

Item						
1.	Introductions & Apologies Committee Members in Attendance: Michael Jackson (MJ) (Chair), Jennifer Smith (JS) (Secretary), Edward Ovenden (EO) (Treasurer), Asma Adam (AA), Tim Bagot (TB), Sarah Bentley (SB), Mike Broadhurst (MB), Sean Buckley (SBu), Michelle Cole (MC), Philip Harper (PHa), Neil Pearson (NP), Drew Thompson (DT), David Gleave (DG) - Co-opted DO Observers in Attendance: Ruth Cuthbert (RC) (Optometric Advisor NHS), Tom Mackley (TMa) (LEHN Chair NHS), David Barras (DB) (BVH Optometrist) Apologies: Phil Jones (PJ), Mike Ryan (MR), Mohammed Bhuta (MBh) (LOCSU Lead), Zainab Akhtar, Suhayel Issa MJ opens the meeting and welcomes all. He advises the meeting will be recorded by JS for the purposes of taking the minutes. MJ introduces David Jeffrey & Ryan Gallant from Optegra who give a short presentation about their new facility opening in Bamber Bridge. Further discussion from the group:					
	<ul> <li>MB asks about the advertised referral fee and whether it is against our professional code to accept these. DJ clarifies that this is for practices in areas where there is no commissioned pathway for cataract referrals e.g. Wigan and would not apply for GOS18 referrals to RMCs.</li> <li>SB asks if any transport is provided for patients. DJ advises officially no, but if the patient has no way of getting to Bamber Bridge they will try to help.</li> <li>SBu asks what communication is given to patients about attending post cat appts? DJ advises they are currently working out the best way to do this for each area following the different pathways and rules and will let the committee know as soon as this has been decided.</li> <li>MJ asks if Optegra are visible on Opera now. DJ advises they are live on eERS now and are just waiting for PES to "click the button" on Opera any day now.</li> <li>MJ thanks Optegra for their presentation and time.</li> <li>An interim discussion was held around the formation of the committee, who can be a contractor's</li> </ul>					
	representative and can co-opted members vote.  MJ & JS clarified that a contractor could nominate anyone to represent them on the committee, but this must be the same person and this person must be elected to the committee. Co-opted people e.g. DOs have the same voting rights as elected members, but observers cannot vote.  DG asked how many people can be on the committee. JS advised the recommended max number is 15 and we currently have 15 members. MJ mentioned given the size of the area we represent this seems appropriate, but anything more could become unwieldy.					



2.	Declarations of Interest					
	MJ reminded all committee members to inform JS of any changes. No changes were declared.					
2	Notes and Astions from Durations Mastins					
3.	Notes and Actions from Previous Meeting  The minutes of the mosting hold 17th January 2024 were adented by the group Preposed by EQ. Seconded					
	The minutes of the meeting held 17 <sup>th</sup> January 2024 were adopted by the group. Proposed by EO, Seconded					
	by SBu. Please refer to the action and decision log at end of minutes for more detail.					
	Further discussion from the group:					
	<ol> <li>RC points out on page 3 Optegra details were requested for LOS sponsorship not Galloways – JS to amend.</li> </ol>					
	2. Action Log No 34 – Fleetwood PCN Representative. MJ advises MBh has provided a draft LOCSU Agreement for Office Holders of the committee which everyone should have but has never historically been rolled out. MJ & JS thought this was best set up after the AGM with the new committee in place but MJ has edited this document and repurposed it. MJ asks if everyone has had chance to read through it and if anyone has any comments. JS had made a few small edits and highlighted these on the document. MJ appreciates that for a small role it is a large document but hopes it can be used for any future roles outside the committee that may come up. MB asks re point 4.1 expenses is this a monthly retainer fee? MJ agrees this needs changing to an hourly rate. A discussion was held at it was decided to set the hourly rate at £40 with a maximum of 3hrs per month with anything over this amount needing prior approval from the LOC Officers. Expectations are in the agreement about reporting back to LOC after each meeting (MJ to include this can be written or verbally at the next LOC meeting) and that they are representing the LOC and not their own practice. MJ to make the amendments and arrange to discuss with Tracey. Proposed by DG, Seconded by AA.					
	3. NEHW – PH advises discussions are in progress. MJ requests plan to be presented at July 24 LOC meeting.					
	4. AA asks if assessors needed for the planned WOPEC OSCE's - MJ to confirm with Kev Liu. SBu advises he is a MECS and Glaucoma assessor for WOPEC if needed. TMa asks how you become an assessor. SBu advises watch every station, then be observed assessing every station. Anyone interested in training as an assessor to let MJ know as may be helpful in the future.					
	5. Action No 44. Discussion was held around whether emergency referrals needed to be rung through to the on call first or just sent via Opera, Emergency GOS 18. TB advises if something like a macula on retinal detachment that needs to be seen that day then ring it through, if can be seen today or tomorrow then just email through but hard to write guidance around that. DT asks if Opera can be used for emergency referrals JS advises she puts all her Preston Emergencies through Opera without issue and out of hours would ring up. MJ also does this in Lancaster. SB					
	advises in F&W if they select emergency there are no end points on Opera it is blank. TB clarifies that when selecting emergency, you then need to select emergency clinic not Ophthalmology. SB					



will let local practices know about this. In all cases the patient should be advised when they should expect to hear and to contact the practice if they don't hear anything.

The minutes of the meeting held 27<sup>th</sup> September 2023 were adopted by the group. Proposed by AA, Seconded by MC.

#### 4. Chair's Report

#### Chair's Report - March 2024

Further discussion from the group

- MJ highlights that if a translator is required you should email the area team and they will try and help. The ICB are aware that a funded service is needed for Primary Care so watch this space. TMa asks the LOC to make a strong statement that practices should email the area team to request translators the more requests there are will help to highlight how big the problem is.
- AA enquires about involvement in schools career fairs. DG reports AWL LOC sent a member along to an event with a banner and flyers but he hasn't any information yet on the outcome. EO advises he has a powerpoint presentation from a visit he did in 2023 he would be happy to share. TMa advises the system could help facilitate this if there were volunteers as there is a recruitment and retention team. He is also doing an online talk soon to a group of 14-16yr olds. EO and AA volunteered to do some work on this, preparing a pack that could be used as and when needed.

#### 5. Secretary's Report

Secretary's Report - March 2024

Further discussion from the group:

#### **Constitution Consultation**

Committee agreed to vote to keep the 3<sup>rd</sup> April deadline – JS to advise LOCSU.

Committee also agreed full survey response would be best completed by a small working group virtually then the draft answers sent round the rest of the committee via email for comments before final submission. EO, DG, JS & MJ will form the working group – JS to organise.

JS asked TMa to clarify what was involved for practices returning the EOI on BP/AF case finding. TMa advised the pilot would involve measuring BP with a cuff and also using a device to screen for AF. Block payments have been unsuccessful in other areas so proposal will be for approx £15 per patient which lines up with Pharmacy fees for BP monitoring. He advises practices currently providing this service who have integrated it well into their clinics are finding it is quick and easy. He stressed we have no funding for this yet but are looking for interested early adopters (3-4 sites).

MC has successfully booked renowned speaker Richard Edwards from the OCCS to run 2 back-to-back peer review sessions after the AGM and interest is looking good. 8 people have volunteered to facilitate.



JS advises committee members standing down and eligible for re-election at the AGM are MJ, AA, MB, PH & PJ. So far 4 nominations have been received. The LOC could be in a position where a vote needs to be held for the 5 available places which the LOC hasn't had to do for many years. JS & MJ are currently working with MBh (LOCSU) to understand this process and ensure we run the election accurately and according to the constitution. MB advised the last vote was 1994 where people were voting based on the area they were representing, and nominees were asked to leave the room while the vote took place. He remembers that all performers and contractors are entitled to vote. JS advises that notice of the AGM went out to the mailing list with 42 days to go and that once the deadline for nominations has passed these details along with information on how to vote will go out to all on the mailing list and also to Angie Ashworth to be sent to all local contractors. JS asks all committee members up for election to confirm whether they are elected as performers or contractors.

JS has had interest from several out of area practitioners who wish to attend the peer review sessions. A discussion was held around whether to allow only local practitioners or whether to charge a fee to cover costs. It was agreed to offer places to out of area practitioners 2 weeks prior to the AGM if space allows (max 80 based on facilitators) and to charge a fee of £50 to cover costs. This will give time to inform the venue of final numbers.

JS reminds the committee a 5-minute meeting will be held immediately after the AGM to elect the officers: Chair, Secretary, Treasurer.

Kath Gulson (Chair of LPN) is keen to attend the September LOC meeting to talk about Pharmacy First. JS asks the committee to agree a date today as Kath has limited availability. All in favour of 18<sup>th</sup> September 2024.

#### 6. Treasurer's Report

Treasurer's Report March 24 – Redacted available on request *Further discussion from the group:* 

EO advises the committee has been using PAYE for almost 12 months now. All seems to be running smoothly. He asks the committee for their thoughts and feedback. All happy with how things are running. SBu asks when P60's will be available, EO hopes to include with the next payslips but will confirm with the bookkeeper.

#### 7. Discussion of Reports Previously Circulated

Primary Eyecare Services (PES) & Morecambe Bay Locality Report – March 24

Nothing to report on Tier 1 until winner of the tender is announced.

TB reports UHMB have 3500 low risk glaucoma patients and ~900 medium risk glaucoma patients all overdue appointments. Talks have started around the possibility of community monitoring of the stable patients in primary care and what this would look like. TB advises it's too early to request EOI at this stage but he will keep the committee updated with any progress.



TB advises Sophie Gristenthwaite is now the Head of Optometry & Orthoptics at UHMB. South Cumbria Place Based Partnership Update – TB has been to some meetings nothing significant to report at present.

#### Fylde Coast Locality Report – March 24

A discussion was held around a complaint received from a local practice who had rung the on-call at BVH and been told to send their patient to the Walkin centre with a letter (to be written by the optom) requesting POM medications to be prescribed and for the Walkin centre to ring the on call if they had any queries. The patient then had to wait 3hrs at the Walkin centre before seeing a Dr who then wouldn't prescribe the necessary medication. This ended up in the patient raising a formal complaint with the practice. TB will raise this concern with PES and investigate with the Trust.

#### NHSE Optometric Advisor Report - March 24

MJ asks about the patient safety events, whether it is a contractual requirement or request. It seems to be more work expected for the same meagre GOS fee but agrees it is good for patient care. MBh is taking it to LOCSU for their opinion.

RC clarifies that since writing her report she can confirm that the ICB hub for Independant Prescribers will include Optometrists. TB advises that there is a commitment in the new Tier 1 contract for all IPs providing CUES to be supplied with FP10 pads.

#### 8. AOB

#### Paediatric Mentoring/CPD/Networking

D. Barras and Conrad Beecham (lead orthoptist at BVH) would like to get more community optometrists involved in paediatric eyecare and ideally getting them to shadow HES clinics to upskill or refresh their knowledge. Lots of hurdles to cross within the Trust to make this happen so may be easier for them to come out into the community to run the sessions as less red tape, maybe as a workshop in practice. Would there be any appetite for this and how could cpd points be provided for this? The LOC would be happy to use our account to register the CPD points.

A discussion was held around setting up a local clinical network for paediatrics. TMa is happy to support DB with this in his role as LEHN chair. All agreed sounds very positive and worth exploring further.

MB asks whether the LOC could consider funding this training. EO advises he is earmarking LOC funds for training and development – currently focussing on MECS and Glaucoma – but other needs can be considered.

#### **HESP Payment Issues**

SB raised the ongoing issue of BVH Trust not providing timely payments to practices for HESP vouchers.

DT had a meeting with Christine Bayliss at the Trust the outcome of this was that the finance department



do not understand HESPs so they are put to one side and her solution is for practices to include a cover letter with the HESPs stating what is being claimed for and why. This is not acceptable creating more work for practices. DT advises that unfortunately Christine is leaving her role imminently and so we will need to restart the conversation with her replacement. Further discussion was had, MJ & JS agreed to raise these concerns with LOCSU for support in creating a process with the Trusts.

#### 9. LOC Strategy Planning

MJ asks attendees to consider things the LOC should start, stop & continue doing. A discussion was held with the following suggestions:

- Survey our members/database do they know who we are and what we do, what would they like us to do in the future.
- Increase engagement from the wider community
- Laminated poster for all practices with QR code to display for staff including locums

Any other thoughts/ideas to be emailed to JS or MJ to be reviewed with the above.

Needs analysis to be done virtually after the AGM – date tbc



Apr AGM - 24/04/24 July - 03/07/24 September - 18/09/24	
September – 18/09/24  M 2 3 4	
Mash	
Mrsh	
Signed By:	
Michael Jackson (Chair)	
Date: 03/07/2024	
Butc. 65/67/2021	



#### **Action & Decision Log**

Date	Discussion	Action	Assigned to	Progress Update	Current Status
No 34	10. Fleetwood	Talk to Tracey	MJ & SB	27/09/23 - No update, carry over	In
21/06/23	PCN	Harrison re frequency of PCN meetings and LOC expectations and draft MOU		to next meeting.  17/01/24 - MBh to provide MoU for office holder positions. MJ to use these to draft for Tracey's role  20/03/24 - MJ to make changes to Agreement and arrange meeting with Tracey to discuss – signed copy to be held on file by JS.	Progress
No 40 27/09/23	10. AOB	PH and AA to plan events for NEHW 2024	AA & PH	17/01/24 - Ongoing – will report as plans are made.  20/03/24 - Final plan to be presented at July 24 meeting to be approved and actioned in plenty of time.	In Progress
No 41 27/09/23	10. AOB	Sort out plan for Peer Review event at Apr 24 AGM – update at Jan 24 meeting	MC & AA	17/01/24 - R. Edwards booked. Max capacity 100. MC, EO & AA to investigate sponsorship & report back at next meeting. MC to find out if points for DO's. Committee to email MC if happy to facilitate.	CLOSED
No 42	3. Chair's Report	MR to send PH piece to advertise pathway	MR	20/03/24 - PH to remind MR	In Progress



17/01/24		in newsletter, only to go out once EeRS confirmed so as not to cause confusion.			
No 43 17/01/24	3. Chair's Report	MJ look into collaboration with AWL LOC for FB removal event south of the patch & maybe Pennine LOC also to help share the cost. Also to enquire re FB kits & confirm lead assessors' availability and process for committee becoming assessors.	MJ	20/03/24 - Dates have been pencilled in with Kev Liu & Wopec to do FB, MECS & Glauc in Lancaster – MJ to chase and confirm	In Progress
No 44 17/01/24	3. Chair's Report	DT to speak to BVH and get definitive pathway e.g. list of conditions that must be rung first.  MJ to do the same for UHMB	DT & MJ	20/03/24 - DT advises Christine Baylis at the trust is doing work on this, transformation is coming but there is no definitive list yet. DT is trying to get involved in this process.  MJ has no updates from UHMB on emergency referrals.	In Progress
No 45 17/01/24	3. Chair's Report	MJ & JS to look at LOC strategy/future plan and suggest dates for online meeting to discuss with committee	MJ & JS	20/03/24 - see March 24 minutes	CLOSED



No 46 17/01/24	7. Fylde Coast Locality Report	SB to liase with DB (BVH) and LCC re Fisher Family Foundation Screening and report back at next meeting	SB	20/03/24 - David Barras advises all has gone quiet. Conrad head orthoptist was going to engage with them. Agreed to close action	CLOSED
No 47	4. Chairs Report	Create a pack to be used at schools' careers events	EO, AA, DG		
No 48	5. Secretary's Report	Small working group to draft response to consitution survey, committee to review then JS to submit online prior to deadline	JS		
No 49	7. OA Report	JS to add new safeguarding contact details to website	JS		
No 50	8. AOB	JS & MB to ask LOCSU for support getting Trusts to pay HESP fees timely.	MJ, JS, MBh		