

Attendance	 Michael Jackson (MJ) - Chair Jennifer Smith (JS) - Secretary Edward Ovenden (EO) - Treasurer Tim Bagot (TB) Sarah Bentley (SB) Michelle Cole (MC) Ruth Cuthbert (RC) - ICB Clinical Lead for QiO Tom Mackley (TMa) - LEHN Chair Mohammed Bhuta (MB) - LOCSU Philip Harper (PH) Sajeel Abrar (SA) David Barras (DB) Neil Pearson (NP) Asma Adam (AA) 		
Apologies	Drew Thompson (DT)		
Notes:	Item		
1.	Declarations of Conflict of Interest None declared		
2.	 Minutes of last meeting The minutes of the meeting held 13th November 2024 were approved by the group. Proposed by EO, Seconded by DG. Further discussion from the group: JS reported that DT is currently working with Blackpool Teaching Hospital (BTH) to help them digitise their HESP payments but this is a slow process. The hope is that once online this process can be presented to other local Trusts. LOC Poster – JS updates that we do not have permission to use the Brockholes images so DT is looking to change it or take his own to use. DT was also looking into printing costs but is not present tonight to update. ISight still sending some post cat requests in paper form rather than on Opera. TB requests NHS numbers of these patients (or other PID) is sent to him from an NHS.net account so he can investigate further. Post cat end points – TB reports he & the PES central team are working to try and get separate endpoints for each provider for second eye referrals and complication referrals. Most are on but there remain a few who are yet to return the paperwork.		
3.	Chair's Report – January 2025		



No further discussion.

Secretary's Report

Secretary's Report – January 2025

No further Discussion

Treasurer's Report

Treasurer's Report – January 2025 – redacted (available on request)

- Financial audit coming up soon
- Treasurer's forum Ed to raise changes in NI and any effect on LOC

LOCSU Report

LOCSU Report – January 2025

No further discussion

4. LEHN Report – TMa

Primary care 5 year plan

- Nick Barkworth is writing the plan, Tom and LOCs providing ideas. Trying to make it sensible and deliverable.
- No money being offered to deliver it.
- Some ideas put forward are: translation services, interpreting, occupational health, access to shared records, IT & governance, workforce, eyecare support pathway, easy eyecare, special schools, homeless sight testing, health inequalities, referral optimisation
- TMa will share a draft as soon as he has it.

Cardiovascular Disease - Blood Pressure & Pulse Measuring in Optical Practices

- Software is now sorted with Primary Eyecare Services
- Will be contacting those practices who previously EOI to confirm they still want to proceed and next steps.
- Hoping to go live mid February 2025.

Easy Eyecare

- A good number of practices involved still very poor coverage across Fylde coast though.
- Focus shifting to getting more activity now through those practices who are providing the service.
- Working group has now started getting in touch with PCNs at a place level where coverage is good to promote the service
- TB offered to see if PES can put on some training for front of house staff.

Health Inequalities



- May be an opportunity to work with Cheshire & Mersey & Greater Manchester to do a big analysis of data from GOS focusing on health inequalities. A paper written by Robert Harper suggests GOS isn't as well delivered in the areas it is most needed.
 Trying to do a huge data haul across the northwest and hopefully work with PES to look
 - Trying to do a huge data haul across the northwest and hopefully work with PES to look at GOS and also extended services based on patient postcodes rather than practice location.

5. **Macular Society Update** – Carl Harrison

- National Charity, 17,000 active members, 330 peer support groups across the 4 nations.
- Provide information on macula conditions as well as lighting, equipment and looking after your eyes.
- Free counselling service is unfortunately growing telephone-based service offering up to six sessions (more provided if deemed necessary). Approx 6 week wait from initial referral/contact. Referrals can be made via website, phone or through Carl. Available to family members as well.
- Insight from members is of those told they have dry AMD, no or limited information is provided by their optometrist at the sight test. They leave not knowing what the condition is and weren't signposted anywhere. They leave hurt, frustrated, anxious and worried only to be told it's going to get worse and there's nothing that can be done. Carl is trying to encourage all optometrists to provide every patient with information regarding sight loss charities local and national to put an end to patients having to suffer in silence.
- Request for LOC support encouraging practices to give information leaflets to patients they see with macula disease.

6. Items for discussion

NOC attendance

MJ, EO wish to attend. PH & AA interested. JS not attending this year.

West Lancs Referrals

- Southport & Ormskirk HES aren't accepting referrals for 16- & 17-year-olds and iSIght aren't accepting referrals for under 18's. NP advises will be raised at the Ophthalmology MDT meeting on 17th January to look for a solution.
- There has also been issues with the emergency clinic at Southport rejecting referrals stating they are closed instead of making other arrangements. NP is going to discuss this with Katie Rimmer as Alder Hey and other tertiary providers had been mentioned as a possible option.

PES Tariff Uplift

- Integrated children's service MBay talks being had around fees. TB will report to LOC when confirmed, hoping for uplift from April 2024.
- Tier 1 talks will need to be held soon with the ICB re fees. The LOC should make their position clear on behalf of our contractors.



- CUF (Cost uplift factor) relates to those who are on NHS agenda for change, which
 optometry is not (unlike GPs and Dentists). Some ICBs are willing to pay the CUF fee for
 optometry services others are not as they are not obligated to. PES will be asking L&SC
 ICB and will let us know their response.
- SUS Date (secondary uses service data) when the ICB first puts a patient onto their system they receive ~£140 per patient and this can be claimed for CUES, GRR & GERS patients. If SUS fees were claimed by the ICB for all these episodes then the services would effectively be FOC to the ICB (no guarantee it will continue). PES will be discussing this data with the ICB in the hope that some of this funding can be filtered down to practices as increased fees.
- TM agrees our ICB primary care colleagues do very much see us as one of the four pillars of primary care but reminds the LOC that these services are commissioned through planned care with the biggest determinate being financial which is not in a good place.

7. AOB

Lancashire Optical Society (LOS) - MC

- Due to dwindling numbers, retiring committee members, increased venue fees and a recent GOC audit the LOS is considering closing.
- Considering possibly working with the LOC to put on low cost CPD events and create engagement of the LOC by working together.
- All planned lectures for 2025 will be going ahead in February & March.
- TB reports local Trusts are keen to do educational events and meet primary care practitioners, would be good to link with CPD in different areas.
- DB suggests linking the LOS and CPD with local MCNs (Managed clinical networks) within local consultants & pathways.
- CPD working group to pick this up to discuss and plan future events with LOS. EO to look at future costs.

CPD for AGM

- JS reminds the CPD working group that CPD needs to be arranged for the AGM in April. Peer review/interactive is preferable as draws a bigger crowd. Notice is sent out 42 days prior to the AGM so this needs to be a priority to get it approved in time.
- Committee needs new CPD lead as MC has stepped into larger locality lead role. MC is still happy to provide support and guidance.

8. Needs Analysis

- Due to agenda running over and time constraints, committee agreed to hold a separate meeting to discuss the needs analysis rather than rush through it.
- Focus on committee roles & succession planning
- What are people looking from us as their LOC and how do we find this out.



9.	 Dates of next meetings February - 05/02/25 (virtual needs analysis review – 7pm start) March - 12/3/25 April - 30/04/25 - AGM, CPD & election of officers June - 25/06/24
	Adopted by committee Date: 12/03/2025



Action & Decision Log

No. 47 20.0				
1 /1	.03.2	Create a pack to be used at schools' careers events	EO, AA, DG	CLOSED
		18/09/24 - EO advises in progress they are still trying to		
		source props etc. Hope to close at Sept 24 meeting.		
		13/11/24 - No update, leave on action list.		
		15/01/25 - Resources pack now complete, all ready for		
		future events.		
50 20.0	.03.2	JS to ask LOCSU for support getting Trusts to pay HESP	MJ	In
4		fees timely		Progress
		18/09/24 - MBh looking into it, carry on to next meeting		
		– not present.		
		13/11/24 - JS to email MBh again and also discuss with		
		LTHT correct procedure and escalation details to share		
		round mailing list and post on website. Look at doing the		
		same for BTH, UHMB, ELHT, MREH		
		15/01/25 - MJ is drafting a letter to the Director of		
F1 02.0	07.2	Finance at BTH to address the issue.	NAL IC TO	CLOCED
	.07.2	Tier 2 working group – to include E.Lancs	MJ, JS, TB,	CLOSED
4		12/11/24 Arranging mosting with Stove Flynn should	DT, DG &	
		13/11/24 - Arranging meeting with Steve Flynn, should be able to update at January meeting.	TMa	
		15/01/25 - Meeting has been held, TMa updates that he		
		has since been advised nothing will change in the		
		immediate future. Agreed to close action for now.		
53 03.0	.07.2	All committee members to do IT Security course on ELFH	AA	In
4		site and send certificate to AA.		Progress
				0.233
		13/11/24 - EO to reshare link with all committee		
		15/01/25 - AA to send another reminder to those still yet		
		to complete.		



59	03.07.2	Create Top Tips for Paediatric Examinations document	DB & AA	In
	4	for website		Progress
		13/11/24 - Still waiting for response from Trusts.		
		15/01/25 - Document is ready, DT has offered to help		
		with the design. DB plans to send to head orthoptists at		
		the Trusts before circulation.		
61	18.09.2	Contact list for each cataract surgical provider to be	ТВ	CLOSED
	4	circulated round practices should they need to request		
		patients be added to Opera		
		13/11/24 - List has been circulated round mailing list and		
		is on the website as well. Still missing details for Fulwood		
		Hall & ELHT.		
		15/01/25 - JS advises all on except ELHT. TB sending over		
63	18.09.2	Create a poster to circulate round practices "What is the	DT	In
	4	LOC? Everyone is welcome"		Progress
		13/11/24 - In progress, committee photo being taken after		
		tonight's meeting.		
		15/01/25 - DT not present to update.		
64	13.11.2	Find out if ISight are onboarded to Opera and discuss	ТВ	CLOSED
	4	with them appropriate traceable ways of rejecting referrals using this platform. Also ensure they are using		
		Opera for post cat referrals to practices.		
		The second secon		
		15/01/25 - TB requests px data sent to him to investigate		
		further (using nhs.net account) - NP to send.		
65	13.11.2	Newsletter on low vision support services to go out to	PH	CLOSED
	4	mailing list highlighting:importance of providing information to patients		
		early on especially those not being referred e.g		
		dry AMD		
		referrals can be sent to ECLOs and third sector		
		on Opera for support		
		Who's who and role descriptions e.g ECLO		
66	13.11.2	Link for LOCSU Reflective Exercise Webinar to be	MB/JS	CLOSED
	4	shared for wider circulation		



67	13.11.2	Send OPR numbers to TB for post cat px's who weren't	JS/SB	In
	4	sent to their chosen provider by ISPs/Trusts		Progress
		15/01/25 - MJ advises the ICB have been made aware of		<u> </u>
		this but it still seems to be an issue with some providers.		
68	13.11.2	Concern raised over wording of endpoints for Post cat	ТВ	In
	4	referrals rather than second eye surgery on Opera. TB to		Progress
		look into separate endpoints or possibly renaming to		
		avoid confusion.		
60	12.11.2	15/01/25 - TB reports still a few outstanding. Encourage LV practices to send any unusable LV kit to	D.C.	CLOSED
69	13.11.2	International Aid (that doesn't belong to the ICB)	RC	CLOSED
	4			
70	13.11.2	Review Needs Analysis Survey to include skills, interests	MB/JS/MJ	CLOSED
	4	then send out to committee prior to January meeting.		
71	15.01.2	Work with Carl @ macula society to spread awareness of	JS, EO, DG	
	5	counselling and its other services and encourage		
		practitioners to signpost all patients with macula disease		
		to the third sector at time of diagnosis.		
72	15.01.2	Work with West Lancs secondary care and ICB to resolve	NP	
	5	16-17 referral pathway and rejection of emergency		
		referrals by Southport HES.		
73	15.01.2	LOC to send letter to ICB stating our position on Tier 1 fees and CUF on behalf of contractors	MJ	
	5	lees and COF on behalf of contractors		
74	15.01.2	CPD working group to meet with LOS to discuss and plan	CPD group	
	5	future events with LOS. EO to look at future costs.		
75	15.01.2	CPD working group to appoint new lead to replace MC	CPD group	
	5			
76	15.01.2	CPD working group to plan CPD for AGM – MC, AA, RC,	CPD group	
' `	5	TB, EO, TM, DB	5. 5 8.0up	
	ر	15, 25, 111, 55		