

NORFOLK & WAVENEY LOCAL OPTICAL COMMITTEE

MEETING MINUTES 13 JANUARY 2021

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 13th January 2021

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 |
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| <p>1. PES Report: <i>Wasim Sarwar</i> (Interim CGPL for NWLOC) said PES has started considering what action to take regarding the future of optometry and community service involvement following the Covid-19 crisis. He shared the NWLOC activity report for Oct-Nov 2020 (latest available). The telemedicine central hub began operating in November which impacted significantly on the data. Total cases rose from 338 in Sept-Oct report to 615 Oct-Nov which is a reflection of the GP and hospital referrals going directly to the hub with only self-referrals going to the practices. Although most GP surgeries are using the hub Wasim is responding to messages from optometry practices reporting GPs that are not following the correct pathway and phoning each GP to remind them of how to use CUES. The majority of episodes are by self-referral but GP staff are responsible for many into the hub. GPs are only seeing 10% of patients. Most patients referred to the hub were dealt with via telemedicine and of these most were discharged with self-care advice. Only 6% of referrals were directed to hospitals following telemedicine. Of the patient seen face to face by optometrists 79% were managed in Primary care, 17% were referred to hospital and of this group 14% were urgent referrals. OCT examinations resulted in 43% managed in Primary Care, 33% referred urgently to hospital the remainder being routinely referred. The most commonly recorded diagnoses were; dry eye; sub-conjunctival haemorrhage; PVD. OCT worked well in refining referrals which resulted in fewer patients going to hospitals.</p> <p><i>Ed Adkins</i> asked about previously reported practices that were not participating in CUES. <i>Wasim Sarwar</i> said he contacted most of those and some have come on board with CUES. These are mainly Specsaver practices but he has not had much success persuading Boots stores to join the scheme. <i>Roger Lee</i> asked why on Opera so much history and symptoms has to be recorded for each patient. <i>Wasim Sarwar</i> replied to full details are only required for referrals to GPs and hospitals. <i>Deborah Daplyn</i> reported her practice has seen a significant fall in the number of patients attending since the introduction of the hub telemedicine. <i>Ed Adkins</i> asked about self-referral patients who cannot be seen in time should be referred to another CUES practice. <i>Wasim Sarwar</i> said this is correct as the hub only accepts referral from GPs, 111 and hospitals.</p> <p>All PES finance queries should be directed to the new Finance Lead - finance@primaryeyecare.co.uk. <i>Deborah Daplyn</i> commented that the some GPs n Yarmouth & Waveney are not using CUES and continue to refer directly to the hospital</p> | |

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| <p>and she asked <i>Wasim Sarwar</i> to contact them to make sure they understand the system. <i>Dan Rosser</i> reported there is some enthusiasm on his part and the NNUH Transformation Team Lead to move all referrals to Opera but the current Covid-19 situation has precluded any progress in that direction. <i>Deborah Daplyn</i> reported at a recent area LOCs meeting there was a request from NHS England to develop a universal electronic referral system and a series of meeting for a sub-committee were arrange to come up with a proposal from the Eastern Region. However, NHS East has over-ruled that process saying a preferred provider has been chosen to run a pilot study. <i>Wasim Sarwar</i> said he is unaware of this action.</p> | <p><i>Wasim Sarwar</i></p> |
| <p>2. The minutes of the meeting held on 11th November 2020 were approved.</p> | |
| <p>3. Action Points from the Minutes: Meeting 11 November 2020 a. Opera now has a dashboard for reconciliations. b. Yarmouth & Waveney Post-cataract Service postponed to Easter 2021</p> | |
| <ul style="list-style-type: none"> • Future Direction of Optometry in Norfolk – There were 66 replies the survey of which 40 were from practice owners. &3% of practices expressed an interest in participating in Community Services but the fees need to be viable and the level of bureaucracy acceptable. The geographic spread of practices responding was good and they said on average 13% of appointments could be devoted to enhanced service provision which equated to 148 appointments per day across Norfolk. Respondents were asked what fee they consider would be acceptable for a 10 minute segment of appointment time, the average being £29.42. The minimum acceptable fee for 10 minutes appointment time for participation averaged at £23.21. In the table below are listed of conditions with estimates of the time required to examine and report/refer those patients from which the minimum acceptable fees have been calculated. The outcome is that capacity in Norfolk is very much fee dependant and this message was conveyed to the CCG at a recent meeting. A comment from the meeting was that this type of work cannot be coped with in the present optometry practice and will be better provided for in specialist optometry practices. LOCSU and PES are determined that integration of clinical work into optometry is the way forward and are pressing hard for this to happen. <i>Ed Adkins</i> believes integration into community practices will work best in this area due to the geographic spread of the population but the CCG will have to accept the cost implications. He added that in Kent £130 is the fee paid for a MECS type service. <i>Deborah Daplyn</i> noted that if the fee asked for is too high the CCG will award the contract to another provider like Evolutio. <i>Dan Rosser</i> stated New Medica receives a fee of about £70 per patient visit which is considerably less than the average acceptable fee from the survey. The point was made that, due to recruitment difficulties, optometrist salaries in this area are £15k to £20k above the average and this will be reflected in the fees required. <p>Questions were raised about sharing the survey results with PES because it is apparent the PES has a vested interest in securing a contract to ensure their commission. Sharing the fee information with PES it is hoped will bring greater realism to the fee discussions. In the past PES has agreed contracts and fees without reference to the LOC for ratification and some opinions from committee members suggested that this needed to be changed. The point was made that acceptance of the contract terms was for individual practices when they sign up and already there has already been seen some reluctance to accept in the Yarmouth and Waveney area. If practices fail to sign up for schemes PES will need to rethink its approach to the negotiations. It was agreed to be more forceful with PES over the desires of the LOC and NWLOC area practices to ensure a better dialogue with respect to contract negotiations and fees.</p> <p>It was agreed the whole survey result and report can be sent to PES with the comment that the fees quoted are the minimum needed for practices to participate in future schemes.</p> <p><i>Deborah Daplyn</i> and <i>Dan Rosser</i> attended a meeting with CCGs and representatives from Secondary Care to discuss the future position of optometry in primary care. Ahead of the meeting <i>Dharmesh Patel</i> sent an email with the PES view of what Norfolk was able to offer</p> | |

to the CCG -

Single Point of Access is an electronic referral system based on Opera and including a triage service similar to that operating for CUES.

- **Cues/MECS hybrid** is being generated from complaints raised by practitioners over many of the conditions presenting to CUES are really MECS appropriate which makes the response time mandated by CUES unrealistic. A new pathway design is needed
- **Macula Referral Filtering** includes referral refinement using OCTs and similar to the CUES requirements
- **Cataract** Referral refinement of new cataract patients is an accepted pathway elsewhere in England and is being put forward for Norfolk along with the Post Cataract scheme, currently being run in conjunction with NNUH, being expanded to the whole area.
- **Glaucoma** schemes are similar to those being run at present although the Hospital Trusts are asking for OHT patient *on treatment* to be included.
- **The meeting agreed** in principal with the email's proposals but stated that NWLOC must be kept in the loop of negotiations and have the right to veto future decisions taken by PES in relation to service provision in Norfolk and Waveney.

4. **Merger of LOA with NWLOC** – *Elizabeth Bunn* presented a draft letter announcing the merger of the LOA with NWLOC at an Extraordinary General Meeting which is to be sent to all NWLOC area practitioners –

In this area the LOA and the LOC have been run as separate entities for many years. During the last AGM it was discussed that the two committees should merge to reduce the administration and to streamline the two so that the LOA becomes a subcommittee of the LOC rather than a separate entity. The LOC already provides a grant to cover lecture costs etc. for the LOA and therefore it makes logical as well as financial sense to combine the two enabling a more efficient provision of CET in the area.

All monies in the LOA bank accounts will be transferred to the LOC bank accounts. For this to happen we need to organise an Extraordinary General Meeting (EGM) to formally agree to this merger. Due to the current climate this will take place on the (time/date) Via Zoom. All performers and contractors are invited to attend please email (Linda Vernon-Wood email address) for an invitation to this EGM to wind up the LOA.

The date for the Zoom EGM was agreed for 19:30 hrs on 17th February. *Ed Adkins* will send the invitations to all on the mailing list. Peter Hutchinson asked for copies of the Agenda and Financial Statement to be forwarded to him ASAP for upload to the website. *Linda Vernon-Wood* will be the Zoom administrator.

Elizabeth Bunn.

Ed Adkins

Linda Vernon-Wood

5. **Financial Report** *Linda Vernon-Wood*
 The report shows some further changes to the annual budget figures to reflect the current reduced activity due covid restrictions. Income levels are remaining fairly stable and the bank balance remains healthy at £54,900.47 as at Wednesday 13 Jan 2021.
Budget Meeting 19:15hrs 10th march 2021. There are no proposed changes to the fees for meetings etc. and the levy remains the same.

NWLOC Finance Report December 2020

| | Year to date | Budget Y/E 31/3/2021 |
|---|-------------------|----------------------|
| Income | | |
| Levy Collections LOC+LOCSU+ Central 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 |

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| | | 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 less Expenditure | -£2,656.12 | -£8,374.00 |

6. Web Manager Report *Peter Hutchinson* said:

Total Website Registered Members: 206 Total Users: 232

Pages visited: 310 with the most popular being:

| Pages | Page Views |
|---|------------|
| /gps-pharmacists/minor-eye-conditions-practice-list | 63 |
| /patient-information/minor-eye-conditions-service/ | 52 |
| http://www.norfolkwaveneyloc.org.uk/ | 41 |
| health-professionals/safeguarding-children-and-vulnerable-adults/ | 28 |
| /media/5221/minor-eye-conditions-service-gp-info.pdf | 24 |
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1. New LOC-Online platform for LOC websites

Work on uploading data to the new website is progressing but at times progress is slower than anticipated due to the restrictions LOCSU has placed on the WordPress utilities and one or two glitches with the pre-prepared pages. LOCSU issued an email announcing that the Umbraco web platform and associated LOC websites will not be supported after June 2021. I am confident we will have the NWLOC site operational before the closing date.

2. Assigning user Roles

When creating new users each must be assigned a role governing the nature of access to the website material. The types of role are as follows:

- Subscriber – basic read only access
- Contributor – delete posts, edit posts, read, read Reusable Blocks
- Author – delete posts, delete published posts, edit posts, edit published posts, publish posts, read, upload files, create Reusable Blocks, read Reusable Blocks, edit Reusable Blocks (own), delete Reusable Blocks (own).
- Editor - delete posts, delete published posts, edit posts, edit published posts, publish posts, read, upload files, create Reusable Blocks, read Reusable Blocks, edit Reusable Blocks (own), delete Reusable Blocks (own)
- Administrator – Full access to all features. **Niall O'Brien - Agreed**

Most members will be given the Subscriber role. We need to decide who, other than

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| <p>the Administrator, shall be able to post and amend material and which level of authority they should be given. Author: Ed Adkins & Debbie Daplyn Agreed</p> <p>3. GDPR Recording & maintenance of personal data –</p> <ul style="list-style-type: none"> ○ Personal data held by NWLOC must be kept for at least 7 years - even for members who are no longer and active; i.e. theirs names must not be deleted from lists, just marked as inactive. ○ Members must request to be included in the NWLOC mailing list e.g. for newsletters etc. <p>7. Members’ agreement to receive communications: The current mailing list was compiled without consent from the members however; it seems that consent is now a requirement. The Create and Account page now includes tick boxes which must be filled for this and email inclusion. The text will be amended to include a statement that “This will allow NWLOC to contact you. NWLOC will not share your data.” Once the website goes live users are sent an invitation email, following which every user will have to create a new account to log-on.</p> | |
| <p>8. Practice Address update:</p> <ul style="list-style-type: none"> a. Cecil Amey planning to open in Holt.(Pending) | |
| <p>9. Correspondence: None</p> | |
| <p>10. A.O.B.</p> <ul style="list-style-type: none"> a. Dan Rosser stated in the Glaucoma Suspect monitoring Scheme a letter for patients has been drafted and is with the medical Director awaiting sign-off before being sent out on behalf of the Commissioners. A copy of the patient letter to be sent to b. Deborah Daplyn announced that Suffolk LOC Chairman has changed who has very close connections with Evolutio. This raises an obvious conflict of interest which will need to be managed very carefully. c. Dan Rosser the Specsaver software generating referral letters was developed to use practice’s headed notepaper but now that email is being used the practice address is no longer on the letter. This makes it very difficult for the hospital secretaries and booking team to enter the address details on the hospital system and make arrangements for the return communications to be sent to the correct practice/optometrist. d. Dan Rosser announced the NNUH has stopped all non-urgent surgery due to current high numbers of covid-19 patients in the hospital. Ophthalmology referrals are still being accepted but this could change. e. Ed Adkins said has had two emails from practices having financial difficulties enquiring about possible sources of assistance. He was asked to forward details of the two practices to LOCSU so that the request can be escalated to OFNC. Roger Lee suggested this information should also be shared with NHS East which was agreed. f. Niall O’Brien has received an email inviting him for a Covid-19 vaccination which he forwarded it to Deborah Daplyn who will follow up with the originator to ask about vaccinations for all practice staff in Norfolk & Waveney. | <p>Dan Rosser</p> <p>Ed Adkins</p> <p>Deborah Daplyn</p> <p>Deborah Daplyn</p> |
| <p>11. 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>12. Date of Next Committee Meeting Virtual Budget Meeting 19:15 Followed by Committee Meeting 19:30 10 March 2021</p> | |
| <p>13. Meeting closed 22:01 hrs</p> | |