

Minutes of LOC meeting Tuesday 16th March 2021 via Zoom

Present: Fawn Bennett, Alvaro Borges, Clare Griffin, Nigel Harris, Sid Maher, Ian Shapcott, Adrian Street

1. Apologies

Apologies had been received from Amy Clarke and Ankur Trivedi

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 meeting were approved.

4. Matters Arising and Action Points

Action Points from last meeting

			Status
i	Check existing Wet AMD form <i>Ishmael was not present at the meeting</i>	Eshmael	Ongoing
ii	SM brief on agenda for next meeting	Adrian	Completed
iii	SpaMedica contact details <i>Alvaro was awaiting confirmation from SpaMedica</i>	Alvaro	Ongoing
iv	Advice regarding old outstanding cheques	Nigel	Completed
v	Secretary access to on-line banking	Nigel/Adrian	Ongoing
vi	Health questionnaire comparison <i>Ankur was not present at the meeting</i>	Ankur	Ongoing
vii	Update website	Ian	Completed
viii	Feedback or amendments to LVA presentation	All	Completed
ix	Dudley LOC chair contact details to Alvaro	Amy	Completed
x	Investigate Healthy Living Practice further	Alvaro/Fawn	Completed
xi	Contact Kerry re Peer Discussion CET	Alvaro	Completed
xii	Ascertain appropriate reserves and average levy	Nigel	Completed
xiii	Send any community database updates to Adrian	All	Completed

i. Alvaro mentioned he felt the development of a maculopathy pathway via Opera with an appropriate fee would be a better solution rather than condition specific referrals.

iv., v. & xii Covered in Item 5 - Treasurer's Report

x. Covered in Item 9 – Healthy Living Practice

xi. Covered in item 8 – CET

5. Treasurers Report

	Dr	Cr
Opening balance	76,094.11	
Bank Receipts, as per breakdown	33,026.32	
Bank Payments, as per breakdown		33,003.49
Outstanding cheques as at 31/03/2020		6,145.00
Closing Balance 31/03/2021, as per statement		
	<u>109,120.43</u>	<u>39,148.49</u>
	BALANCE	69,971.94

Nigel reported that an instant access on-line account had been set up to facilitate the financing of the Homeless Project and that the online banking seemed to be working OK, access for the Secretary needed to be sorted out. ⁱⁱ

From the LOCSU Treasurer's meeting, Nigel had been informed that money to cover unpaid cheques and overpayment by NHSE needed to be kept available for 7 years. He also reported that the national average for remuneration from Committee members was £50.00 per hour and that some LOCs used specialist accounting software which he would like to consider.

Nigel noted that the PCSE were taking 1.5% of GOS claims rather than 1.4%, though it was not clear how long this had been happening for, possibly only since the introduction of eGOS, and further investigation was required. If the issue was that it was only possible to be paid in 0.5% steps Nigel suggested reducing the levy to 1% at the AGM.

Nigel suggested developing a plan for the next year to try and get an idea of expenditure and Alvaro suggested a specific event planning meeting which was agreed to be a good idea. Alvaro would suggest some dates. ^v

A fee of £250 was agreed for Fawn and Sid for attending the LOCSU induction training.

Alvaro spoke about the possibility of the LOC sponsoring post graduate qualifications with some conditions attached so that the recipients would provide services in the County. He felt that more highly qualified practitioners would be beneficial with the possibility of inter-practice referral to access specialist practice. Clare noted that hospital placements were necessary for a lot of courses and difficult to secure, though Fawn had heard that Optometry Wales were trying to incorporate hospital placements into future contracts. Adrian also mentioned that a similar scheme had been mooted several years ago and there had been a lot of suspicion around different practices 'poaching' patients referred in this way.

6. PES Report

Ankur had sent his apologies but it was noted that all modules except the children's scheme had migrated from Optomanager to Opera.

7. Social Media

Alvaro would like to see a Social Media launch at the AGM if possible. Two platforms would be priorities, LinkedIn and a closed Facebook group. LinkedIn was more peer to peer orientated and many optical related organisations such as Newmedica and NHSE were very active on this platform. Alvaro felt a closed Facebook group set up by the LOC with a disclaimer that it wouldn't be regulated or moderated by the committee would be a useful addition to the County.

Ian noted that all log in information was in Dropbox and it was agreed that Sid would take this project forward. ^{vi}

8. CET

Kerry had stood down from the Committee and it was agreed Adrian would organise a card and gift (possibly some wine) to thank Kerry for her contribution. ^{vii}

Lorcan Butler from the Brain Tumour Charity could provide a Peer Discussion CET event via Zoom, there was no fixed charge but suggested donations between £50 to £250.

Clare felt it could be helpful to whoever took over the CET to have the support to set up a CET event and Nigel agreed it would be a good learning experience. Alvaro asked for volunteers and Clare agreed to take on the role supported by Fawn.

Alvaro would introduce Clare and Fawn to Lorcan, and they would report back at the next meeting. ^{viii} It was also noted that Kerry had offered to help with a handover of the CET role.

9. Healthy Living Practice

Alvaro reported on the scheme running in Dudley where a range of services such as blood pressure checks, smoking cessation, healthy eating advice could be provided in optical practices. Funding was from PHE rather than the CCG and the scheme was successful in Dudley partly because patients did not want to visit their GP or local pharmacy.

There were 3 levels of service and a LOCSU pathway had been developed. It was agreed to try and investigate the possibility further, Alvaro would send more details and would try to make contact with PHE for the region as services could be tailored to local needs. ^{ix}

10. Community Lateral Flow Testing

Alvaro reported on a scheme in other areas for the public to come into an optical practice for lateral flow testing. There was an initial set up fee payable of £250.00 and then a payment of £10.00 per test. Funding was from PHE, a separate room would be required, and the tests would be on an appointment basis, not walk in.

It was agreed that if funding became available locally the option would be offered to Gloucestershire practices.

11. Any Other Business

Alvaro reported that a meeting with Vision Care for the Homeless had been organised for the 26th of March. The service can take up to 9 months to set up as there were a lot of things that needed to be organised. Adrian and Sid had offered to assist, Sid was not available on the 26th, Adrian to confirm if he would be able to make the meeting. ^x

The County ECLOS were to be invited to the next meeting, it was agreed they should attend at the start before the Committee business.

Alvaro and Sid felt the Low Vision presentation had been well received but funding from the CCG might be difficult as while they would like to provide more services there was a large overspend on cataract surgery and there had been an approach from the CCG to see if referrals could be reduced. The questionnaire score had been modified a few years ago and it was agreed that any further changes would result in not following NICE Guidelines and that it was not up to Community Optometrists to ration healthcare, NHSE and the CCG needed to resolve funding issues.

Due to the possible funding issues Alvaro wanted to prioritise future developments, it was agreed that the proposed Low Vision Scheme would be beneficial to communities and patients and address unmet need.

Alvaro reported he had heard that there was some funding available directly from NHSE that could be used for healthcare projects and he was trying to find out more information.

Alvaro had received a 'to dilate or not to dilate' guidance document from SpaMedica which he would distribute for comments. ^{xi} At first glance Nigel noted that dilation was recommended on everyone 'with long axial length' and felt this needed clarification as axial length was not measured in practice.

SpaMedica would also be able to provide cataract surgery via in alternative CCG. Gloucestershire CCG were concerned about any referrals using this route as there was no formal agreement in Gloucestershire and the SpaMedica theatres had apparently not been CQC approved yet. Ankur might be able to provide more detail at the next meeting.

12. Date of Next Meeting

Tuesday 20th April 2021 7:00pm via Zoom.

Action Points

i	Check existing Wet AMD form	Eshmael
ii	Secretary access to on-line banking	Nigel/Adrian
iii	SpaMedica contact details	Alvaro
iv	Health questionnaire comparison	Ankur
v	Dates for event planning meeting	Alvaro
vi	Set up LinkedIn and closed Facebook group	Sid
vii	Card and gift for Kerry	Adrian
viii	Introduction to Lorcan & feedback at next meeting	Alvaro/Clare/Fawn
ix	Distribute Healthy Living Practice details and contact with PHE	Alvaro
x	Confirm availability for Homeless project meeting	Adrian
xi	Distribute SpaMedica guidance	Alvaro