

Introductions & Apologies MJ opens the meeting and welcomes all. He advises the meeting will be recorded by JS for the purposes of taking the minutes.					
Apologies:					
Alan Bowen (AB), Jane Quinn (JQ), Mohammed Bhuta (MBh) (LOCSU Lead)					
In Attendance: Michael Jackson (MJ) (Chair), Jennifer Smith (JS) (Secretary), Mike Broadhurst (MB) (Treasurer), Asma Adam (AA), Tim Bagot (TB), Sarah Bentley (SB), Sean Buckley (SBu), David Gleave (DG), Philip Harper (PHa), Riz Iqbal (RI), Phil Jones (PJ), Edward Ovenden (EO), Neil Pearson (NP), Mike Ryan (MR), Drew Thompson (DT), Ruth Cuthbert (RC) (Optical Advisor NHS), Tom Mackley (TMa) (LEHN Chair NHS), Sophie Gristenthwaite (SG) (UHMB), Michelle Cole (MC) (MJ Ryan Opticians)					
Declarations of Interest MJ reminded attendees to complete a conflict-of-interest declaration form, where required, and to please send directly to JS.					
Notes and Actions from Previous Meeting The minutes of the last meeting were approved by the group, please refer to the action and decision log at end of minutes for more detail.					
Treasurer's Report MB asked if all had read his Treasurer's Report Jan23 (previously circulated). Redacted as confidential					
Chair's Report Chair's Report Jan 23 NOC 2022 Report Further discussion from the group: 1. TMa - We are moving to ICB/ICS and have several different methods of referring which create real disparity across L&SC. Katie Rimmer (F&W commissioner) will possible be in a position to influence changing this to e.g., a single RMC or optoms referring direct to provider. This is an opportunity to look at all the different systems and learn from the best one – MJ agrees and will					



	 Concerns that the issue of rejected referrals by CHEC in F&W is ongoing and could be larger as the LOC may not be made aware of every referral rejected MJ & SB to continue to have regular meetings with commissioner and follow up on formal complaint. Next meeting end of Jan 23. PCNs - TB feels contacting 42 PCNs is a big piece of work and wonders what the benefit is. He has contacted Bay PCN who were interested in AF & Hypertensive monitoring trials. However, there are only 3 optical practices in this area 2 don't provide any enhanced services outside GOS and the third is struggling to cope with demand. There is a risk we spend a lot of time and money trying to set these things up and then have no practices willing to provide the services. NP advised he found the initial meeting he had with a PCN to be beneficial from an introduction pov. SB advised she emailed 8 PCN clinical directors and 7 PCN managers and hasn't has a single response. DG comments if we don't have these conversations, we won't be able to make any progress in the future, we have to start somewhere. TB asks if the PCNs are the right organisations to approach. JS informs that the PCNs are the ones with the budgets for trials with the Fuller framework and so we do have to approach them for funds. TMa advises not all PCNs are functioning well currently. He recommends the LOC focus on those forward thinking PCNs and initially make contact and ensure they are aware of the current pathways in the area e.g. what's covered by GOS, MECS, CUES and support those services. Also to look at support for sight testing in care homes, for children in care and for the homeless. He advises it could be someone's role on the LOC to be that point of information sharing with these few PCNs. 					
6.	Secretary's Report Secretary's Report Jan 23 Further discussion from the group: 1. SG advised her and Chris Dineen can't access the IP list. Can JS share it again. JS will share careir using MS Office new rather than google dage herefully will work better.					
7.	LEHN Chair Report ELHT are looking into IP places. Would SG & C.Dineen be able to liase with their optical lead to help. ICS – Hopefully will have a new Integrated PES (IPES) contract which will include CUES (new spec), Pr post cat, Glauc repeat readings (GRR) & Glauc enhanced case finding across the whole ICS. TMa is her this will happen in 2023. This would mean one provider, one way of doing it, one set of fees, one IT Platform and would be quite an achievement. Still trying to get children's post vision screening pathway approval. Business case being built to prest to NHS England.					



	 Currently mapping all the current enhanced services and schemes across the patch ready to move from CCGs to the ICS. Hopefully there should be no difference to practices regarding payments, just a lot of work behind the scenes to sort through it all. In the future there should be a lot of data gathered with everything going through one system e.g., referral behaviours, what happens where, if patients are struggling to access urgent eyecare with an IP in a particular area etc. The ICS will therefore be able to put resource where it is needed. There will be opportunities for investment in the workforce, potentially funding higher qualifications like IP, incentives to get optoms to work in areas that are difficult to staff e.g., Barrow. Finally, Optometry is being recognised as one of the 4 pillars of primary care and the leaders of primary care are engaging. We should get some of the resource that previously only went to GPs. <i>Further discussion from the group:</i> There was a called scheduled last week with MJ, TMa & Geoff Joliffe who is the ICB Board member for primary care and a GP. Unfortunately, due to technical issues it has had to be rearranged. MJ & JS have a meeting with Peter Tinson and Lynsey Dickinson tomorrow night to discuss the reaction to the Fuller Report and integration agenda. 					
8.	LOCSU Optical Lead Report					
0.	LOCSU Report Jan 23					
9.	Locality Lead Reports					
	 Central Lancs Locality Report Jan 23 Further discussion from the group: Is YAG available at LEC Chorley – The contract for YAG is held by CHEC for Preston, Chorley & South Ribble patients. LEC do have facilities to do YAG but all referrals will go to CHEC. How long following referral does it take for the LEC Chorley to contact patients re cataract appointments. DG advises LEC now comes up as an option for Wigan practitioners – AA to enquire. Has the YAG contract held by CHEC been renewed? - JS has been told by CHEC that their contract was due to end at the end of March 23 but they have received no notice of termination and are anticipating that it is just going to roll over until further notice. JS to send CHEC response to Deryn Ashby Commissioner to discuss & sort out. Morecambe Bay Lead Report PwLD – request for more practices to join the scheme. Very low volume, allows you to get paid appropriately for the time spent with these patients. PES are going to offer SPoA so patients will be referred to PES who will offer them a choice of provider and then send the referral to the practice. 					



10.	Trust & Private Provider Updates					
	PES – My services section launching soon. Practices will be able to control which services they are listed					
	for. E.g., if IP goes on holiday can turn it off for this period so as not to appear on list for referrals.					
	ISIGHT – Contract expires March 23 – talk of extending it until ICS procurement completed. ISIGHT are					
	not accepting referrals for out of area patients.					
	UHMB – Referral to treatment time has slipped to 88%. Cataract is unaffected, all other services are					
	struggling. It is currently 7+ weeks for a new AMD referral to be seen – advice is to refer patients into the					
	emergency clinic to prevent sight loss. Andy Davies VR consultant at Preston is now doing a Thursday					
	clinic at Westmorland General Hospital, all referrals will go to Chorley and he will arrange to see patients					
	closer to home. VR surgery will be done in Chorley.					
	Low Vision – All area information is now available under the referrals section on the LOC website.					
	C.Critchley at LTHT is keen to set up a referral pathway for LV. Work in progress. Galloways in now an					
	endpoint on Opera and others will be added soon. TMa requests that once all the charities are set up,					
	would the LOC publicise this to the mailing list.					
	IG – LOC is registered with the ICO. JS has the certificate.					
	CPD – Still struggling to get accredited for CPD points. M.Bhuta (LOCSU) is helping to sort out. Lectures					
	from consultants are ready.					
12.	NHSE Optometric Advisor Report					
	Optometric Advisor's Report Jan 23					
	Further discussion from the group:					
	 PCSE providing performer information to LOCs (see NOC report) - Have performers informed PCSE if they moved practice since getting their NPL number. If not PCSEs list will not be updated. 					
	Have contractors told PCSE when taking on new performers? NQ details to be passed to LOC on					
	registering – will depend on NQ optom ticking the box to allow details to be passed to LOC. Advice					
	is for supervisors to tell their pre-regs to sign up to the LOC to be kept up to date. The North West					
	team are working together to produce some information to give to NQ optoms to tell them what the					
	LOC is, what NHS England is, what the ICB is etc and give them contact details. Has to be officially approved before it can be sent out.					
13.	Updates from Meetings/Courses Attended					
_	Induction course has finished. EO due to start LOCSU Leadership course shortly.					
	NOC – Equality and Diversity – Does our LOC reflect the people we represent? MJ advises work to be					
	done on this in readiness for the AGM. If anyone is interested in taking on this work email MJ.					
14.	Any Other Business					
	MECS OSCEs – only Lancaster require the OSCE. There needs to be enough demand for the LOC to					
	consider running this locally.					
	AGM – Galloways want a stall and talk at the AGM. CHEC requested to attend an LOC meeting and were					
	willing to provide a CPD talk for the AGM. Decided not a wide enough audience for CHEC at an LOC					
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	meeting. DT advises the new consultant at the Lancs Eye Clinic Lytham, Ms Bhan, may be interested in providing the CDP talk. Get in touch with LV charities and ask if they would like to attend the AGM and chat to attendees as they arrive prior to the start of the AGM.				
15.	Dates of Next Meetings				
	22/3/23				
	26/4/23 AGM				
	21/6/23				
	Signed By:				
	MRSh				
	Michael Jackson (Chair)				
	Date: 30th March 2023				



Action & Decision Log

Date	Discussion	Action	Assigned to	Progress Update	Current Status
No 1 11/05/22	4. Needs Analysis Review	All LOC members to send a good quality headshot photo to JS to include on the website.	All	23/6/22 - No images Received. Reminder to send to JS. 14/09/22 - Only received from a few people. Reminder to send to JS. 25/01/23 - Still a few images not received – JS will take at the end of the meeting for those present.	CLOSED
No 2 23/06/22	6. Secretary's Report	Contact central fund and find out more about their offering, could they record a presentation or would it need to be live etc.	JS SBu	14/09/22 - JS advises due to workload hasn't been able to look at this. Reallocated to SBu to look into.	Open
No 3 23/06/22	9. Other Update – Low Vision	MR to send to website content and instructions on what to put where to JS along with any charity information to go on website.	MR	 14/09/22 - MR advised work is ongoing & will send to JS as soon as it is completed. 25/01/23 - LV pages now live on the website 	CLOSED
No 4 14/09/22		Consider inviting 3rd sector LV providers to bring a stand to the LOC AGM next year.	MR	14/09/22 - Carry over to update at next meeting	Open
No 5 14/09/22	4. Treasurer's Report	Committee moving to PAYE.	MB & EO	14/09/22 - wait until the next treasurer's forum for more clarity and this can then be discussed at the next LOC meeting. 25/01/23 - MB to set up PAYE on a monthly basis from March 23 payroll.	In Progress

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No 6 14/09/22	4. Treasurer's Report	Set up JS, MJ & EO with debit cards and access to online banking.	MB	25/01/23 - MB to reapply for debit cards for JS, MB & EO. EO to gain access to internet banking.	In Progress
No 7 14/09/22	5. Chair's Report	JS, MJ, SB & FK to go back to SPA F&W with this new information and ensure non EeRS routes remain open.	JS, MJ, SB	25/01/23 - LOCSU have provided document following our request which was sent to commissioner in F&W. Following this and discussion non EeRS pathways will remain open but EeRS is preferred route.	CLOSED
No 8 14/09/22	5. Chair's Report	AA to find out more about how LTHT triage opera referrals.	AA	25/01/23 - LTHT are currently changing their processes and looking at how they manage & triage referrals. Big job so won't be able to update for a while.	Open
No 9 14/09/22	6. Secretary's Report	CHEC - Do practices need a separate contract for post op for F&W patients or can the Preston portal & contract be used.	JS	25/01/23 - CHEC have clarified no separate contract in needed. All practices with access to the portal can use this to process F&W post cats done by CHEC.	CLOSED
No 10 25/01/23	5. Chair's Report	Discuss with K. Rimmer standardising referral pathway across L&SC in the new ICB/ICS	MJ		
No 11 25/01/23	5. Chair's Report	Press F&W commissioner to hold CHEC to account re rejected referrals and ensure fully resolved as quickly as possible. Next meeting 27 th Jan 23	MJ & SB		
No 12 25/01/23	5. Chair's Report	Locality Leads to work with members to get expressions of interest from PCNs and optical practices for enhanced services e.g., AF, hypertension etc	TB, SB, SBu, NP		



No 13 25/01/23	6. Secretary's Report	IP list to be shared with SG and Chris Dineen	JS	
No 14 25/01/23	9. Locality Lead Reports	again How long following referral does it take for	AA	
		the LEC Chorley to contact patients re cataract appointments		
No 15 25/01/23	9. Locality Lead Reports	No practices in Preston, Chorley & south ribble registered for PwLD pathway – can we encourage sign ups	SBu & TB	
No 16 25/01/23	9. Locality Lead Reports	Send email with information and arrange meeting to discuss - out of pathway payments by CHEC and their response & Spamedica post cats to be done through Opera??, out of area post cats.	JS	
No 17 25/01/2	14. AOB	Contact Ms Bhan re CPD for AGM	AA	
No 18 25/01/23	14. AOB	Contact LV providers across L&SC and invite to AGM	MR/MJ	