Minutes of Gloucestershire LOC Meeting Tuesday 22/09/2020 19:00 Via Zoom

Present: Alvaro Borges, Amy Clarke, Nigel Harris, Ankur Trivedi, Ian Shapcott, Anthony Burke, Clare Griffin, Eshmael Palmer

Apologies: Adrian Street.

- 1. Welcome: AB welcomed Tony (TB) to his first LOC meeting.
- 2. Declarations of Interest: there were no new declarations of interest
- 3. **Minutes of last meeting:** AB explained a mis-spelling of "Alun" on pg 1. "Tony" was clarified to mean Anthony Burke in Point 8.

4. Matters Arising

(7) – AB asked who had done the YAG referral form originally as it needs editing. TB suggested possibly Jayne Hardman or another Ophthalmic nurse had done it. IS thought possibly Frances Riley. NH asked if it was LOCSU; AT explained it was not a national form. EP explained Kath Miller is making enquiries. All agreed the form needs to be user friendly & streamlined with easy editing for emailing. AB asked EP to let him know if there are any issues with updating it on their end, and the LOC will organize something.

(8) – TB explained that he had missed being paid for NHS work in February/early March as the forms were deducted from the April Covid Grant despite raising with NHSE. He has had discussions with Steve Guiliford who had a similar issue. Steve has managed to resolve the issue following escalating to his local MP, Alex Chalke & has offered to help Tony with this. CG said she had heard of similar issues nationally, AB will raise this with LOCSU.

(10) – Eye Casualty Email has been disseminated to the whole area with a note explaining it is ONLY for use following a discussion with the Triage line as it is not automatically checked. AT confirmed that this is also the email address used by Opera to forward on the CUES reports.

Discussion re primaryhealthnet emails – to check on how to subscribe for each member of LOC rather than getting it sent to shared email address. Ian offered to sign up initially.

5. Treasurers Report – Nigel Harris

We are starting to see some uptick in activity. Levy for July shows approximately 50% activity, increasing to 70% for August.

NH still has no on-line access to the bank account & is hoping to have some within 5-10 working days. If those who have submitted expenses would be willing to wait he will pay direct into bank accounts, but if anyone needs a cheque he & AS will arrange. All were happy to wait.

Outgoings – committee expenses and from August onwards the LOCSU fees. Healthy balance of £68,013.45

6. PES report – Ankur Trivedi

AT updated us on the information around the change over from Optomanager to Opera for enhanced services IT provision. As Optomanager is winding down and leaving the Optical environment, there will not be any new updates, so no bug fixes or changes to allow for Tetbury 1st eye reports. The work-around we originally used for New Medica has been recommended to our colleagues. Opera will be taking over from around December – PES have little control over this, with priority modules moving over initially (eg Glaucoma). CG suggested that we offer some level of support to ensure our colleagues can get onto Opera smoothly, so we don't lose their engagement. It seems there are more hoops to jump through than to get onto Optomanager – maybe we could run a launch-type webinar? NH asked for those who are based near county boarders, are there likely to be any further issues? Ie if sees a Worcestershire px in Gloucestershire will Opera allow for this & offer the enhanced services that is available to the px? AT said this was his understanding.

7. Newmedica Cataract "Upgrades"

AT explained a local Performer had contacted him concerned that their px had been offered an upgrade on IOL to toric or multifocal when at Newmedica – not a complaint, just a "pause for thought" & concern that would we be expected to discuss these options before referring. TB explained that there is a NICE obligation for the patient to have all options (including the private- only ones) explained to them at the time of listing. This is also done within the Trust, but as they are not allowed to advertise their private work when working for the Trust the wording is for the patient to look into this themselves.

New Medica has also commented on having a large number of referrals from the Worcestershire area.

There was general concern that with more providers coming to the County there may be more issues. We all discussed sending something out or offering the patient a leaflet explaining their options. There seemed lots more to discuss on this and we agreed to add it to the next agenda as an outstanding item.

8. Tetbury/Emerson's Green/Spa Medica

- a) Tetbury has suddenly released all 1st & 2nd eye cataract discharges into the community. It seems there were no advance communications regarding this. AB has discussed now with Tetbury and should the system not work well, they will downgrade to 2nd eye discharges only.
- b) Emmerson's Green Say they have had very few referrals from Gloucestershire (approx. 10 over the last year). It appears there have been some issues with getting referrals through Optomanager as they weren't checking/receiving their NHS.net emails & expect referrals through ERS. AB has spent some time with them getting the referrals to work through email. They are keen for us to be aware of their offer of pre-op in morning with surgery in afternoon, free parking and a 10 week wait list. At present to avoid 2/52 self-isolation before surgery, they are offering a visit 3 days before surgery for a COVID test with surgery once come back as negative. AB will share with County once has more information.
- c) Spa Medica AB has spoken with their Operational Manager. Unfortunately due to COVID they cannot give an estimated opening date, but they hope for Spring Summer 2021. Their usual model is 99.5% NHS work and they currently carry out approx. 50,000 surgeries per year nationally. They have one operating theatre for Cataract Surgery ONLY (though do have a VR specialist so can do vitrectomy etc on own patients) and usually have at least 1 optometrist (can be as many as 4) working for them. They are

hoping to get a contract with CCG, but will be able to do NHS work under Any Qualified Provider provision should this not be possible. In areas without referral refinement & discharge agreements, they train & pay selected opticians for each referral/discharge, however with our system in place they are happy to follow the local procedures. They have a transport fleet and will provide transport for patients at no cost to patient.

9. Community Ophthalmic Link – Tony Burke

This is the sharing of information & data from GP letters/Diabetic Screening etc TB has had 2 meetings regarding this:

- a) With Cyber Security they are happy that this is doable, but need to decide between using a web page or HCN network for useability & security implications
- b) With the Project Manager at CCG the Data Protection Impact has been assessed and passed, and Information Governance at the trust is happy. They need to arrange a full business case asap, as they have probably missed the boat for the October COVID funding but it needs to be in place for any further funding release.

AB asked about costing of Blueworks (the IT provider) as Paulo there would like to be more engaged.

TB explained we need to nail down the business case before we move forward with him. TB asked if there were any way we could know how much it would be used and how useful in modifying/preventing referral.

LOC were all happy to do a 2/52 survey on how many times they would like to have access to it. TB will set up a quick to complete sheet to be shared amongst us.

10. **NOC**: will be virtual this year. Rather than 1-2 day conference it will be held as a series of evening webinars etc for any LOC member to attend. We are still awaiting dates & Amar Shah has asked for any feedback on subjects/speakers that we would find useful.

11. Website revisions:

a) Following discussions on community Whats App groups, we have been asked to make nhs.net referral emails easier to find. IS will create a subtab on referrals tab of website listing the referral email lists for Central Booking Office, Wet AMD, New Medica, Tetbury, Emmerson's Green etc. AT agreed this would make it more accessible.

b) F&F changes – the website is currently incorrect as this system is no longer active. IS will put a note at top of webpage saying "This Service has been superseded by CUES" and greying out the old information

c) Wet AMD Audit – following discussion with Aisling & Emily Fletcher (Medical Retina Consultant). The information on the website says to refer Mac Oedema & BRVO using Wet AMD form as had previously been agreed, but this is not how Emily Fletcher would like it to work. Before we remove this advice from the website EP has agreed to get us clarification from the Trust & AT said if we can use this as an interim approach until a new pathway is set up, it would be great.

12. Any Other Business.

AC can't find rates for expenses claims as an IT issue has taken her off Trello. AT will forward template for expenses claims with rates.

AB has been discussing with Amar Shah & Andrew (Boots) to get the Boots practices & practitioners onto CUES. NH has done a couple of CUES in Boots, Tewkesbury but there is some fracturing of the practices locally. AT explained CUES is a learning curve & said that

both he and Amar are available to help support.

Children's Screening Mop Up for last year's reception class is now happening & is hoping to be completed by October ½ term, with a break before starting the new intake in New Year IS asked if Patient Satisfaction Questionnaires are still suspended. AT believes so & that they are looking into providing a Text message option but the costing needs to be considered. Kath & Esh are now included on the Countywide email list. We have an interesting few months ahead.

13. Next Meeting Tuesday 20th October 2020 7pm

AB apologised for the late change of date for today's meeting.

Actions:

(i)	YAG form redesign – to find out who did originally	Kath Miller/ Eshmael Palmer
(ii)	NHS payments for Feb/March needs raising with LOCSU	Alvaro Borges
(iii)	Subscribe individual members to primaryhealthnet	Ian Shapcott will sign up &
		then circulate
(iv)	Survey potential use for Ophthalmology Link	All (to be designed by TB)
(v)	Ideas for NOC subject/speakers to Amar	All
(vi)	Create website subtab for nhs.net email addresses	Ian Shapcott
(vii)	F&F page on website change	Ian Shapcott
(viii)	Wet AMD/BRVO/Mac Oedema pathway clarification	Eshmael Palmer
(ix)	Forward expenses claims template	Ankur Trivedi