

NATIONAL HEALTH SERVICE

CLAIM IN RESPECT OF CONTINUING EDUCATION AND TRAINING ALLOWANCE

An allowance for continuing education and training (CET) is payable to optometrists (other than bodies corporate carrying on the business of optometrists) and ophthalmic medical practitioners (OMP) who:

- have been included on an NHS Board's Ophthalmic List for at least six months during 2019;
- have maintained their professional registration (with the General Optical Council for optometrists, and with the General Medical Council for OMPs);
- have undertaken appropriate CET during the relevant year;
- (for OMPs only) during the relevant year, their only remunerated medical or optical activity was the conduct of general ophthalmic services.

An allowance for independent prescriber continuing education and training (IPCET) is payable to optometrist independent prescribers who:

- have been included on an NHS Board's Ophthalmic List for at least six months during 2019;
- have been registered with a host Health Board as an optometrist independent prescriber for a period of at least six months during 2019;
- have maintained their professional registration with the General Optical Council and have been registered as an optometrist independent prescriber;
- have undertaken appropriate IPCET during the preceding year.

The independent prescribing code should be noted on the form over the page and will be checked by Practitioner Services prior to payment.

Where your name is included in the Ophthalmic List of more than one Board you should make the claim in respect of the NHS Board for whom you provide the greatest proportion of general ophthalmic services at the time you make the claim.

Only one CET allowance or IPCET allowance may be paid in respect of any one person for appropriate CET or IPCET undertaken by that person during the relevant year to which the claim relates.

Full details of this allowance can be obtained via the following hyperlink - <https://bit.ly/2OvBbOV>

HOW TO RETURN THE FORM ONCE COMPLETED

Forms should be printed off and signed and returned electronically no later than **Monday 30 November 2020** to: nss.psdgospayteam@nhs.scot, with "CET ALLOWANCE CLAIM" in the subject header.

PART 1 PARTICULARS OF OPTOMETRIST/OMP (Please complete this section in BLOCK CAPITALS)

1. Surname

2. Other Name(s)

3. Practice Address

Postcode

4. Ophthalmic List number

5. Host/Main Board

6. Independent Prescriber Yes No 7. Prescriber Code

8. GOC/GMC List Number

9. email address (NHS mail where available)

10. Payment is by BACS. Please provide Bank Account name, Sort Code, and Account Number where payment is to be made:

Account name

Sort Code - - Account Number

PART 2 DECLARATION BY OPTOMETRIST/OMP

I claim payment of the CET allowance of £578 or IPCET allowance of £867 and I declare that:

- (all) I have been included on a NHS Board's Ophthalmic List for at least six months during 2019;
- (for IP only) I have been registered with a host Health Board as an optometrist independent prescriber for a period of at least six months during 2019;
- (all) I undertook appropriate CET or IPCET during 2019;
- (for OMPs) during 2019 my only remunerated medical or optical activity was the conduct of general ophthalmic services;
- (all) I am properly entitled to claim the allowance; and
- (all) the information I have given on this form is correct and complete. I understand if I knowingly give wrong or incomplete information I may be subject to court proceedings.

I understand the NHS may use this information to assure accurate payments, for the prevention and detection of fraud and share it with other bodies responsible for auditing or administering public services. I also confirm that I am an optometrist/OMP on the first or second part of the Ophthalmic List of the NHS Board in respect of which I am claiming this allowance and that this is the only claim for the CET/IPCET allowance that I have submitted or will submit in respect of appropriate CET or IPCET undertaken in 2019.

Optometrist/OMP Signature _____

Date - -