

NORFOLK & WAVENEY LOCAL OPTICAL COMMITTEE

MEETING MINUTES 09 JANUARY 2019

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 Deborah Daplyn (Chair) at 19:30 on 9th January 2019

PRESENT: Ed Adkins, Tim Burgis, Deborah Daplyn, Kate Fenn, Roger Lee, Julien Nelson, Niall O'Brien, Dan Rosser, Linda Vernon-Wood, Peter Hutchinson (Administrator)

APOLOGIES FOR ABESENCE: Charlotte Barber, Elizabeth Bunn, Ian Sinha,

ABSENT WITHOUT APOLOGY: None

DECLARATIONS OF INTEREST: None

APPROVAL OF MINUTES: The Minutes of the Committee Meeting on 20 November 2018 were approved and signed.

Contents	Action
<p>1. Action Points from the Minutes of 20 November 2018</p> <p>a. Nice Guidelines on Glaucoma – <i>Deborah Daplyn</i> said the new contract for GRR is due to start on 1st February 2109.</p>	
<p>b. NHS.net addresses –</p> <p>c. <i>Deborah Daplyn</i> reported that applications for NHS.net addresses have slowed to a trickle. For the present PENW can sponsor new applications and have successfully gained addresses for all who have applied. This route may not continue when PENW duties are taken over by PES.</p>	
<p>d. West Norfolk Referral Centre - <i>Linda Vernon-Wood</i> said she has not been able to make contact with West Norfolk CCG.</p>	
<p>e. Training Day - <i>Dan Rosser</i> reported he has not had much success in recruiting speakers from the local consultants for the Training Day, only one had agreed to attend. Holding the event on a Sunday seemed to be a problem and so it was suggested a shortened version of the training on a weekday evening should be considered. After some discussion it was agreed that in the absence of an effective LOA, NWLOC has a responsibility to provide education opportunities and this will be best addressed with a full day training programme. The programme topics are to be centered on the needs of the Community Service Contractors, i.e. glaucoma and MECS. The effort to find speakers should be extended to other hospitals in the area with a suggestion that two consultants at James Paget Hospital could be approached to speak on glaucoma related topics. <i>Dan Rosser</i> said the consultant who had agreed to speak will address corneal related issues which will be relevant to MECS. Ed Adkins commented that he had not contacted the consultant at Bury St Edmunds Hospital as he was asked to do at the last meeting. <i>Dan Rosser</i> agreed to contact the suggested consultants.</p>	<p><i>Dan Rosser</i></p> <p><i>Ed Adkins</i></p> <p><i>Dan Rosser</i></p>
<p>f. GOS Contract change – <i>Julien Nelson</i> heard from Rupal Lovel-Patel by email stating all conditions where a Contract Change is required. <i>Julien Nelson</i> said he sent an email from his NHS.net account to <i>Peter Hutchinson</i> which was not received. It was concluded that this may be due</p>	

<p>to it being sent to an email account that was not NHS.net and as a consequence <i>Peter Hutchinson</i> needs to apply for this type of email address. <i>Roger Lee</i> announced he has been appointed as Optical Adviser for Norfolk (see para.2) it was concluded that his new role will encompass practice visits and therefore also practice address changes thus he needs review and edit the email about the conditions where a Contract Change is required and include his contact details. When completed then forward it to <i>Peter Hutchinson</i> for upload to the website. <i>Julien Nelson</i> said <i>Roger Lee</i> also will need an NHS.net address he will send copies of the application form and instructions for obtaining NHS.net accounts to both. <i>Roger Lee</i> was asked to provide a brief resume of his new role, including his contact details to be uploaded to the website.</p>	<p><i>Roger Lee</i> <i>Julien Nelson</i> <i>Roger Lee</i></p>
<p>g. Ophthalmology Sub-Group – <i>Deborah Daplyn</i> has been notified that meetings will now be quarterly instead of monthly with the next meeting scheduled for May. At the last meeting a discussion on the action to be taken in relation to notice from NHS England about capacity and planning included suggestion for a greater involvement for optical practices. <i>Deborah Daplyn</i> commented that there is a chronic shortage of optometrist in Norfolk which will make it difficult for them to take up the suggested roles. The meeting expressed surprise at this news and asked what could be done to address the shortage to which <i>Deborah Daplyn</i> suggested the introduction of an Optometry degree course at UEA could make a difference; this was duly noted. It was noted that Ann Touray has moved from her job with North Norfolk CCG and Adan Schindler has also departed from the Committee so a new contact point for optometry is needed. Deborah Daplyn spoke to the West Norfolk representative in an attempt to arrange a meeting to discuss Community Services but was rebuffed with a negative response. <i>Deborah Daplyn</i> expressed an opinion that the future of this group is uncertain which is unfortunate as it is the only direct contact optometry has with the CCGs and Hospital Trusts.</p> <p>h. Paediatric Service <i>Dan Rosser</i> said he will try to re-activate discussions in an attempt to get the service up and running. Deborah Daplyn said there is possibly a revised Paediatric Service module available from LOCSU that should be included in discussions.</p>	<p><i>Deborah Daplyn</i></p>
<p>2. Optical Adviser Norfolk <i>Roger Lee</i> announced he has been appointed as Optical Adviser (OA) for Norfolk and as such will be taking on some of the roles previously addresses by Rupal Lovel-Patel. He said Rupal Lovel-Patel will continue to ask as OA for Cambridgeshire although she is no longer resident there and Gaynor Kirk, Specsavers, Newmarket, has been appointed OA for Suffolk. <i>Roger Lee</i> will pass her contact details to <i>Peter Hutchinson</i> for upload to the web site.</p>	<p><i>Roger Lee</i></p>
<p>a. Primary Eyecare Norfolk</p> <p>b. Contracts for Glaucoma Service 1c – this requires all patients to be seen for repeat readings after being identified as at risk in an initial glaucoma screening and will involve patients travelling to an accredited practice if the original optometrist is not part of the GRR Service. Contracts are now complete and are due to start in the Central CCG area on 1st February.</p> <p>c. James Paget Hospital <i>Deborah Daplyn</i> said has agreed to participate in the Glaucoma GRR and Post Cataract Examination Community Contracts and final preparation for the contracts are under way.</p> <p>d. James Paget Hospital announced that the backlog for routine glaucoma follow-up examination is now unacceptable and so as a short term measure patients are to be asked to visit a community practice for a routine glaucoma screening examination. Community practices will be asked to refer back to the hospital those patients considered to be at most risk of developing glaucoma. To date only five optometry practices have applied to</p>	

<p>be included.</p> <p>e. Dilation for Disc Assessment one of the Great Yarmouth contractors contested the need to dilate pupils for glaucoma disc assessment claiming this was not part of the Glaucoma OHT Service Specifications. He was assured that dilation is mandatory; on inspection it was discovered that he was correct and it has not been included in the Glaucoma OHT Service Specification. It was agreed this oversight will have to be addressed when the Service Specification is re-written.</p>									
<p>3. Primary Eyecare Services will take over the new contracts as outlined above; PENW will cease to be responsible for these and all future contracts. Deborah Daplyn reported she had been in contact with PES to find out how the takeover of PENW was progressing to which she was told that “Due diligence took longer than expected” and has delayed progress. Completion is anticipated in the next two weeks.</p>									
<p>4. Financial Report – <i>Linda Vernon-Wood</i> referred to the copy of the accounts sent to the committee (previously circulated and attached to minutes).</p> <p>a. The largest discrepancy between the accounts and the budget is in the Committee Member expenses account which is showing a little over half the expenditure that was budgeted. Several members have not submitted regular claims for meeting expenses and in some cases no invoices have been received for this entire year. It was agreed that a previous committee decision to: ‘limit the submission of expense claims to maximum a three month period after any meeting’ is to be rigorously implemented going forward. All claims must reach <i>Linda Vernon-Wood</i> by the end of the financial year i.e. 31st March.</p> <p>b. Proof of expenses <i>Deborah Daplyn</i> said at an NOC workshop the question was raised about proving attendance at meetings where expenses have been claimed. Following a discussion it was concluded that attendance at LOC meetings is proved by the Minutes. Deborah Daplyn said a similar system was in force for other meeting she attended and so the Minutes will show her attendances. It was agreed that no further documentary evidence is needed to support expenses claims.</p> <p>c. 13 March Budget meeting- It was agreed that the 7.00 p.m. PENW meeting will be followed by the Budget meeting at 7:15 p.m. and at 7:45 p.m. by the Committee Meeting.</p>									
<p>5. LOC Practice list - <i>Deborah Daplyn</i> asked if the list of Norfolk & Waveney optical practices holding GOS contracts has been updated. <i>Julien Nelson</i> said he had made amendments to the list prepared by <i>Peter Hutchinson</i> and in his view it was now up to date and he will endeavor to maintain this as changes occur. A copy of the practice list spreadsheet has been sent to Deborah Daplyn and <i>Peter Hutchinson</i> for reference only and will not be published on the website.</p>	<p><i>Julien Nelson</i></p>								
<p>6. Web Manager Report <i>Peter Hutchinson</i> reported:</p> <p>a. No new users requested registration - total number 160 (plus 3 admin addresses)</p> <p>b. Site visits were up compared with previous reports</p> <p style="padding-left: 20px;">i. 372 visits from >10 countries (71.51% UK)</p> <p>c. Page views:</p> <table style="width: 100%; border: none;"> <tr> <td style="padding-left: 20px;">i. Log in -</td> <td style="text-align: right;">206</td> </tr> <tr> <td style="padding-left: 20px;">ii. Patient Information/Minor Eye Condition Service -</td> <td style="text-align: right;">172</td> </tr> <tr> <td style="padding-left: 20px;">iii. A website for a Optical Professionals in Norfolk & Waveney</td> <td style="text-align: right;">133</td> </tr> <tr> <td style="padding-left: 20px;">iv. GPs-Pharmacists Minor Eye/Conditions Practice List -</td> <td></td> </tr> </table>	i. Log in -	206	ii. Patient Information/Minor Eye Condition Service -	172	iii. A website for a Optical Professionals in Norfolk & Waveney	133	iv. GPs-Pharmacists Minor Eye/Conditions Practice List -		
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<p style="text-align: center;">109</p> <ul style="list-style-type: none"> v. Find an Optician - 63 vi. Health Professionals - 48 vii. Primary Eyecare Norfolk & Waveney - 39 viii. Patient Information - 31 ix. Officers of the Norfolk & Waveney Local Optical Committee - 27 <p>d. An email was received from Batchgeo, provider of the map used in Find an optician page, saying the total number of hits exceeded the free limit and the map would become un-usable unless a fee of US\$12/month was paid. Chris McGaghy said he has come across this before and advises to ignore the message as it is unlikely to have an effect on the map usage.</p> <p>e. LOCSU has introduced a new platform for LOC websites but will continue to support the LOCs that are using the Umbraco platform. There is no easy way of transferring data from Umbraco to the new platform.</p> <p>f. Deborah Daplyn reported receiving large numbers of disturbing emails on chairman@norfolkwaveneylloc.co.uk . <i>Peter Hutchinson</i> said he will look into the problem and try to find an answer to blocking the offending emails.</p>	<i>Peter Hutchinson</i>
<p>7. PENW Report:</p> <ul style="list-style-type: none"> a. <i>Deborah Daplyn</i> said she has contacted Martin Russ to ask what preparations need to be put in place in readiness for the end of the MECS pilot scheme in October 2019 and the establishment of a permanent contract. b. <i>Niall O'Brien</i> <ul style="list-style-type: none"> i. Reported that Julien Nelson has applied for Clinical Performance Governance Lead post with PES. ii. In Quality in Optometry DSPT has been introduced which is a section of questions that have to be completed in order to apply for an NHS.net email account. A second section replaces the 'Information Governance Toolkit' c. KPIs for post Cataract and glaucoma for quarter 3 are due in ten days. d. MECS KPIs show the service is fairly consistent. It has been noted that the number of referrals to MECS from GPs and GP staff are approximately equal. This has raised the question as to the titles of GP staff involved and it is suggested that the number of listed roles in the GP practice staff should be increase to better identify the person referring. e. New Glaucoma Service contracts are due to be introduced on 1st February. 	
<p>8. AOB</p> <ul style="list-style-type: none"> a. <i>Julien Nelson</i> reported a couple of diabetic patients with cataracts, which have been assessed in practice as not meeting referral guidelines for surgery, have been seen by the Diabetic Screening Service and referred for surgery. The patients have subsequently questioned why they were not referred by the practice. He asked how he should answer. The advice was that he should tell the patient they had been very lucky to be seen for surgery so early which had resulted from the Screening Service not being able to obtain a clear image of the fundus. b. <i>Julien Nelson</i> explained a former patient with cataract has been seen at another practice by a practitioner who works with ACES and was referred for surgery to ACES without being offered any choice, despite living very close to Cromer Hospital. It was agreed that all patient should be referred via the Referral Management Centre. It was advised that future incidents should be recorded so that LOC can write to the practitioner concerned. c. "Finest Eyecare provider in Norfolk" – <i>Roger Lee</i> confirmed he has contacted the practitioner concerned who apologized and has now taken down the offending claim. d. <i>Ed Adkins</i> referred to an email where a practitioner had referred a patient 	

<p>from the Glaucoma Monitoring scheme to NNUH where the patient had been cleared and sent back to the optometrist for continued monitoring. He has not been able to access the patient file on Optomanager – how should he proceed. The answer is to enter the patient as a new patient.</p> <p>e. <i>Kate Fenn</i> announced that Coleman’s Yarmouth practice has closed due to manning difficulties. She offered to assist with the Glaucoma examination backlog patients from James Paget Hospital as the equipment will remain in the premises until the end of May.</p> <p>f. <i>Dan Rosser</i> asked if it is a requirement for supra-threshold fields to be repeated before entering a patient into the GRR scheme for Full Threshold field examination. He was advised that it is good practice to repeat supra-threshold screening (or similar test) before referring to GRR scheme.</p> <p>g. <i>Dan Rosser</i> asked if Webstar software has been updated to reflect the new NICE guidelines on IOP. <i>Deborah Daplyn</i> said Webstar is currently still using the 21mm/Hg figure but will be updated to 24 mm/Hg as the Glaucoma contracts come into force in February. It is understood that most practitioners have been using the 24 mm/Hg figure.</p>	
<p>9. Committee Meeting Dates 2019: 9 January; 13 March; 8 May; AGM date to be confirmed; 10 July; 11 September; 20 November</p>	
<p>10. Date of Next Committee Meeting 13 March 2019. Meeting closed 21: 12 hrs.</p>	