

## Minutes of LOC meeting Tuesday 26<sup>th</sup> July 2022 – via Zoom

Present: Matt Bellamy, Alvaro Borges, Amy Clarke, Nigel Harris, Carole Jenkin, Sid Maher, Ian Shapcott, Adrian Street & Ankur Trivedi

### 1. Apologies

There were no apologies

### 2. Declarations of conflicts of interest

There were no new declarations of interest

### 3. Minutes of last meeting

The minutes of the last Committee Meeting were approved.

### 4. Matters Arising and Action Points

Amy confirmed that she was officially now a Contractor.

Carole proposed that Adrian continue as Secretary, Nigel seconded, all agreed, and Adrian was re-elected.

#### *Action Points from last meeting*

i.	Contact Sid re availability to deliver posters	Completed
ii	Research Strategy Day Venue	Completed
iii	Re-send Glaucoma OSCE/FB Workshop survey	Ongoing
iv	Circulate GOC Call for Evidence Survey	Completed
v	Book Zoom Meeting 12th July 7pm	Completed
vi	Share LOCSU Jargon Buster document	Completed
vii	Arrange meeting with Tetbury Hospital new CEO	Ongoing
viii	Send short biography details to Ian for website	Completed

ii. Matt confirmed Puckrup Hall in Tewkesbury had been booked for the Strategy Day on the 6<sup>th</sup> of September and that no payment was required at present.

iii. Alvaro would send the survey with the Newsletter he was preparing.

vii. No response had been received from Tetbury Hospital

### 5. Treasurer's Report

Nigel reported that the committee was still well funded, the levy should reduce next month (though he was currently locked out of the Treasurer's PCSE account so would confirm as soon as possible<sup>1</sup>) and the VCHP Gloucester payment had been completed so the bank accounts had now been rationalised to just one.

Nigel updated the committee on a recent LOCSU Treasurer's call, HMRC's advice was that Officers should be paying Tax and National Insurance on expenses at source, Nigel was waiting for draft guidance but wanted to get views from the committee on the best approach.

Alvaro reported that he had information from a Chair's meeting that the HMRC guidance was not new, but LOCSU had taken some independent advice and confirmed Officers should be paying Tax and NI, but other committee members were unlikely to exceed £1000 per year which would not need to be declared.

A suggestion had been made to employ a regional bookkeeper to help if this was to be implemented to share the costs but there was a question around the legal status of the LOC and therefore any registration process was not clear. It had been confirmed that Officers were not LOC employees so there was no liability for holidays, sick pay etc.

It was agreed to await further guidance from LOCSU.

Alvaro suggested confirmation of the VCHP payment be included in the newsletter which everyone agreed was a good idea. <sup>ii</sup>

## 6. Chair's Update

Alvaro reported that the Community Ophthalmic Link was due to start a County Wide roll out shortly, early data was limited but very positive, it suggested referrals were avoided around 50% of the time. Jonathan Cherry from the Trust IT Department would provide onboarding documentation and support for practices, though there may be issues with the chains allowing the software to be downloaded onto their computers.

Alvaro had discovered from the PCG meeting that the Trust were rejecting some referrals, possibly inappropriately which needed to be investigated.

The ICS wanted to introduce Patient Initiated Follow-Up for cataract surgery (only for the Trust, not the Private Providers) but the CPG were not keen on this approach. Utilising CUES had been suggested but there were potential difficulties with this approach such as record sharing.

The ICS needs to appoint a Primary Care Lead, Alvaro thought it was likely to be a GP, but nothing had been confirmed as yet. Alvaro noted that the LOC would need to work closely with the PCL to ensure Optometry was represented.

From the NHSE Regional Meeting NHSE want to introduce annual QiO reporting but this had not been agreed nationally. The Southwest Eyecare Transformation Board wanted to use more direct referral templates but had not offered any extra funding, so Gloucestershire had pushed back on this point.

Alvaro would keep the committee updated on any further regional developments.

£45,000 funding had been authorised for the Workforce Upskill initiative (Appendix 1, summary of responses at Appendix 2) and the details needed to be worked out. It had been suggested by Megan Terrett (Appendix 3) that practitioners pay their fees up front and then claim an agreed amount back, possibly from the LOC, after completed a Memorandum of Understanding. Adrian would research appropriate wording for a MoU. <sup>iii</sup>

The IP course was more expensive at £3.7k compared to other modules at £1.2k, the 28 responses would be more than the agreed funding. Amy noted that Worcestershire funded a flat rate for practitioners regardless of the course and this was agreed for Gloucestershire to be the most equitable option. Alvaro would send an update County wide. <sup>iv</sup>

Cardiff had offered some courses but not enough for all, Nigel would check with Aston to see if there was any capacity available.<sup>v</sup>

Alvaro asked for someone to take a lead on eyecare for those with Learning Disabilities, the NHSE scheme for providing eyecare in Special Schools had been suspended but had never started in Gloucestershire anyway. Nigel suggested a discussion at the Strategy Day, which was agreed, Adrian would start a provisional agenda for the day.

There was no news on the FoD in-patient service and Alvaro had distributed the cataract surgery waiting times County wide. Alvaro had also noted that there were different amounts on different documents for mileage claims. Adrian would check back on the minutes and confirm.

#### 7. PES Update

Ankur had nothing new to report.

#### 8. Direct Referrals

A query had been received from a Gloucestershire GP regarding direct referral, the GP thought all Ophthalmology referrals should be sent directly. There was currently no formal guidance and Alvaro felt the option of referring to GPs needed to be kept open.

An issue with rejections of referrals to the CBO with a GP copied in had also been noted, there didn't seem to be any mechanism in place to notify the relevant Practitioner of any rejections and Ian note that some GPs didn't want direct referrals. It was agreed some advice was needed for colleagues and Alvaro would contact the LMC to discuss the issue.

#### 9. Recaptcha Settings

There had been some odd enquiries via the website and Ian had upgraded the Recaptcha settings on the enquiries@ e-mail which seemed to have improved the situation.

#### 10. Supplier Presentations

Adrian had received requests from suppliers to present at committee meetings which it was agreed was not the best use of time. It would be more productive for suppliers to attend any wider meetings and presentations, though since Fawn had stepped down there was no 'CPD Officer' or similar looking after these events for supplier enquiries to be referred to. It was agreed to add this to the Strategy Day agenda.<sup>vi</sup>

#### 11. Any Other Business

Nigel had received a letter from BRH that he felt was inappropriate (Appendix 4). Ankur suggesting liaising with Avon LOC, but Amar was currently on leave. Nigel would respond suggesting a referral to Ophthalmology would be more appropriate similar to a patient taking hydroxychloroquine.

Alvaro would like the LOC to send a regular newsletter, the process would be discussed at the strategy day along with an updated Needs Analysis.<sup>vi</sup>

Nigel mentioned the EDI survey he had received from LOCSU, it was agreed all committee members should complete this if they had not already done so.<sup>ix</sup>

Adrian and Nigel agreed to forward any future LOCSU communication as not all committee members seemed to be receiving items directly.

Alvaro asked if anyone had anything they would like raised at the LOC Regional Meeting he was attending shortly? Nigel wanted to say 'thank you' for the Treasurer's calls and suggested something similar be set up for Secretaries.

#### 12. Date of Next Meeting

Tuesday 23<sup>rd</sup> August 2022.

Strategy Day agenda to be agreed.

#### *Action Points*

i.	Confirm levy reduction	Nigel
ii	Newsletter item re VHCP	Alvaro
iii	MoU wording	Adrian
iv	Workforce Skills update	Alvaro
v	Aston Capacity	Nigel
vi	Strategy Day agenda	Adrian
vii	Mileage claim amount	Adrian
viii	Contact LMC re direct referrals	Alvaro
ix	Complete LOCSU EDI survey	All

## APPENDIX 2

Practitioner name	GOC Number	Which post-graduation module would you like to apply for?
S. K. Maher	D-15002	Professional Certificate in Low Vision (Prof Cert LV)
Lauren Thomas	01-32480	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Poonam odedra	01-23300	Independant prescriber (IP)
Fawn Bennett	01-24517	Professional Higher Certificate in Medical Retina (Higher Cert Med Ret)
Kerry Irvine	01-22513	Independant prescriber (IP)
Kerry Irvine	01-22513	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Jaymin Joshi	01-28655	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Rachel Reeve	D-33883	Professional Certificate in Low Vision (Prof Cert LV)
Andrew Partridge	01-16708	Independant prescriber (IP)
Sudip Chauhan	01-28624	Independant prescriber (IP)
Zoe Herbert	01-21725	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Ankur Trivedi	01-19538	Professional Higher Certificate in Glaucoma (Higher Cert Glaucom)
Rachel Reeve	D-33883	Professional Higher Certificate in Low Vision (Higher Cert LV)
Amy Clarke	01-21130	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Dermot Keogh	01-16817	Independant prescriber (IP)
Suleman Topia	01-27687	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Nigel Harria	01-13471	Professional Certificate in Medical Retina (Prof Cert Med Ret)
James Turner	01-23725	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Tristan Lowes	01-29337	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Tristan Lowes	01-29337	Independant prescriber (IP)
Steven Crawford	01-23375	Independant prescriber (IP)
Lubna Moola	01-29584	Professional Certificate in Glaucoma (Prof Cert Glaucom)
Sobia Dadabhoy	01-26600	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Azizabibi Suleman Kharodia	01-25695	Professional Certificate in Medical Retina (Prof Cert Med Ret)
Susannah Dear	01-32140	Independant prescriber (IP)
Miss Navjeev Rai	01-22237	Professional Certificate in Glaucoma (Prof Cert Glaucom)
Alvaro Borges	01-27247	Professional Higher Certificate in Glaucoma (Higher Cert Glaucom)
Adrian Street	D-4716	Professional Certificate in Low Vision (Prof Cert LV)

Hi Alvaro,

I managed to speak with Kerry and she agrees with the process you mention about gaining a MOU from the practitioners and the LOC.

So in summary you can feedback back to the LOC the following:

- Practitioners will be required initially to pay for the course themselves,
- In order to receive reimbursement for the course fees they will need to agree and sign a MOU with the Gloucestershire LOC which you are going to draft up,
- Once the MOU is in place then the practitioner will either be reimbursed by the ICB or LOC depending on whether the funds can be transferred to an LOC account.

Hope that is okay, I will chase up with Sophie Atkins who is the HEE liaison person about transferring the funds to the LOC and start drafting up an MOU between yourselves and the ICB.

Best wishes,

**Megan Terrett MSc BSc (Hons)**

Service Improvement Manager

NHS Gloucestershire