31.11 | Near vision type test? |
| 31.12 | Tonometer? |
| 31.13 | Amsler grid? |
| 31.14 | Means of assessing visual field? |
| 31.15 | Focimeter? |
| 31.16 | Frame ruler or similar? |
| 31.17 | All equipment is in working order and is fit for purpose? |

32: Ophthalmic drugs (25)

| | |
|------|--|
| 32.1 | Mydriatic drugs available and in date? (e.g. tropicamide) |
| 32.2 | Staining agents available and in date? (e.g. fluorescein/rose Bengal) |
| 32.3 | Cycloplegic drugs available and in date? (e.g. cyclopentolate) (not required) |
| 32.4 | Anti-infective drugs available and in date? (e.g. chloramphenicol) (not required) |
| 32.5 | Topical anaesthetics available and in date? (e.g. proxymetacaine/oxybuprocaine) (not required) |

| | |
|-------------|--|
| 32.6 | Drugs are stored appropriately and securely? (e.g. proxymetacaine and chloramphenicol in a fridge) |
| 32.7 | Single dose drugs (eg. Minims) are used once and then discarded? |
| 32.8 | Drugs are disposed of appropriately? |

Section D: Documentary evidence available for inspection

| | |
|-------------|---|
| 7.4 | Clinical negligence insurance certificate for each performer or for contractor itself |
| 9.1 | Evidence of current professional registration of all performers |
| 9.2 | Clinical references for all new performers engaged since last self-assessment |
| 9.4 | Evidence of inclusion in ophthalmic performers list for all new performers engaged since last self-assessment |
| 10.2 | Current Employers Liability insurance certificate |
| 10.3 | Current Public Liability insurance certificate |
| 10.4 | Medicines and Healthcare products Regulatory Agency (MHRA) registration (assemblers/manufacturers only) |
| 11.4 | Record of patients refused a sight test since last self-assessment |
| 12.1 | Up to date Freedom of Information Act statement |
| 12.2 | Proof of registration with Information Commissioner |
| 12.4 | Practice policy on handling patient data |
| 12.6 | Practice child protection policy |
| 12.7 | Practice lone worker policy |
| 12.8 | Practice chaperone policy |
| 13.1 | Gifts register |
| 15.1 | Written complaints procedure |
| 17.5 | Details of business ownership and/or registered office unless sole or partnership contractor trading under own name |
| 18.1 | Health and safety risk assessment (compulsory to document if more than 5 people working in the business) |
| 18.2 | Health and safety policy |
| 19.1 | Fire risk assessment (compulsory to document if more than 5 people working) |
| 27.2 | Pharmaceutical waste disposal contract |
| 27.3 | Sample pharmaceutical waste transfer note and/or consignment note |
| 28.1 | Patient information leaflet (Additional contracts only) |