

NORFOLK & WAVENEY LOCAL OPTICAL COMMITTEE

MEETING MINUTES 11 NOVEMBER 2020

A meeting of the Norfolk & Waveney Local Optical Committee held on-line via Zoom was called to order by Deborah Daplyn (Chair) at 19:30 on 11th November 2020

PRESENT: Ed Adkins, Charlotte Barber, Elizabeth Bunn, Deborah Daplyn, Kate Fenn, Michelle Horn, Roger Lee, Julien Nelson, Niall O'Brien, Dan Rosser, Ian Sinha, Linda Vernon-Wood, Peter Hutchinson (Administrator)

APOLOGIES FOR ABESENCE: None

OBSERVERS: Wasim Sarwar PES

COMMITTEE MEETING MINUTES

DECLARATIONS OF INTEREST: None new declared

Contents	Action
<p>1. PES Report: <i>Wasim Sarwar</i> (Interim CGPL for NWLOC)</p> <p>The COVID Urgent Eyecare Service (CUES) commenced in Norfolk & Waveney on 15th June 2020 and is provided by Primary Eyecare Services Ltd.</p> <p>Primary Eyecare Services Ltd is the lead for the network of around 45 optical practices across the area and has been set up by the Norfolk & Waveney.</p> <p>The service has been running across the area with the support of the Opera data collection, reporting and administration IT platform developed and maintained by FDS.</p> <p>The report outlines some metrics measured; Telemedicine: 28% of patients were discharged and only 1% needed referral on to secondary care; Face to face: 73% were discharged and 18% referred to secondary care; OCT: 34% of patients were discharged from the service after OCT, 41% were referred urgently to the hospital.</p> <p>It is clear most patients were managed within primary care in line with the aim of the service. The clear distinction between CUES and MECS is that CUES is an urgent eye-care service, with fewer milder cases being seen, the % of referrals to secondary care will naturally be higher as the % of sight threatening conditions will be greater.</p> <p>Learnings and referral guidelines are shared with all practitioners on a regular basis, as with time and experience, it is expected that the % of urgent referrals to secondary care will reduce.</p> <p>Close monitoring of the service will continue.</p> <p>Note: the full report can be found Here</p> <p>a. Following the September meeting Wasim Sarwar contacted the multiples that are not currently seeing fewer patients in CUES but despite offering more training and assistance he was not successful in getting their commitment to increase capacity immediately. He was given an assurance that capacity will increase over time. He agreed to review the CUES practice list to rectify duplications.</p> <p>b. The CUES tele-medicine hub has been running for ten days in four areas</p>	

<p>including Norfolk & Waveney, Hampshire, Milton Keynes and ANO. The scheme is run by “The Hub” within PES who has a team of mainly IP qualified Optometrists who will perform tele-medicine where appropriate. Referrals are accepted only from GPs, Pharmacists, Hospitals and 111 during working hours (9am-5pm Mon-Sat). If after tele-medicine a patient needs to be seen face-to-face the Hub will call the optometry practice to arrange an appointment. It is under consideration that referrals following telemedicine will be sent to practices by email but this and other options have yet to be confirmed.</p> <p>c. A webinar is scheduled for 25 November at 7:00pm to explain the difference between OPERA and Optomanager and go through the transition between the two. Practices have already been contacted to inform them about the data that will be automatically transferred to OPERA from Optomanager.</p> <p>d. Julien Nelson asked about contacting the Hub when an Optometrist is not available and he was informed that <i>Wasim Sarwar</i> will confirm the email address to be used for that purpose before notifying all practices.</p> <p>e. Ed Adkins asked about the notification on OPERA that requires all episodes to be completed with 24hrs. <i>Wasim Sarwar</i> replied this is necessary for accurate invoicing and a timely response and clinical safety for the patient.</p> <p>f. <i>Deborah Daplyn</i> asked if there is a way to reconcile payments for CUES activity to which <i>Wasim Sarwar</i> replied, there is a dashboard in OPERA where a document showing the reconciliation can be downloaded. He offered to contact the PES Clinical Lead for more information if anyone is unable to find the reconciliation information.</p> <p>g. <i>Deborah Daplyn</i> reported the Yarmouth & Waveney Post-cataract service has been postponed until January 2021 because no practices are willing to sign up. The fees are a stumbling block and this was addressed by <i>Deborah Daplyn</i> and <i>Wasim Sarwar</i> with Norfolk & Waveney CCG at a meeting when they presented evidence that practices are unwilling to join due to low fees compared with other arears (W. Midlands £43 c.f. £26 in N&W). There has been no comment to date from the CCG. It was agreed that pressure will be maintained on this issue.</p> <p>h. <i>Roger Lee</i> asked if OPERA can include a list of “Useful Contacts” for the various departments at PES. <i>Wasim Sarwar</i> said any immediate technical issues or invoicing queries can be addressed using the “Speech Bubble” at the bottom of the page on OPERA.</p>	<p><i>Wasim Sarwar</i></p> <p><i>Wasim Sarwar</i></p>
<p>2. The minutes of the Meeting 09 September were approved.</p>	<p>.</p>
<p>3. Action Points from the Minutes: Meeting 09 September 2020</p> <p>a. Personal protective equipment (PPE). It was agreed that the store of PPE will continue to be held.</p> <p>b. Eyecare Service during and beyond Covid-19 <i>Roger Lee</i> said he had spoken to colleagues in Lincolnshire about the current difficulties with eye-care and they appear not to suffer the same capacity issues as Norfolk & Waveney. He said Lincolnshire optometrists had no difficulty finding locums when needed although he did not ask about recruiting difficulties generally. The LOC is keen on supporting Community Schemes and currently run MECS/CUES, Post Cataract.</p>	
<p>4. CUES hub - the referral hub for GPs to call for an appointment for a CUES patient referral has been running for several days but so far no-one reports having received a patient from this source. Members report still receiving calls from GP practices despite the message having been sent to them about the hub with the number to call. It was noted that <i>Wasim Sarwar</i> should be able to provide evidence of how the hub is working with respect to tele-medicine vs. referral to practice in time for the next meeting.</p>	<p><i>Wasim Sarwar</i></p>
<p>5. Merger of LOA with NWLOC – <i>Elizabeth Bunn</i> reported she has spoken to AOP and LOCSU for advice on the procedure for winding up LOA from which it was</p>	

concluded that a letter/email has to be sent to all registered LOA members informing them of the proposed merger which is to be confirmed at an Extraordinary General Meeting. To date the LOA constitution has not been located and *Peter Hutchinson* was asked how the procedure would be managed according to the LOC Constitution. He stated notice of the EGM has to be issued in writing/email at least three weeks in advance; 75% of those present at the EGM must vote in favour of the merger for the vote to be carried. It was agreed to try to arrange the EGM for mid-December pending the organisation of documentation, including scrutinised accounts for the final financial statement.

6. Financial Report *Linda Vernon-Wood* The report shows some changes to the annual budget figures to reflect the current reduced activity due covid restrictions. There has been a reduction in income which has resulted in a deficit over the latest period but despite this the general picture is good. It is estimated with the cash reserves it will be possible to continue solvency for another year. *Linda Vernon-Wood* said she has managed to reconcile some odd unexplained credits that had been payed into the account over previous months; these are levy payments for e-GOS claims submitted from April. However, PCSE did not allow treasurers to log-in to this part of the account until September to see the detail of these transactions. All e-GOS claims are processed separately from GOS paper claims and are paid more quickly into the LOC account. At a recent LOCSU hosted Treasure's meeting LOC member attendance fees etc. were discussed; it is apparent rates vary across the country e.g. day rates range £300 - £700 per day c.f. NWLOC £420 per day. *Niall O'Brien* asked if the £2000 transferred to LOA in 2019 is held in their bank account and will return to NWLOC when the LOA merges with NWLOC. *Elizabeth Bunn* confirmed that sum remains in the bank. It was commented that virtual committee meetings are saving significant sums in room hire and travel charges and will continue to do so going forward. *Roger Lee* pointed out that LOA meetings are valued for networking opportunities as much as the CET and therefore should be conducted face to face whenever possible.

Norfolk & Waveney LOC Financial report to 9/9/2020			
		Year to date	Budget Y/E 31/3/2021
Income			
Levy Collections	LOC+LOCSU +Cent'l Fund	£19,395.74	£30,000.00
Other		£5,330.50	£5,330.00
Total Income		£24,726.24	£35,330.00
Expenditure			
Committee Costs			
Honoraria		£2,316.00	£4,484.00
Admin fees		£2,994.15	£4,620.00
Admin travel		£0.00	£0.00
Members fees		£7,962.28	£10,000.00
Members travel		£72.00	£200.00
Meeting Rooms		£143.88	£300.00
Website		£0.00	£600.00
Office costs		£259.72	£500.00
Training & NOC		£0.00	£1,000.00
LOA		£0.00	£0.00
AGM & Misc		£5,338.16	£6,000.00
Central Fund		£1,263.16	£2,000.00
Payment to LOCSU		£7,033.01	£14,000.00
Total Expenditure		£27,382.36	£43,704.00
Income - Expenditure		-£2,656.12	-£8,374.00

7. Web Manager Report *Peter Hutchinson* said: Total Website Registered Members: 202 Total Users: 250 of which New users = 71.5% Returning Users = 28.5% Pages visited: 798 with the most popular 8 being:

Pages	Page Views
Total	798
/patient-information/minor-eye-conditions-service/	183
/log-in	121
/health-professionals/optometrists-dispensing-opticians/forms-documents-downloads	98
/health-professionals/	77
/health-professionals/optometrists-dispensing-opticians/	73
/patient-information/	51
/covid-19-advice/	47
/health-professionals/gps-pharmacists/minor-eye-conditions-practice-list/	45

a) New LOC-Online platform for LOC websites

In preparation for transferring data to the new platform *Peter Hutchinson, Deborah Daplyn* and *Niall O'Brien* met on Zoom to review the current content. The decision was taken to remove outdated and irrelevant information resulting in the removal of some pages and rationalisation of the remaining data:-

- All the Patient information pages have been removed;
- outdated Covid information removed;
- GP & Pharmacist MECS information replaced with CUES links and advice;
- Fax switch off removed;
- Community Care Services page removed;
- Clinical Alerts outdated data removed;
- NHS Press releases page removed – to be included on News page;
- News Items outdated information removed;
- Committee meeting agendas & minutes reduced to one year;
- AGM minutes reduced to one year.
- In response to the request for all committee members to review the website content one member contacted me with a request to include a page providing guidance on mental health and wellbeing in practice which has been added.

A decision is required on the GPs & Pharmacist page about the relevance of the Glaucoma and Cataract information documents.

A discussion followed when it was concluded the 'PES Advice to Practices Delivering Community Care' document needs to be removed. All committee members are asked to review the remaining website content and send *Peter Hutchinson* their comments/ suggestions on unwanted topics.

It was agreed that ALL Committee Members need to update their website photos and profiles before 30th November 2020, sending new content to *Peter Hutchinson*.

*ALL
Committee
Members*

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8. Meeting Dates 2021: It was agreed Zoom meetings will continue to be held on the second Wednesday of alternate months: 13 January: 10 March: 12 May: AGM 23 June; 14 July: 8 September; 10 November

9. Practice Address update: M Shepherd Optometrist, Long Stratton. – Practice ownership changed to Sarah-Jane Smith.

10. Correspondence: None

11. A.O.B.

a. *Dan Rosser* stated in the Glaucoma Suspect monitoring Scheme at the patient five year review where IOP and visual fields are stable the NNUH ophthalmic consultants wish to have the option to discharge the patient back to the optometrist for annual GOS Sight Testing (Risk of glaucoma) rather than bringing them into hospital for review. *Dan Rosser* said there will be clearly worded letters to the patient and optometrist explaining the discharge and follow-up process. It was suggested this letter should be retained by the patient and taken to their next sight test appointment. This will have to be confirmed by CCG before implementation. *Deborah Daplyn* asked *Dan Rosser* what action is advisable when a patient who is overdue for Glaucoma Suspect Monitoring refuses to attend due to covid risk? He suggested the patient has to take responsibility for their own care but he is prepared to draft a standard patient letter reinforcing the importance of examination.

b. *Deborah Daplyn* asked the committee for comments on the LOC representing wholly private practices i.e. do not offer GOS. The main question being around the levy, which is compulsory for GOS practices but would not be charged against private practices. If allowed to participate should services to these practices be restricted e.g. no free access to CET events? It was noted that the current mission statement and that accepted nationally states "*Norfolk & Waveney LOC is a statutory organisation representing Performers and Contractors providing General Ophthalmic Services within the Norfolk &*

Dan Rosser

<p>Waveney” <i>Roger Lee</i> asked if in this case a decision needs to be taken at national level to ensure consistency across all LOCs. <i>Deborah Daplyn</i> agreed to feedback this suggestion at the regional forum. Participation in Enhanced Service Schemes at present is restricted to practices with a GOS contract which has been questioned on the grounds of fairness with respect to private practices taking part. Governance compliance will be required for participation in Enhanced Services but all practitioners can access this via QIO.</p> <p>c. <i>Deborah Daplyn</i> asked the committee to attend the virtual NOC and ensure all the presentations are covered by someone and communicating with each other by email.</p>	<p><i>Deborah Daplyn</i></p>
<p>12. Committee Meeting Dates 2021: Zoom meetings will continue to be held on the second Wednesday of alternate months: 13 January; 10 March; 12 May; AGM 23 June; 14 July; 8 September; 10 November</p>	
<p>13. Date of Next Committee Meeting Virtual 13 January 2021</p>	
<p>14. Meeting closed 21:34 hrs</p>	