Minutes of LOC meeting Tuesday 16th November 2021

Present: Alvaro Borges, Nigel Harris, Sid Maher, Ian Shapcott, Adrian Street, Ankur Trivedi

Alvaro welcomed Carl Hall from Newmedica

1. Apologies

Apologies had been received from Amy Clarke and Clare Griffin.

2. <u>Nemedica Update</u>

Alvaro opened by reiterating the offer made previously to Christelle regarding helping with any referral issues.

Carl updated the committee on developments at Newmedica

In addition, Carl explained that Newmedica were planning to increase the number of incoming 'phones lines to ensure that all calls were answered in a timely manner.

Alvaro asked if 'phone consultations were still being used, Carl responded that there was a hybrid system in place, if anything was not straightforward then face to face appointments were being used, otherwise remote consultations via 'phone were still appropriate.

Nigel noted that on the rare occasion a private referral was sent little feedback was received. Carl would investigate and asked for any patient ID examples. Ankur noted that no updates had been received regarding non-NHS Referrals via Opera.

Alvaro asked about VR procedures, Carl responded that these were currently only available privately but would be used if required following other surgery.

Carl stated that Glaucoma clinics were running well and 700 low risk patients had been discharged from the Trust to Newmedica. Carl noted that Glaucoma was now the second largest referral group and that Subject Access Requests were submitted to get copies of notes but Newmedica were unable to stop patients getting further appointments with the Trust, patients would have to decline further appointments from GHNHSFT. While it wasn't necessary for Otoms to do this, Alvaro and Ankur felt it would be helpful for patients.

Nigel asked if Newmedica would accept glaucoma referrals from Worcestershire and Carl confirmed they would be accepted via nhs.net or secure fax.

Carl confirmed he was happy to be contact directly if there were any issues that needed to be addressed.

3. Declarations of conflicts of interest

There were no new declarations of conflicts of interest.

4. Minutes of last meeting

The minutes of the last Committee Meeting were approved.

5. Matters Arising and Action Points

Action Points from last meeting

i	Secretary access to on-line banking	Ongoing
ii	Distribute Healthy Living Practice details and contact with PHE	See below
<u>iii</u>	Liaise with Will Dean re Cataract CET event	Completed
<u>iv</u>	Remind Community Optoms of CAQ score requirement for cataract referral	See below
v	Try to contact PCN	Awaiting reply
vi	Contact Andy McNaught/Nitin Anand re glaucoma monitoring clinics in the community	See below
vii	Consider strategy for 2022/ Agenda items for December meeting	See below
viii	Check with NH re peer review request from colleague	Completed
ix	Promote committee recruitment via social media	Ongoing
х	Add Moderator Rules to WhatsApp groups	Ongoing ^{iv}

ii. Alvaro had identified Dino Amoretti as a possible contact at PHE and would try and get more information for the next meeting. $^{\rm ii}$

iii. Fawn reported that Will Dean had not been terribly helpful and the CET event would not be taking place.

iv. Ankur was planning to send a more general update regarding referrals which would include a reminder about CAQ scores.

vi. No reply had been received and Alvaro felt a Community Scheme may not be supported due to the patients being looked after by Newmedica

vii. Suggested items

Contract Review Revalidation Optometry 1st Optom + (higher qualifications)

6. Treasurers Report

Nigel reported the committee continued to be very well funded and was trying to find out if there was any guidance around how much money should be kept in reserve.

Nigel also shared concerns from the LOC Treasurers Meeting around the number of practices that were moving to a completely private operating model which would reduce income but also raised a question around LOC support. All were agreed that if a practice was not contributing to funds then support would not be possible. Ankur also noted that private practices were not able to be involved with Enhanced Service schemes due to compliance issues.

To try and clarify the situation in Gloucestershire Ankur suggested Nigel send out a list of practices contributing via the levy. Nigel would provide and Adrian would cross reference with the existing practice database. $^{\vee}$

Nigel concluded with the need to consider funding for the next AGM and would produce some outline income/expenditure figures for the December meeting. vi

7. <u>Chair's Update</u>

Alvaro reported that had sent an EOI for a Cyber Security webinar that had been offered via LOCSU.

Alvaro went on to say he would like a better understanding of the optical workforce in the county and suggested a workforce survey to try to find out who has what qualifications and what people are thinking of doing to advance their skills as there was an option for the LOC to provide funds to help upskill practice staff.

Adrian noted that practitioner information was very fluid and hard to keep track of, there wasn't an easy way to find out who worked in Gloucestershire and what services were offered by different practices. Sid asked if 'phoning practices would be a good way to capture data but this would potentially be very time consuming and possibly not very informative. It was suggested a trawl through various web-sites might be a good place to start.

Nigel suggested adding the database spreadsheet to Dropbox. Adrian was concerned about multiple versions but would add a user-friendly version to allow anyone to update with any information that was received. ^{vii}

Alvaro had had a meeting with the LMC who were pleased to engage with the LOC. Alvaro had observed that the majority of the committee had not heard about CUES so Alvaro would contact the CCG to ensure appropriate information was on G-Care. ^{viii}

A presentation on referrals and CUES from the LOC for GP practice staff had been suggested, though there was a concern this would increase activity for local practices without appropriate remuneration.

Alvaro had invited the LMC Chair to a future LOC meeting.

Alvaro had been sent information regarding rejected referrals for symptomless narrow angles. Ankur and Alvaro would try and find some guidance and Alvaro would ask John Everett for his opinion. ^{ix}

Alvaro had received a glaucoma patient communication from the Trust suggesting the patient was low risk and apparently suggesting they should consult their usual optician's practice. He would share for information. $^{\times}$

8. PES Update

Ankur reported that he was no longer working for Weygang's and had been appointed as a clinical lead for PES. This role was 2 days per week which should make it more effective. PES was also working on splitting England into three areas to facilitate more team working to improve response times further.

He noted there were still some issues around payments from PES and had heard some information had been shared with Worcestershire which detailed how PES had been let down by a provider and

there had been some issues around some payments from various bank accounts. Ankur had suggested to PES this would be helpful of shared more widely.

9. <u>CCG GOS Meeting</u>

Alvaro reported that he had a meeting regarding the ICS holding the GOS funds which was due to be implemented In Gloucestershire in 2022. There was a possibility that the ICS could change the GOS contract though apparently the advice to ICSs was to keep with the current arrangements.

10. COL Update

Alvaro had been told that funds would hopefully be available this month with initial trials set for December. Dermot Keogh would lead for Primary Care, Adrian Blaisey for Secondary Care. A request had been made for possible key metrics for the service evaluation, any suggestions to be sent to Alvaro. ^{xi}

11. Any Other Business

Ian mentioned that the old website could still be accessed. It was agreed Ian should request it be taken down completely. $^{\rm xii}$

12. Date of Next Meeting

Tuesday 14th December 7:00pm

Action Points

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i	Secretary access to on-line banking	Adrian/Nigel
ii	Contact from PHE	Alvaro
<u>iii</u>	Referral updated e-mail	Ankur
iv	SM/WjhatsApp updates	Sid
v	Levy payees cross reference	Nigel/Adrian
vi	Income/expenditure outline	Nigel
vii	Add community database to Dropbox	Adrian
viii	Check with CCG re CUES information on G-Care	Alvaro
ix	Guidance on symptomless narrow angle referrals	Alvaro/Ankur
х	Share low risk glaucoma patient letter	Alvaro
xi	Suggestions for COL key metrics to Alvaro	All
xii	Take down old web-site	lan