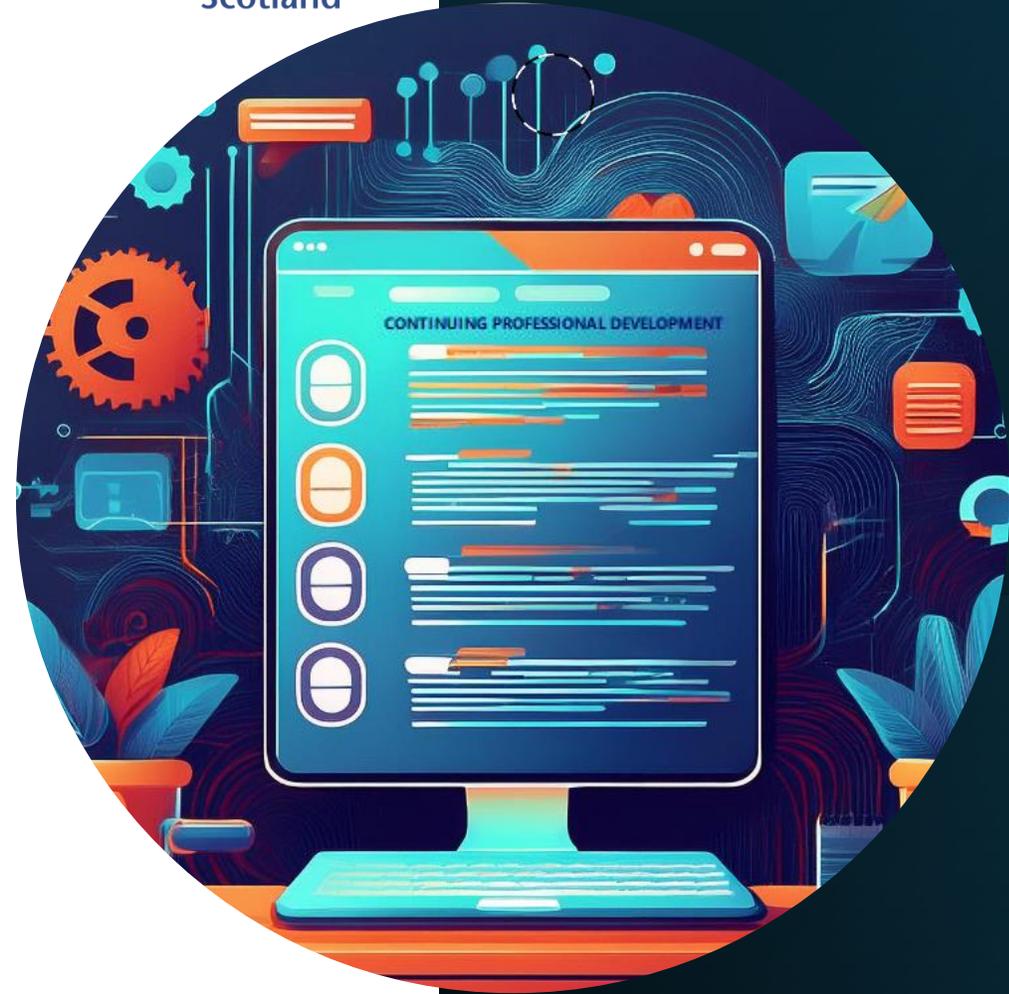


Ophthalmic Continuing Professional Development Allowance

Instructions on how to submit
your claim



Claim submission process – Overview

For this year’s CPD allowance we will continue to use the CPD allowance claim form we used last year, hosted on the eOphthalmic system. This will allow you to enter your details directly onto a secure web form and submit them to us, using your existing eOphthalmic log-in credentials and PIN number.

(Step 1) Open up and complete the claim form.

(Step 2) To ensure that the information you have provided is correct, prior to submission, the claim will go through a set of validation checks.

(Step 2a) You will be provided with a claim ID reference number.

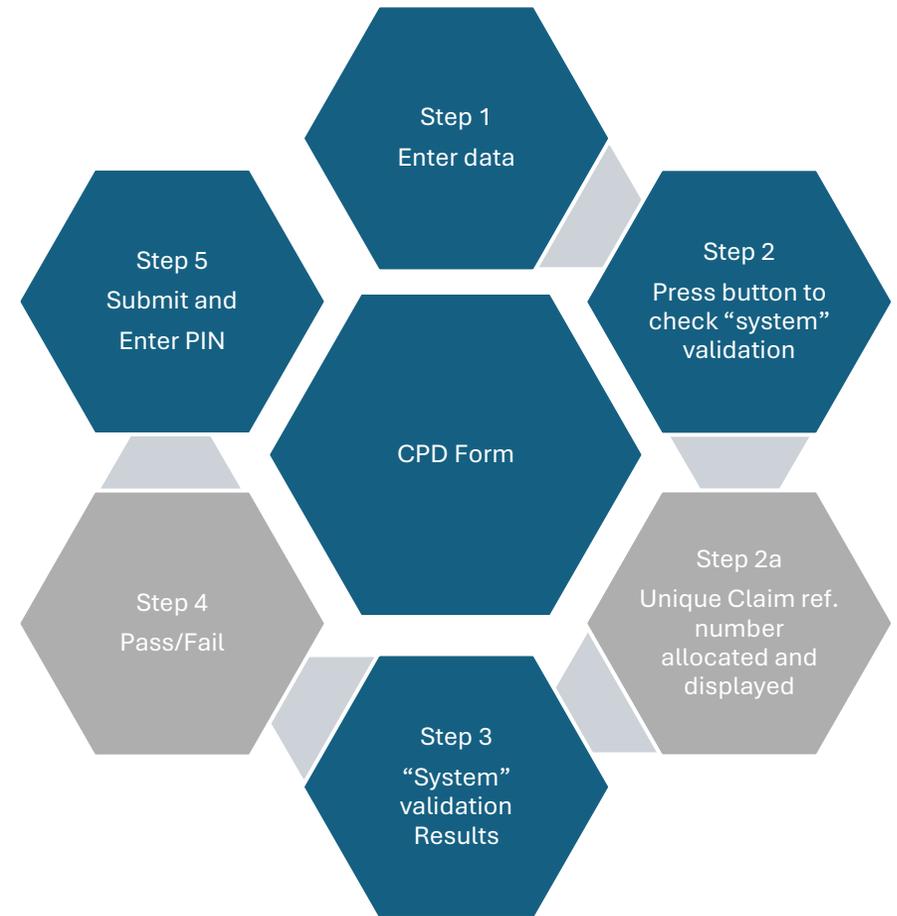
(Step 3) The system will show if the claim has passed “system” validation.

(Step 4) Any fields that fail will be highlighted and you will be required to correct them. The claim will then need to go through the “system validation process” once more **(Step 2)**.

(Step 5) Once the form has passed the “system validation” successfully, you are able to proceed to submitting the claim.

Upon receiving your claim, we will send you an email (to the address provided) with details of the next steps.

The following pages will walk you through the process in more detail.



Key:

Action by you



Action by system



Digital Webforms - Log on Page

(<https://digitalwebforms.mhs.scot.nhs.uk>)

A blue circular button with a white border and a slight shadow, containing the word "Action" in white text.

Action

Please Note:

You will not be able to complete your CPD allowance claim without an active user account. To create an account, please refer to these [instructions](#).

If you currently submit your GOS and/or NHS optical voucher claims via the eOphthalmic web form you will use the same eOphthalmic username and password.

If your GOS and/or NHS optical voucher claims are submitted automatically via your Practice Management System (PMS) and/or you don't currently have an eOphthalmic account, then you **must** set up a user account for the eOphthalmic system, to be able to access and submit your CPD allowance claim form.

You should submit your claim from the computer you use to submit your GOS claims. This is so that the connection will be secure and get through our security firewall. If you have any problems submitting your CPD claim, then please contact nss.psdophthalmic@nhs.scot

Digital Webforms - Log on Page



Log in to the webform at this address:

<https://digitalwebforms.mhs.scot.nhs.uk>

This will take you to the landing page, where you can log in using your user account credentials.

The screenshot shows the login page for Digital Webforms. In the top left corner is the NHS National Services Scotland logo. The main content area contains a login form with two input fields: "User Name" and "Password". Below the "Password" field is a "Login" button. To the left of the form, the heading "Digital Webforms" is displayed in a large, bold font, followed by the text "Welcome to the digital webforms service." and a disclaimer: "This service is for authorised users only. Anyone attempting unauthorised access will be considered for appropriate legal action."



User Name

Password

Login

Digital Webforms

Welcome to the digital webforms service.

This service is for authorised users only. Anyone attempting unauthorised access will be considered for appropriate legal action.

Digital Webforms - Practice Selection Page



Digital Webforms 

Logged in as : testu01 (Last Log in : Fri, Aug 02, 2024 10:07) [Logout](#)

GOC: 6645
OLN: 11111

Authentication Successful! Welcome Back, Test User

Select Optometry Practice

Optometry Practice: **Click into this field**

- Select Practice
- 00000 - DigitalWebForms1 Practice **Select a practice**

Click Continue

© 2024

Select the relevant practice from the drop-down list (the details will be used to auto populate some of the fields on the claim). Click 'Continue'.

Digital Webforms – My Forms Page



Digital Webforms - My Forms



Logged in as : testu01 (Last Log in : Fri, Aug 02, 2024 10:07) [Logout](#)

GOC: 6645
OLN: 11111

<u>Form Id</u>	<u>Created Date</u>	<u>Form Type</u>	<u>Submitted Date</u>	<u>Submission Number</u>	<u>Status</u>
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Click Create New Form

© 2024

Clicking on the 'Create New Form' button will open the CPD form.

Digital Webforms – CPD Claim Form

(<https://digitalwebforms.mhs.scot.nhs.uk>)



New

The claim form is split into 4 Parts:

PART 1: OPTOMETRIST'S PERSONAL DETAILS

PART 2: OPTOMETRIST'S PROFESSIONAL DETAILS

PART 3: BANK ACCOUNT DETAILS

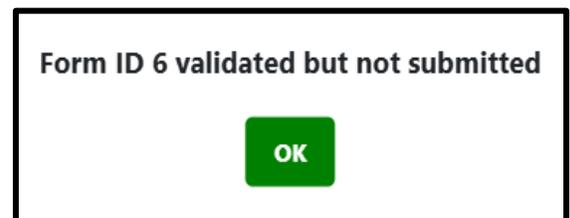
PART 4: DECLARATION BY OPTOMETRIST/OPHTHALMIC MEDICAL PRACTITIONER

Fields that contain an * **are mandatory fields** that you must complete.

The claim form contains a 'Validate' button and a 'Save' button located at the right-hand side of the form. By selecting 'Save' it will save the information you have entered if you need to return later to complete the form. You might also want to save the details entered and double-check them prior to submitting the form. Saving the form will generate a pop-up message containing the Form ID and highlighting that the form has been saved but has not been submitted

When you have completed the form, click the 'Validate' button to have your data "system validated". Validating the form will generate a pop-up message containing the Form ID and highlighting that the form has been validated but has not been submitted.

Any errors will be highlighted against the field (this also applies if you partially complete it). Once you have corrected the errors, click the 'Validate' button again. After the information passes the "system validation" checks the form is then ready to be submitted.



Digital Webforms – CPD Claim Form



New

PART 1: OPTOMETRIST'S PERSONAL DETAILS

1. *Forename:	<input type="text" value="Test"/>
2. *Surname:	<input type="text" value="User"/>
3. *Home Address:	<input type="text"/> <input type="text"/> <input type="text"/>
4. *Town:	<input type="text"/>
5. *Post Code:	<input type="text"/>
6. *Contact Telephone Number:	<input type="text"/>
7. *National Insurance Number: (format QQ123456A)	<input type="text"/>
8. Personal NHS Email:	<input type="text" value="Ensure this is correct"/>
OR	
9. Personal Non-NHS Email:	<input type="text" value="Ensure this is correct"/>

Your personal NHS or personal non-NHS email address will be used to advise you of the next steps once your form has been submitted successfully.

It will also be used to remind you that you have a form with the status 'Draft'. This means that you have partially/fully completed the form but have not yet submitted it.

It will also be used to contact you if any issues arise, so **it is imperative that the address you give us is correct**. Please use your NHS email address if you have one.

Digital Webforms – CPD Claim Form

Action

PART 2: OPTOMETRIST'S PROFESSIONAL DETAILS

10. *Ophthalmic List Number:	<input type="text" value="11111"/>
11. *GOC Number (as held on GOC register):	<input type="text" value="01-"/> Failed Validation - Check GOC website
12. *If you are an Independent Prescriber Optometrist enter your 7 digit independent Prescriber code (numbers only):	Failed Validation - Check your prescription pad
13. *Are you a Locum?	<input type="radio"/> Yes <input type="radio"/> No
14. Payment Location Code:	<input type="text" value="22222"/>
15. Practice Address:	<input type="text" value="DigitalWebForms"/> <input type="text" value="1 Practice"/> <input type="text" value="Edinburgh"/>
16. Postcode:	<input type="text" value="EH1 2HB"/>

There are several sources both internal and external that we use to validate the information that you provide. If validation fails on certain fields where you believe the information you have provided to be correct, there are specific actions that you need to take.

Field 11. GOC Number – Please check the [GOC web site](#) to ensure the number you entered matches the number held by the GOC. If the numbers do match, please contact nss.psdgospayteam@nhs.scot

Field 12. Independent Prescriber Code (if applicable) – If the number you have entered has been provided by your Health Board, please contact them directly. Once you have had a response, please contact nss.psdgospayteam@nhs.scot

Digital Webforms – CPD Claim Form

Action

17. *Main NHS Board:

(Please select the Main HS Board you worked in for a minimum of six months during the previous calendar year)

18. *I undertook the required Continuing Professional Development in the previous calendar year and I am eligible to claim:

Standard Fee **Select the correct fee**

Higher Fee (Independent Prescriber Optometrists that are eligible for a minimum of 6 months during the relevant claim year)

Field 17. This should be the Health Board for which you are claiming the eligibility period (i.e. at least 6 months working during 2024).

Field 18. To ensure you are paid correctly, please select the fee option that relates to you during the 2024 calendar year. For example, you may currently be an Independent Prescribing Optometrist, but you may not have been for the period you are claiming for.

Digital Webforms – CPD Claim Form

Action

PART 3: BANK ACCOUNT DETAILS

20. *Account Name:

21. *Bank Sort Code:

22. *Bank Account Number:

*I understand that it is my responsibility to ensure this income is declared to HMRC

To ensure that the payment is made to the correct account, please double-check the details you have entered before submitting your form.

- The account name **must** match the name of the account held by your bank or the payment will not go through.
- The sort code should just consist of six numbers – no dashes, no spaces.
- Most bank account numbers have 8 digits. If yours only has 7 digits, please add a leading ‘zero’ at the beginning to bring it up to 8 digits.

The validation checks will ensure you have entered a valid sort code and account number but will not validate the account holder(s) name. Please **do not** enter the name of the bank, as we require the name of the account holder(s).

Digital Webforms – CPD Claim Form



Action

PART 4: DECLARATION BY OPTOMETRIST/OPHTHALMIC MEDICAL PRACTITIONER

- *I have read and understood the conditions set out in [PCA\(O\)2025\(03\)](#) and satisfy these to claim this allowance
- *I have maintained my professional registration and undertook the required Continuing Professional Development in the previous calendar year and have been on the NHS Board Ophthalmic List as an Optometrist/IP Optometrist for at least 6 months during the previous calendar year
- *I agree that the information I have given on this form is correct and complete to the best of my knowledge and I understand that if I knowingly give wrong or incomplete information that results in a payment being made, I may be subject to court proceedings
- *I understand that NHS National Services Scotland may use this information to assure accurate payments and for the prevention and detection of fraud and share it with other bodies responsible for auditing or administering public funds Further information is available at: [Practitioner Services Data Protection Notice](#)

Before you submit your claim form, you must agree with all the declarations listed.

The validation checks will ensure you have checked all the boxes.

Digital Webforms – Validation Checks



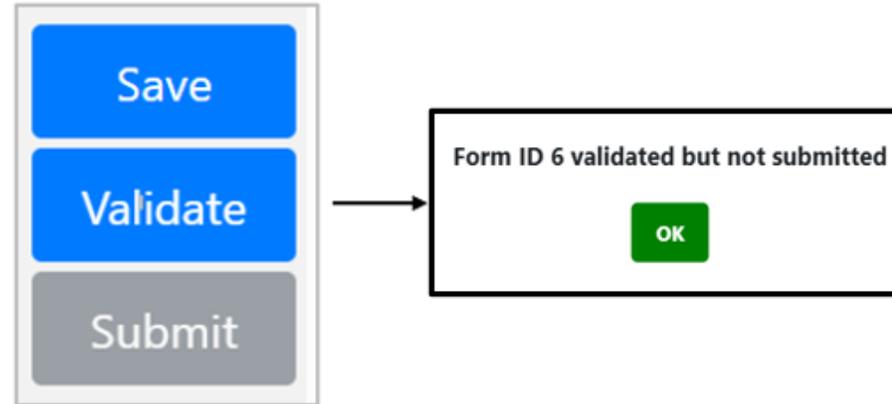
New

Step 2 - Once you have completed your form and made the declaration, the form is now ready to go through the “system” validation checks prior to submission.

This is executed by clicking the **Validate button** located at the right-hand side of the form. You will also be presented with the **Form ID reference number** and a message that highlights the form has been validated but not submitted.

If the fields pass validation, the claim is now ready to be submitted.

If any fields fail validation, this will be highlighted below the fields that have failed. Once you have corrected these, you will click the **Validate button** again. You will also be presented with the same **Form ID reference number**. If there are no further corrections required, the form is now ready to be submitted.



4. *Town:	<input type="text"/>	Field 4 – Cannot be left blank, contain numbers or special characters
5. *Post Code:	G2	Field 5 – Cannot be left blank or contain special characters
6. *Contact Telephone Number:	<input type="text"/>	Field 6 – Must be 11 digits, cannot be left blank, contain letters or special characters

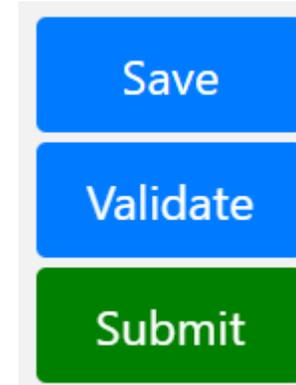
Digital Webforms – Form Submission



New

The **submit button** is located at the right-hand side of the form will change from grey to green once all the “system” validation checks have been passed.

Press the submit button when it turns green, and a pop-up box will appear which will ask you to enter your PIN number.



Your PIN is the 6-digit number you enter to submit your GOS/NHS Voucher claims or (if you do not normally use the eOphthalmic webform platform) have set up specifically to allow you to submit your CPD form.

PIN Number:

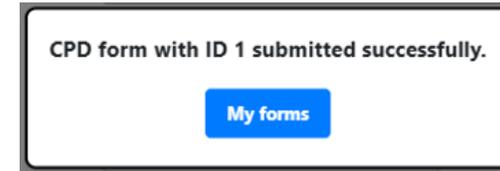
Declaration Date:

Digital Webforms – Form Submission



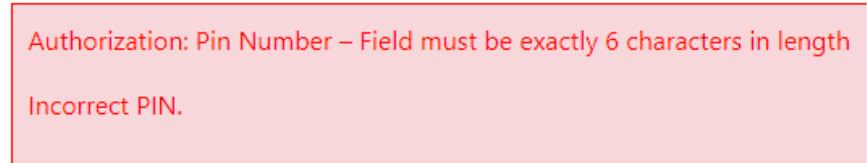
New

Once the form has been successfully submitted, you will receive an on-screen acknowledgment, along with the Claim ID reference number. Clicking the blue 'My forms' button will take you back to your forms homepage.



We will then check for any duplicate claims and **the next working day**, an email with details of the next steps will be sent to the email address that you have provided on the claim form.

If the PIN number does not match the number we hold for you, an error will be presented at the **top** of the form. Once you have corrected this you click the 'Submit' button again. If you are unable to enter your PIN then please contact our Customer Services Helpdesk at nss.psdophthalmic@nhs.scot



Digital Webforms – My Forms Page



New

The 'My Forms' homepage provides details of the form(s) that you created and include the 'Status' of the form.

Status 'Draft' - You have created a form but have not yet submitted it.

<u>Form Id</u>	<u>Created Date</u>	<u>Form Type</u>	<u>Submitted Date</u>	<u>Submission Number</u>	<u>Status</u>	
1	19/05/2025 12:40:36	CPD	19/05/2025 13:32:26	1	Submitted	Edit

[Create New Form](#)

If a form is sitting with the status 'Draft', it could be because you have partially or fully completed it, but have not yet submitted it. To view what you have entered select 'Edit'. Once you are happy with the details provided you can then submit. If you do select the option to create a new form you will be presented with a pop-up message. You should only edit a draft form

CPD form already exists. Do not create a new form unless you have been advised to do so by the **GOS Payments Team**. Do you wish to continue?

[Cancel](#) [Ok](#)

If you have a form with the status 'Draft' you will receive an email from **no reply NSS psdGOSCPDclaims** to remind you that you have not yet submitted your form.

Digital Webforms – My Forms Page



New

The 'My Forms' homepage provides details of the form(s) that you created and include the 'Status' of the form.

Status 'Submitted' - Editing a submitted form

Form Id	Created Date	Form Type	Submitted Date	Submission Number	Status	
5	21/05/2025 15:04:42	CPD	26/05/2025 11:45:39	1	Submitted	Edit

[Create New Form](#)

If you have been advised to edit and resubmit your form, select the 'Edit' button. You will be presented with a pop-up message:

Do not edit a submitted form unless you have been advised by the **GOS Payments Team** to do so. Do you wish to continue?

[Cancel](#) [Ok](#)

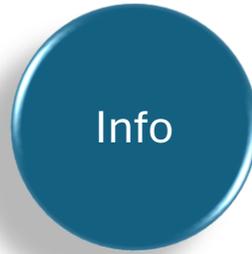
Below is how your claim form information will display once it has been resubmitted successfully.

Form Id	Created Date	Form Type	Submitted Date	Submission Number	Status	
5	21/05/2025 15:04:42	CPD	26/05/2025 11:45:39	2	Submitted	Edit

This will update to show when you resubmitted your form This will show how many times you have submitted your form

[Create New Form](#)

Digital Webforms – My Forms Page



The 'My Forms' homepage provides details of the form(s) that you have created and include the 'Status' of the form.

New

Status 'Submitted' - Creating a new form when one has been submitted

<u>Form Id</u>	<u>Created Date</u>	<u>Form Type</u>	<u>Submitted Date</u>	<u>Submission Number</u>	<u>Status</u>		
1	19/05/2025 12:40:36	CPD	19/05/2025 13:32:26	1	Submitted	Edit	

[Create New Form](#)

If you have been advised to create a new form, select create new form. You will be presented with a pop-up message:

CPD form already exists. Do not create a new form unless you have been advised to do so by the **GOS Payments Team**. Do you wish to continue?

[Cancel](#) [Ok](#)

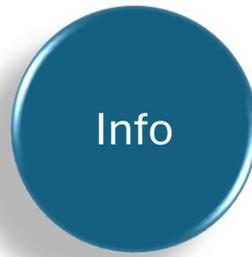
Below is how your claim form information will display once it has been resubmitted successfully.

<u>Form Id</u>	<u>Created Date</u>	<u>Form Type</u>	<u>Submitted Date</u>	<u>Submission Number</u>	<u>Status</u>		
6	21/05/2025 15:08:09	CPD	21/05/2025 15:08:53	1	Submitted	Edit	
7	21/05/2025 15:09:11	CPD	26/05/2025 14:20:52	1	Submitted	Edit	

The form will have a new Form ID as you have created a new form and not edited the existing form

[Create New Form](#)

Digital Webforms – My Forms Page: Create New Claim Form



If you have been advised to submit a new claim, select the 'Create New Form' button and complete the claim from the beginning. Below is how your claim form information will display once your new claim has been submitted successfully.

<u>Form Id</u>	<u>Created Date</u>	<u>Form Type</u>	<u>Submitted Date</u>	<u>Submission Number</u>	Status	
20	12/08/2024 11:47:30	CPD	12/08/2024 11:47:30	1	Submitted	Edit
21	13/08/2024 09:00:22	CPD	13/08/2024 09:11:14	1	Submitted	Edit

The form will have a new Form ID as you have created a new form and not edited the existing form



If you have any queries
regarding these instructions,
then please contact
nss.psdophthalmic@nhs.scot