

Minutes of LOC meeting Tuesday 10th September 2019 at St Aldate Chambers

Present: Sue Arnold, Alvaro Borges, Amy Clarke, Clare Griffin, Nigel Harris, Kerry Irvine, Ian Shapcott, Adrian Street, Ankur Trivedi.

Riz Choonara from Specsavers Stroud was welcomed as a guest.

1. Apologies

No apologies had been received.

2. Declarations of conflicts of interest

There were no new declarations of conflicts of interest.

3. Minutes of last meeting

The minutes of the last committee meeting were approved.

4. Matters Arising

Alvaro had spoken to Graham Mennie regarding Amar's presentation at the last meeting, Graham was aware of the PCN and would update as soon as more information was available.

The Hydroxychloroquine guidance had not been sent out as it had not been approved by the CCG. Ankur and Alvaro would push at the next CCG meeting. There was a pathway for a community service but no one was sure if there would be an interest locally and also it wasn't clear what was happening with the clinics in the hospital so Alvaro felt it was best to leave everything as it was and review if the numbers of people on the medication changed.

Adrian had distributed Amar's collated needs analysis but had had no further contact. Alvaro would advise Amar of the reply from Graham Mennie.

Ankur had noted a relaunch of the LOCSU Children's Pathway that suggested all screening failures attend for an appointment with a community optometrist as there are delays in getting HES appointments. There was no intention to change the Gloucestershire protocols currently.

Alvaro reported that at the last CPG meeting he had been asked about the LOC providing a link to a survey regarding the ECLOs. Kerry queried who the survey was aimed at, Ankur would check. Sue mentioned that she had not yet invited to ECLOs to the Low Vision CET event, and that Daniel was keen for consultants to attend. Clare suggested inviting the NewMedica consultants as well. Alvaro would send some invitations.

It was reported that Tetbury Hospital were not sending out post-operative cataract checks to the community. Alvaro would follow up.

5. Treasurers Report

COMMITTEE	£50487.81
CET	£163.82
LOCSU	£3067.64
VOLUNTARY	£6612.70

Sue reported that the CET fund was not in deficit. It was agreed to transfer some money from the Committee Fund to the CET Fund as had been agreed at the AGM. It was also agreed that this should be on an ad-hoc basis until the next AGM when the contributions to each fund would need to be changed.

6. PEG Report

Ankur reported he had been working with PES on their framework for clinical governance and complaint management. He was planning to send an e-mail to update the Community Practitioners regarding PES and his role.

There were some issues with Thomson PINs. Clare suggested contacting Thomson regarding a PIN search as it was possible to search by name and then advising the Community Practitioners.

PES were investigating a solution for the current difficulties around the duplication of entries on different software but this was not an easy task.

Alvaro asked if there was any update due for the Children's Scheme and Kerry felt a relaunch of all scheme might be a good idea as the accreditation was out of date. Ankur added that DBS checks would be required by PES in future.

Nigel suggested using the MECS launch to relaunch all the schemes. Ankur replied that the MECS scheme had been delayed possibly until April by the CCG to renegotiate the fees. The CCG needed to be clear that they would be getting value for any increases but Ankur felt without an uplift Optometrists and practices may not get involved. Alvaro agreed.

Kerry and Ankur felt the LOC might have to take a position on the fees if it was felt they were too low. Kerry also commented that front of house training and contact with local GPs would be necessary.

7. F&F Cirencester

Ankur had received an e-mail from Andy Partridge from Specsavers in Cirencester (see Appendix 1)

Ankur suggested a meeting of practices and practitioners in Cirencester to try and discuss a possible solution. It was suggested that it was possible to offer a private appointment if a practice wasn't part of the F&F scheme rather than sending patients to another practice, though this wasn't idea from an LOC point of view as activity would not be recorded.

Riz asked if it would be possible to restrict some schemes if practices did not take part in others, Ankur felt this was not feasible.

It was agreed this was a difficult situation and Ankur wondered if the LOC could facilitate some meetings? Alvaro agreed, though commented it might be difficult to get people to attend if they were not interested, no one could be forced to attend.

It was agreed a local Optometrists network would be a good idea, Alvaro would try to set up something in Cirencester and would contact Andy to discuss further.

8. LOCSU Optical lead Feedback.

No feedback had been received at this time.

9. RVO Referrals

Ankur reported that there had been an issue with RVO referral via the Wet AMD e-mail. Kerry said she had a template for RVO referrals, Ian asked if there had been any input from any consultants and if there were any guidelines for referrals. It was agreed to communicate with the County regarding the template and Ian would include it on the website.

There was some discussion around sending images to consultants for an opinion via NHS e-mail, especially suspicions of papilledema. Ankur felt some guidance would be helpful, Alvaro reminded the meeting he had been trying to set up pathways for non-emergency referrals but had not managed to get anywhere with the CCG or hospital.

Riz asked if it would be possible to sit in on an emergency clinic at the hospital. Ankur thought this might be possible though arrangements would need to be made. It was suggested this could be used to facilitate local meetings.

10. Any Other Business

Alvaro asked if there had been any further first eye cataract post-operative checks before the 1st September. No other cases had been reported, Ankur had communicated with Optomanager to ensure the module was set up correctly.

Alvaro reported that the CCG were keen to get support for eye tests for the homeless and were looking to have a trial. It was felt that there would need to be a domiciliary provider involved to enable GOS forms to be claimed if a premises other than a practice was used, though Kerry understood there was a system in Manchester that allowed practices to be involved.

It was agreed to contact the domiciliary providers, Riz would send Healthcall's contact details to Alvaro.

Ian reported that e-mail Dodo was working. Ankur would check the PEG e-mail set up as the addresses would cease but the current PEG web-site would remain for now.

Alvaro asked if there was to be a second PES liaison role alongside Ankur, Ankur said the position wasn't clear at the moment.

It was agreed that the LOC Officers should have an LOC e-mail addresses, which Ian would arrange. It was also agreed to arrange for other committee members to be able to send things County wide.

Ian requested some short bios from Dan, Amy & Clare for the web-site.

A Strategy Day was discussed and Wednesday 4th December was agreed. Adrian would check the availability of the Cheltenham Chase.

Ankur and Alvaro were to attend the NOC, Alvaro would use the free place. It was suggested that three people attend to enable participation in all workshops. Nigel would check his availability and Kerry could possibly cover one of the days.

11. Date of Next Meeting

Tuesday 19th November 2019, 7:45pm, St Aldate Chambers

Hi Ankur

We've been experiencing some issues with F&F scheme here in Cirencester. As you are probably aware we at Specsavers are the only store to offer the service via optomanager. We've been seeing an influx of patients from other practices in the area which is to be expected. However, there seems to be a trend of information given to patients who present to us having been referred from different practices.

It seems they have been told they are unable to be seen at their registered optometrists citing non enrolment on the scheme as the reason.

They also don't appear to have been offered a private test for their symptoms. This is rather worrying.

In order to establish exactly what policy is in place, I contacted one of the opticians who have regularly referred patients to us.

My worst fears were confirmed and they did indeed say they will not see them (even privately) as they are not on the mecs scheme.

I find this alarming and also a breach in their duty of care towards registered patients. I'm not quite sure what jurisdiction PEGS has over this but I feel it needs to be brought to your attention. Obviously, I'd prefer not to involve any regulatory bodies to investigate further so any muscle that PEGS can flex on this would be greatly appreciated.

Regards

Andy