

NORFOLK & WAVENEY LOCAL OPTICAL COMMITTEE

MEETING MINUTES 10 JANUARY 2024

A meeting of the Norfolk & Waveney Local Optical Committee held on-line via Zoom was called to order by Deborah Daplyn (Joint-Chair) at 19:31 on 10th January 2024

PRESENT: Ed Adkins, Charlotte Berryman Elizabeth Bunn, Hannah Castley, Deborah Daplyn, Ali Ganiwalla, Michelle Horn, Roger Lee, Niall O'Brien, Dan Rosser, Ian Sinha, Peter Hutchinson (Administrator)

APOLOGIES FOR ABESENCE: Julien Nelson, Linda Vernon-Wood

OBSERVERS: Fionnuala Kidd – LOCSU Eastern Area Optical Lead; Wasim Sarwar – PES Representative,

COMMITTEE MEETING MINUTES

NEW DECLARATIONS OF INTEREST: None

Contents	Action
<p>1) PES Report –</p> <p>a) CUES Update – <i>Deborah Daplyn</i> in conjunction with PES have failed to identify any new practices wanting to join CUES. Vision Express has said there will be delay nationwide as they query some aspects of CUES contract. <i>Wasim Sarwar</i> asked for ideas on how best to address the shortfall of practices needed to provide good geographical cover in Norfolk & Waveney. The HUB has identified some key areas where it is difficult to get face to face appointments close to the patient's locality. <i>Wasim Sarwar</i> will get more detailed current data on the areas in question and the number of patients involved. A discussion followed where it was suggested the lack of practice involvement is due to the remuneration being inadequate and the IT system needing updating; in answer to which it was noted the ICB has a major financial deficit so cannot address any funding issues and the IT update will be delayed until a new national CUES/MECS contract has been agreed. <i>Wasim Sarwar</i> said he has been told by ICB they are happy with the current service provision despite the patchy coverage however PES and the HUB find it difficult to provide equality of service to all patients in need. He said he is willing to approach the ICB to see if uplift in tariff can be negotiated but warned the only way this is likely is with a reduction in tariff to some of the other services. <i>Wasim Sarwar</i> explained that about 65% of patients triaged by the HUB receive appropriate advice and treatment; the remainder are offered the nearest face to face appointment but this maybe a considerable distance from the patient's location making it unacceptable. In these cases the patient will be directed to Eye Casualty at the nearest hospital. It was agreed a mobile service using and optometrist in a van could provide a solution if it is possible to staff it and the numbers of patients needing to be seen is not too great. Another option is to seek vacant NHS facilities e.g. GP surgeries or rural clinics where a mobile service could be used. The point was made that if patients complain to the ICB about a lack of service in their locality it could bring about action. Ian Sinha sked if practices could provide patients with the appropriate complaint form but it was pointed out that they would be in contact with the HUB when they are denied access not a practice. <i>Fionnuala Kidd</i> suggested another solution might be to provide transport to a CUES practice. <i>Ali Ganiwalla</i> said a precedent exists with diabetic eye screening where transport is provided but this is planned weeks in advance whereas an immediate response is required for a</p>	<p><i>Wasim Sarwar</i></p>

<p>CUES appointment. Deborah Daplyn summarised, saying it is not possible to attract new practices to CUES but to move forward the most recent facts and figures are needed to determine the number of patients that are unable to access the CUES service locally to discuss with ICB the viability of a mobile service or providing patient transport. Wasim Sarwar said he has been addressing high level NHS managers as well as local GPs to make them aware of all of the eye care services being provided in the area and keep eye care as current topic for discussion.</p> <p>b) Post-op cataract referrals: JPH Gorleston, need to integrate Medisoft software and this is causing a delay to them coming on board. Also there has been a change in the admin lead person which has further delayed the system integration. QEH Kings Lynn still interested in joining this scheme but has been quiet recently. Hannah Castley says a meeting is being arranged to continue the discussion.</p> <p>c) JPH Glaucoma scheme: The consultant in charge is retiring and a locum consultant is taking over but needs to familiarise herself with the scheme. Checks are being made on the costings to ensure that the Glaucoma Monitoring scheme is cost effective compared with the Block Contract costs for the same patients.</p>	
<p>2) Minutes from Committee Meeting 15th November 2023 - were approved and adopted.</p>	
<p>3) Action Log: a number of items were marked as closed and new subjects added – see attached Action Log</p>	
<p>4) Paediatric Service Update: Ed Adkins said an email from Narman Puvanachandra had been received which indicated that NNUH was no longer interested in pursuing this service. Dan Rosser explained he has been in discussions with NNUH over a private matter but this had a negative effect on the continuance of the paediatric service negotiations. He went on to explain a hospital trust in Suffolk had taken the decision to divert to community optometrists patients referred from screening services with a v/a better than 0.5 LogMar and NNUH has decided to follow the same path to reduce waiting times. Ian Sinha said NWLOC had reached a point where minor points in the contract wording wear being clarified with LOCSU and PES before entering negotiations with NNUH over fees. It was noted as a direct result of NNUH adopting a less robust system, those patients discharged to community care are not being followed and thus their level of care cannot be guaranteed. Dan Rosser asked to be sent a copy of the fees being discussed by NWLOC so he can take the scheme directly to the NNUH Contract Team which may find it financially advantageous to continue negotiations. Ian Sinha pointed out NNUH had been sent a copy of the suggested fees however; the service provider will be PES which will agree the contract details and fees. Narman Puvanachandra suggested NWLOC proceeds with developing the scheme to get “acceptance as a process” Fionnuala Kidd said she has never heard of this approach before but asked to be sent a copy of the email Narman Puvanachandra sent to Ed Adkins and Ian Sinha so she can discuss it with her colleagues to try to find a way forward. Ian Sinha, Ed Adkins and Fionnuala Kidd to arrange a meeting to take the scheme forward.</p>	
<p>5) NOC REPORTS – “take home message”:</p> <p>a) Deborah Daplyn attended discussions on electronic referral and EERS from which she now believes there is a realistic prospect for Electronic Referral in Norfolk & Waveney to answer the difficulties encountered with using EGRESS and NHSmail. She said the ICB has identified a funding source for an electronic referral system and the information she gained at NNOC will ensure NWLOC does not “fall into too many potholes”. Niall O’Brien commented that to use NHS email addresses a new system of Multi Factorial Identification (MFA) is being introduced that requires users to log-on using a mobile phone which is not always possible in remote areas of Norfolk and can be difficult when a user changes a mobile phone.</p> <p>b) Julien Nelson – Not present.</p> <p>c) Ed Adkins discussed communication and cooperation between LMC, LDC, LPC, LOC and commissioners and said he will research the possible routes to gain and improve contacts with the other professional committees in Norfolk & Waveney.</p>	

<p>d) Charlotte Berryman attended discussions on how other LOCs have addressed different issues from which she believes NWLOC should examine local social inequalities. She suggested that developing services like CUES/MECS and the Paediatric scheme help to make services available to some members of the community who are not able to afford private eye examinations. It is a subject regularly raised when discussing NHS contracts so it will be useful to be able to demonstrate NWLOC is actively addressing the problem. Niall O'Brien commented he had shown an interest in a scheme providing eye examination for the homeless but was not prepared to take part if it failed to cover his costs. Deborah Daplyn said a scheme was running in another part of the Eastern Region which she understands uses a mobile service but she said the expectation is for optometrists to deliver this service on a pro bono basis.</p> <p>e) Michelle Horn said she was surprised by the Sustainability discussions around LOC operations but felt there is a need to review how sustainable NWLOC is and to document those findings. She volunteered to be the Sustainability lead to review the current position and recommend any changes needed. The general opinion is that NWLOC is meeting sustainability criteria by remote committee meetings and electronic communications which Michelle Horn recognises and will include in a report. Also she will create a sustainability policy document detailing the processes involved and the frequency of reviews. Fionnuala Kidd said some other LOCs purchase carbon offsets i.e. tree planting, to make face to face meetings more sustainable and publishing links to other websites, like ABDO, which have produced sustainably advice for practices.</p> <p>f) Linda Vernon-Wood – not present.</p>																																																																			
<p>6) ICB Training Needs Analysis: Deborah Daplyn said the ICB received 50-60 responses to the survey about training needs. The survey answers are being analysed to find any common needs that can be developed into action points. A meeting in the near future is anticipated.</p>																																																																			
<p>7) Website list of Optometrist Specialties & Skills: Ongoing</p>																																																																			
<p>8) Financial report: Charlotte Berryman said Linda Vernon-Wood sent a report to all committee members and copies of the latest bank account transactions. It was noted that the Budget Finance meeting will precede the 13th March Committee Meeting.</p>	<table><tr><th colspan="3">Norfolk & Waveney LOC</th></tr><tr><th colspan="3">Financial report to 8th Jan 2024</th></tr><tr><th></th><th>Year to date</th><th>Budget for Year end 4/4/23</th></tr><tr><td colspan="3">Income</td></tr><tr><td>Levy Collections LOC+LOCSU</td><td>£52,439.17</td><td>£60,000.00</td></tr><tr><td>Other</td><td>£0.00</td><td>£0.00</td></tr><tr><td>Total Income</td><td>£52,439.17</td><td>£60,000.00</td></tr><tr><td colspan="3">Expenditure</td></tr><tr><td>Committee Costs</td><td></td><td></td></tr><tr><td>Honoraria</td><td>£4,071.00</td><td>£5,412.00</td></tr><tr><td>Admin fees</td><td>£4,063.00</td><td>£6,400.00</td></tr><tr><td>Admin travel</td><td>£34.20</td><td>£45.00</td></tr><tr><td>Members fees</td><td>£22,678.05</td><td>£15,000.00</td></tr><tr><td>Members expenses</td><td>£459.25</td><td>£540.00</td></tr><tr><td>Meeting Rooms</td><td>£143.88</td><td>£485.00</td></tr><tr><td>Website</td><td>£180.00</td><td>£180.00</td></tr><tr><td>Office costs</td><td>£280.00</td><td>£800.00</td></tr><tr><td>Training & NOC</td><td>£200.00</td><td>£1,600.00</td></tr><tr><td>AGM, CET & Misc</td><td>£435.55</td><td>£145.00</td></tr><tr><td>Payment to LOCSU</td><td>£26,219.59</td><td>£30,000.00</td></tr><tr><td>Total Exp</td><td>£58,764.52</td><td>£60,807.00</td></tr><tr><td>Income less Expenditure</td><td>£(6,325.36)</td><td>£(607.00)</td></tr></table>	Norfolk & Waveney LOC			Financial report to 8th Jan 2024				Year to date	Budget for Year end 4/4/23	Income			Levy Collections LOC+LOCSU	£52,439.17	£60,000.00	Other	£0.00	£0.00	Total Income	£52,439.17	£60,000.00	Expenditure			Committee Costs			Honoraria	£4,071.00	£5,412.00	Admin fees	£4,063.00	£6,400.00	Admin travel	£34.20	£45.00	Members fees	£22,678.05	£15,000.00	Members expenses	£459.25	£540.00	Meeting Rooms	£143.88	£485.00	Website	£180.00	£180.00	Office costs	£280.00	£800.00	Training & NOC	£200.00	£1,600.00	AGM, CET & Misc	£435.55	£145.00	Payment to LOCSU	£26,219.59	£30,000.00	Total Exp	£58,764.52	£60,807.00	Income less Expenditure	£(6,325.36)	£(607.00)
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<p>9) Training & CPD - Elizabeth Bunn said speakers and presentations booked are:</p> <ul style="list-style-type: none">• 16th May – Ben Burton will present a webinar - "Medically unexplained visual loss"• June AGM Heidelberg will present "Glaucoma OCT case studies"																																																																			
<p>10) LOCSU Report & update – Fionnuala Kidd</p> <p>a) LOCSU will provide more information about the CUES/MECS Single Specification by the end of January</p> <p>b) LOCSU has hosted some "Listening Events" where LOCs and optometrists have been invited to provide ideas for the type of support to be expected from LOCSU going forward. LOCSU welcomes any honest comments/complaints from LOC members about the support it has been providing as well as suggestions of how to make changes.</p> <p>c) LOCSU is reviewing the LOC Constitution which is considered to be no longer fit for</p>																																																																			

purpose particularly in light of structural and nomenclature changes to NHS bodies.	
11) Web Manager Report: <i>Peter Hutchinson</i> referred to the previously circulated report: a) Total Website Registered Members: 199 (+30 registered but NOT activated) 832 User Visits of which 45 were account log-on Pages visited 14209: File Downloads: 178 b) One new account opened - details sent to Ed Adkins. c) Website Home pages updated as agreed.	
12) Practice Address update: Lords Optician, Castle Meadow, Norwich closed. Nelson's Eyepatch practice in Holt closed. It was noted that the promised regular practice and practitioner list updates from NHS East have not materialised. Niall O' Brien commented that he compared NWLOC practice list with one provided by ICB and found NWLOC is the more comprehensive list.	
13) Correspondence: all previously circulated	
14) A.O.B. None	
15) Committee Meeting Dates 2023: Zoom meetings will continue to be held on the second Wednesday of alternate months: 10 January: 13 March: 8 May: AGM TBA June; 9 July: 11 September; 6 November	
16) Meeting closed 21:31 hrs	