

NORFOLK & WAVENEY LOCAL OPTICAL COMMITTEE

MEETING MINUTES

12 JULY 2017

The regular meeting of the Norfolk & Waveney Local Optical Committee held at Dereham Town Football Club, Aldiss Park, Dereham, Norfolk was called to order by Mrs. Deborah Daplyn, (Chair) at 19:30 on 08 March 2017

PRESENT:

Deborah Daplyn, Niall O'Brien, Ed Adkins, Roger Lee, Ian Sinha, Julien Nelson, Dan Rosser, Linda Vernon-Wood, & Peter Hutchinson (Administrator)

APOLOGIES FOR ABESENCE:

Elizabeth Bunn, Kate Fenn, Tim Burgis,

ABSENT WITHOUT APOLOGY

DECLARATIONS OF INTEREST:

None

APPROVAL OF MINUTES:

The Minutes from the Committee Meeting held on 10 May 2017 were approved and signed.

<p>1) Appointment of Officers - <i>Deborah Daplyn</i> asked those previously in post as Chair, Hon. Secretary and Hon. Treasurer if they wished to stand for re-election and then the meeting if there was anyone wishing to stand for election as an officer. None volunteered to stand and thus re-elected unopposed as Chair was Deborah Daplyn; as Hon. Secretary was Ed Adkins and as Hon. Treasurer was Linda Vernon-Wood.</p>	
<p>Matters Arising from the Minutes of 10 May 2017</p> <p>a) NHS.net e-mail addresses – <i>Dan Rosser</i> reported there has been no further progress as he has hit objection from each direction he has tried. He has suggested to Ann Touray that all direct referrals should go through the Referral Centre but has had no reply other than to say Ann is very supportive of the concept and keen to make it part of the MECS.</p> <p>b) MECS Training – The next MECS Practical Assessment date has been set tentatively for the evening of Wednesday 20 September 2017 but confirmation is awaited from WOPEC. <i>Deborah Daplyn</i> said she will chase WOPEC with another email.</p> <p>c) Post-Cataract Assessment <i>Dan Rosser</i> has assessed four more candidates and has one or two more candidates on the list for future assessment. <i>Deborah Daplyn</i> reports Specsavers, Great Yarmouth</p>	<p>ACTION</p>

<p>wish to join the scheme and has sent them an information pack.</p> <p>d) Glaucoma Assessment <i>Deborah Daplyn</i> to liaise with <i>Dan Rosser</i> to arrange another session.</p>	<p>ACTION</p>
<p>2) Community Services –</p> <p>a) Paediatric Scheme - <i>Dan Rosser</i> reported NNUH has agreed with NHS England to sub-contract some Paediatric Services to community optometrists. Jim Barker, of the NNUH Contracts Team has agreed with NHS England that the service shall be operated as a 'Block Contract' in common with many other services which makes for a simpler administrative process. NNUH will be paid a single sum each year based on estimated activity figures. <i>Deborah Daplyn</i> made the point that NNUH will need to sub-contract to PENW and they in turn sub-contract to the community optometrists. This will ensure all the relevant governance, KPI and NDS data is collected automatically via Optomanager and collected by Julien Nelson. <i>Ed Adkins</i> asked if the service will have to go to tender but <i>Dan Rosser</i> assured him there has been no suggestion of this action being required. A meeting will be arranged to discuss estimated activity and optometrists fees for the service.</p> <p>b) Ocular Hypertension Scheme 5yr. Cycle - <i>Dan Rosser</i> has produced a re-referral form which has been uploaded to the LOC website by <i>Ed Adkins</i>. <i>Roger Lee</i> questioned the start date for re-referrals as he has a letter stating the start of the scheme was set at 1st January 2013 and thus re-referral of patient back to HES is not due until January 2018. <i>Deborah Daplyn</i> pointed out that patients who first entered the scheme in January 2013 could have been seen in HES six months prior i.e. June 2012 which resulted in the date chosen for the five year scheme anniversary.</p>	
<p>3) Financial Report – <i>Linda Vernon-Wood</i> presented the current Financial Report but said there has been little activity since the start of the financial year. The 2016 accounts have been given to <i>Ed Adkins</i> to pass on to Michelle Cade for scrutiny prior to them being presented to the AGM. Michelle is to be asked to appoint another scrutineer. <i>Linda Vernon-Wood</i> reported she has received the first Levy Report from Capita for May 2017 however the report includes Cambridgeshire and Peterborough but not the figures for Waveney. Now she has a contact in Capita she will email back asking for the report to be corrected and then follow this with a request for reports covering the last twelve months.</p>	
<p>4) MECS Update - <i>Deborah Daplyn</i> reported the Business Plan has been written and circulated to North Norfolk, South Norfolk and Norwich CCGs to be signed off and when completed the CCGs will write the contract. Once drafted the contract will be returned to LOC representative for examination followed by agreement. The proposed start date for the scheme is 1st October 2017 although this would seem to be a bit ambitious. <i>Dan Rosser</i> as a NNUH representative was asked to share this information with Tom Butler at James Paget Hospital. <i>Deborah Daplyn</i> reported that LOC has made contact with a CCG Commissioner in West Norfolk but as yet there has been no contact with the QEH HES on the subject of MECS. Emma Coulson, a QEH manager is arranging a meeting with HES consultants, CCG commissioner and LOC. Martin Russ</p>	<p>ACTION</p>

<p>(LOCSU) will attend that meeting on behalf of LOC with Linda Vernon-Wood. <i>Roger Lee</i> questioned the likely numbers of patients that may attend on a weekly basis and how optometrists are expected to incorporate them into the daily routine. <i>Deborah Daplyn</i> said the initial referral routes into the scheme will be from '111' and GP surgeries only and therefore 'walk-ins' at the practice and referrals from pharmacies will not be eligible for inclusion to begin with in order that the numbers using MECS can be closely monitored. Appointment urgency was discussed and it was concluded that a triage system, operated by reception staff, is the best way of ensuring appropriate appointments are offered. <i>Deborah Daplyn</i> said she has obtained a copy of a triage form incorporating a flow chart of questions as used in another LOC MECS which she will amend to make it appropriate to Norfolk and send to members. <i>Ian Sinha</i> questioned how medication will be prescribed for patients eligible for free NHS prescriptions to which <i>Deborah Daplyn</i> replied that there has been no decisions as yet but a likely method would be to have a limited formulary from which the optometrist will select the appropriate medication and write a 'Written Order', on a template provided for MECS contractors, to be sent to the GP who will issue the prescription. It is assumed this will be in paper form, possibly carried to the GP by the patient, but this has yet to be confirmed. This system will avoid writing a formal referral letter. <i>Deborah Daplyn</i> went on to say that before the scheme is rolled out she will attend meetings in each CCG area, where all GP practices will be represented, to give a presentation about MECS so that all are aware of the processes involved.</p>	<p>ACTION</p>
<p>5) Martin Russ (LOCSU) – <i>Deborah Daplyn</i> requested Martin Russ be allowed access to the N&WLOC website in order that he can directly download information required for negotiations and meetings related to Community Schemes. It was agreed unanimously and <i>Ed Adkins</i> advised Martin should be asked to register as a user on the website and he will authorize his inclusion. <i>Deborah Daplyn</i> to contact Martin to inform him of the decision.</p>	<p>ACTION</p>
<p>6) Norfolk LOA request for funds - <i>Deborah Daplyn</i> said she has received an email from Michelle Cade requesting financial assistance for LOA. Sponsorship previously received from companies and organisations in optics which helped to fund meetings is no longer available which has left the LOA short of funds for future meetings. She has requested that N&WLOC cover the fees for the meeting room; five meetings per year; with a donation of £500. During a discussion it was revealed that LOA has taken action to conserve funds; subscriptions for 2107/18 will be increased; 'Corporate Discount' subscriptions stopped; close monitoring of meeting attendances to ensure everyone has paid a subscription; the change of meeting venue to Brooks Hotel from The Curve has significantly reduced the cost of each meeting. Norfolk is the only remaining area where a separate LOA exists as a branch of AOP, LOCs elsewhere having assumed the training role. It was decided after a protracted discussion not to amalgamate Norfolk LOA with N&WLOC and having confirmed that LOC funds are sufficient, it was agreed to support LOA with £500 on the proviso that each meeting attracts a CET point (Optometrist & Dispenser) and the position of LOA is reviewed in twelve months. <i>Roger Lee</i> pointed out that previously arranged Training Days have always raised significant funds and it was agreed that LOA is advised to consider providing a similar event in the near future which N&WLOC will be willing to support. <i>Deborah Daplyn</i> agreed to reply to Michelle Cade to inform her</p>	<p>ACTION</p>

of the committee decision.	
<p>7) Financial Report – <i>Linda Vernon-Wood</i> stated that the current account balance is in excess of £48,000 although she has yet to pay WOPEC and Coleman Opticians fees due for the recent Glaucoma Assessment day and other expenses related to travel etc. for NOC delegates. She estimates the net balance to be around £24,000 after these payments have gone out. She is receiving regular payments of GOS fees from Capita although these are not always accurate and the contact she has been dealing with has disappeared. <i>Linda Vernon-Wood</i> said she was approached by someone at the N&WLOC AGM who was having difficulty receiving funds from Capita and wanted to know who to contact. She was advised to tell him to get in touch with LOCSU. <i>Deborah Daplyn</i> said she has been approached by LOCSU to attend a meeting in London to discuss the amalgamation of PENW with Suffolk, Cambridgeshire and Bedfordshire to form a large PEC as is happening in other areas. A representative from LOC and PENW have been asked to attend the meeting <i>Deborah Daplyn</i> has agreed to represent N&WLOC and <i>Niall O'Brien</i> will attend on behalf of PENW. After discussion it was agreed LOC will fund the fees for <i>Deborah Daplyn</i> and PENW will cover the cost for <i>Niall O'Brien</i>.</p>	ACTION
<p>8) Web Manager Report –</p> <p>a) <i>Ed Adkins</i> stated 149 members are now signed up on the website and 218 contacts on Mail Chimp. It was noted by some committee members they each receive two copies of emails, <i>Ed Adkins</i> agreed to look into the reason for this. <i>Peter Hutchinson</i> said a member of another club which he attends is a web designer who has agreed to redesign their website for a significantly lower sum than that quoted by Steele Media to update N&WLOC website. He agreed to contact Stewart Moore and ask for a price to re-design LOC website, making it compatible with mobile devices and easier to manage.</p> <p>Website Metrics - <i>Peter Hutchinson</i> reported he had received the metrics reports for the website but had not amalgamated the Mya and June reports for this meeting. The overall picture is largely unchanged.</p>	ACTION ACTION
<p>9) PENW – <i>Ian Sinha</i> reported</p> <p>a) <i>Julien Nelson</i> has received four new requests from practitioners to be included in the Cataract Scheme following successful assessments.</p> <p>b) NHS England letter re; QIO Framework - was discussed. A window for submission of the new QIO data for all practices participating in Community Schemes closes on 30th September 2017. PENW will have to remind all practices to upload the amended QIO forms to Optomanager. <i>Ed Adkins</i> commented that on completion of the QIO form there is a button at the bottom of the page to send the complete for to the PENW Manager direct. <i>Julien Nelson</i> asked which email address was being used but <i>Ed Adkins</i> was unable to answer. It was suggested that <i>Ed Adkins</i> practice should test the system by executing that action to submit the form direct to see if <i>Julien Nelson</i> receives it correctly, suggesting that QIO has obtained the correct email address from the system.</p> <p>c) MECS - the proposed start date of 1st October ties in with the QIO deadline of 30th September which could encourage practices wishing to become involved to complete the QIO on time.</p> <p>d) Referral Refinement Glaucoma Field screening repeats - at the last</p>	ACTION ACTION

<p>meeting it was reported there were a few practices submitting claims for a greater number of repeat field tests that was the average. After discussions on how to deal with outliers it was decided not to approach practices directly at this time but to write a document re-iterating the protocols on how to manage this topic and send it to all participating practices. <i>Ian Sinha</i> to action via Optomanager.</p> <p>e) Norwich CCG asked for Glaucoma Referral Refinement KPIs which have been issued for consideration before the contract is re-issued. The CCG wishes to regularize what was originally a pilot scheme contract and make it conform to contracts for an ongoing scheme. The contract is currently 'Long Form' and PENW will request this is changed to 'Short Form' with the new contract to simplify administration.</p>	<p>ACTION</p>
<p>10) Correspondence – None</p>	
<p>11) Any Other Business –</p> <p>a) <i>Julien Nelson</i> reported he has had difficulty registering on-line for NOC but is keen to attend. <i>Linda Vernon-Wood</i> agreed to register <i>Julien Nelson</i> when she registers her own attendance. <i>Kate Fenn</i> is also attending NOC.</p> <p>b) Aldiss Park was questioned as being an appropriate venue for LOC meetings due to the difficulty some members have in getting on line. Most stated they have not encountered a problem and it was agreed there will be no change.</p> <p>c) <i>Peter Hutchinson</i> to book Aldiss Park for meetings in 2018 on the same basis as previously noting the change for the November meeting to the third Wednesday in the month.</p> <p>d) DBS checks do not form a part of the current Enhanced Service contract. In view of the impending new services for Paediatrics and MECS DBS is certain to be a requirement. It was concluded that LOC should inform all participating optometrists they should make their own arrangements to gain DBS registration without delay. It was noted DBS is easily obtained through a number of on-line agencies and has to be repeated every five years.</p> <p>e) <i>Ian Sinha</i> asked <i>Dan Rosser</i> what is the HES view of the usefulness of OCT in practice. He said the major benefit is the diagnosis of wet AMD c.f. Dry AMD. On the question of optic nerve head assessment and glaucoma prediction he said it give a false positive of about 50% and is therefore less useful. NNUH uses stereo photography for nerve head assessment rather than OCT. OCT is better for monitoring change over time in glaucoma assessment. With Wet AMD referrals it is better to refer with acuities better than 6/12 – the treatment threshold – because HES can monitor monthly whereas this is not possible on GOS.</p>	<p>ACTION</p> <p>ACTION</p>
<p>12) Date of Next Committee meeting 13th September 2017. Meeting closed 20:55 hrs.</p>	