Avon LOC

Committee Meeting

Monday 05 April 2023

1830

Newmedica Conference Room, Aztec West, Bristol

Record by:

Carolyn Hudd

Approved by:

**Attendees:**

Amar Shah, Mark Humphrey-Ali, Andrew Edwards, Andrew Pinn, Carolyn Hudd,   
Mona Thacker, John Hopcroft, Jenny Bowker (ICB), David Jarrett (ICB)

**Apologies:**

Amy Hughes, Lynne Fernandes, Jenny Ogidi

**Changes to Conflicts of Interest**

None

**Minutes of the last meeting:**

Minutes were approved unanimously

**Actions Agreed at the last meeting**

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| **LOC Member** | **Action** | **Progress** |
| **Committee** | Provide PAYE details to Andrew Pinn | ✓ |
| **Mona Thacker** | Explore Organising an all-day CPD event with LOCSU | In Progress |
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1. **Background & Engagement with the ICB – Head and Deputy Head of Primary Care**

The meeting was attended by David Jarrett (Head of Primary Care, ICB) and Jenny Bowker (Deputy Head of Primary Care, ICB) as a committee awareness exercise and gave a presentation to explain the changes that have taken place since the disbanding of the CCG and the creation of the ICB. Both parties previously worked for the CCG and stated the change in attitude towards integrated care and the concept of all partners working together for better population health and access to services.

BNSSG’s Integrated Care Service is based on the ’Healthier Together’ Network which has been in place for some time now and joins up healthcare for individuals to include physical health, mental health and social care.

See slide 4 of the attached presentation to view the BNSSG Health and Care System by numbers. The integrated care systems are designed to improve the health of the population, reduce inequalities of care, make the most of pooled resources, and support wider social economic development in the community.

Please see slide 6 for more information on how the Integrated Care System is organised.

David and Jenny sit on the ICB Care Board and is a key player in the chain of approving new services.

The delegation of the NHS contract to the ICB’s in July 2022 has seen a greater ambition to improve eyecare services in the community. It has enabled a fresh start that is focused on improved patient experiences and therefore implementing new services outside of hospitals and into the community. The committee has worked hard to make optometry a point of focus and now has specific goals to work towards in the ICB 5 year strategic plan of which CUES, referral refinement and national ERS will be the focus, subject to board approval.

David and Jenny will be meeting shortly with Amar and John to brainstorm which service to start with but this is likely to be the implementation of CUES due to the vast amount of data available for its justification.

David encouraged the LOC to engage with other partners and committees to develop relationships and move forward in prioritised manner that compliments each other.

Amar reiterated the importance of engaging properly with the ICB. The new process of working is far more open to change and development using the highly skilled workforce already available to them in the community. Andrew Pinn voiced the need for realistic payment of enhanced services to ensure acceptable coverage across the area.

John has also been attending PCOG meetings, an operationally based group that funding for Optom services can also fit into. All updates will be added to Teams to keep the committee up-to-date.

**AGENDA**

* 1. **LOC Website**

Mona asked if the LOC minutes could be added to the website.

**Action: Carolyn to upload missing minutes**

* 1. **LOC PAYE**

Andrew spoke of a member of the committee unwilling to give the PAYE details for payment. The committee have asked Andrew to get written clarification that the member will not be requiring payment for work done for the committee. It was agreed that to protect the interests of the committee from any action taken from HMRC, all members need to be engaged with the PAYE system.

* 1. **AGM**

The AGM will take place on June 15th at Bristol & Bath Science Park, Emersons Green, Bristol. Current Eventbrite ticket sales are just under the 60 person maximum.

* 1. **Microsoft 365**

The committee will now only use Microsoft 365 for communication. Eventually the committee will move away from using Whatsapp and use the Teams Chat facility to discuss topics. This can be filtered into topics and makes it much easier to return to an earlier conversation.

Meeting documents, summaries and schedules will all be posted here – all of which will allow questions from any committee member and the resulting response.

At the end of the meeting John Hopcroft gave the committee a quick tour of what Teams can do. John may have a link he can share to help in getting used to it.

**Alternatively, YouTube has many tutorials like this one for beginners (generalised)**

[**https://www.youtube.com/results?search\_query=https%3A%2F%2Fyoutu.be%2F8310MPSTYvU**](https://www.youtube.com/results?search_query=https%3A%2F%2Fyoutu.be%2F8310MPSTYvU)

1. **NHSE SW (AB)**

NHS Meeting for the SW are ongoing and representation it important. John attended today on Teams. John commented to them he would rather have a bimonthly meeting the frequent cancelled meetings. The meeting was better attended. John has given a written update on this meeting in Teams. The meeting included a presentation from the person leading the pilot for the ERS in the Southwest. Devon & Cornwall are using a plugin key to login in directly and refer patients straight into the NHS system. This is different to the eERS solutions that involve an outside provider. The benefits are that there are no cross-border issues. They want to expand this system massively and it will begin to include Somerset. There will then be 170 Optoms testing this system.

Somerset will be taking on the Southwest team for one year. This will involve a restructure. Beyond the year, all the ICB’s will have a chance to tender to be the host.

QiO – Current cycle is April 2022- March 2025. There was a strong view from the NHS SW team that they want the providers to complete their submissions by December this year. This gives them enough time to audit and flag non-responses and to arrange in-person visits. All those that didn’t submit in the last cycle will only be given until July this year to submit. The LOC have asked to be cited into any comms relating to visits so as to provide support. Alvaro was asked to consult with LOCSU to ensure the shortening of the deadline is reasonable.

1. **BNSSG**

**Bristol Eye Hospital –**

Post-Op cataracts is now live everywhere in BNSSG with Eye Hospital, SpaMedica being done via the Medisoft portal for clinical feedback and then either spreadsheet or individual invoices to the ICB for payment. Both Newmedica and Practice Plus Group can stay on Opera for the post-op cats and will get paid via the opera system. If you see a patient that has been seen by one of those and you know you are Opera registered you are able to email the provider and ask them to be discharged to your practice. Fees are at £43.

Glaucoma scheme are still looking for more people. More people will be discharged to community once there are more signed up to the scheme. Payments are still awaited.

**ACTION: John/Amar to contact Sarah Swift for an update**

Medical Retina Referrals & Hot Disks –

BEH agreed bid for a £30 referral fee. The bid went in on the 1st June 2023. The bid includes some extra funding for its setup.

PCB (Primary Care Board) – Jenny & Dave suggested it’s important the LOC are represented at the primary care board (led by Onecare – Local Federation of GPs – not the LMC).

Onecare were paid £5 million during David Cameron’s era to set up and begin the collaboration and compilation of a tube map showing every practice in the area geographically.

This is something the LOC would find incredibly useful to initiate services in particular areas and provide a better vision for strategy especially when committee roles change.

John suggested Alvaro was going to see if PCSE would have some data they could provide us. Andrew Pinn stated he could get data from the levy by using the ODS codes.

**ACTION: Andrew to show Carolyn how to read the ODS codes for beginning the map. John to collaborate with ODS look up.**

1. **BANES**

BSW conversation has started. We have met with the GP lead for the ICB and process is at its infancy. If people want to get involved, it’s a good one to learn from and commit to. The next meeting is on 08/06/23.

1. **PES – Amy Hughes**

None

1. **AOB**

* Onecare Proposal - Onecare (Local GP Federation) have offered support in creating a collaborative staff group to do project work. For example, Diabetics cross all areas of services and would it be possible for different groups to flag or directly refer into hospitals when for example, some patients have refused to go to diabetic screening.

Onecare want to propose to the ICB that a Primary Care Partnership Development Team is necessary. This would consist of each 5 areas (Pharmacy, Dental, Optometry, GPs) having a Project Development Post, managed by a Primary Care Business Development Manager (possibly a Onecare Recruit) to be tasked with specific short term and long-term goals as stated in the attached proposal.

This would involve proper recruitment to the role.

John questioned if the ICB be willing to offer some seed funding for this purpose to all PODs to help set up this system? And how would we use that money? He saw three options:

1. Hire something as an LOC to do the mapping, and scoping out opportunity and building relationships.
2. Give money to PES and ask them to do it on our behalf
3. Give money to Onecare to do it on our behalf.

More information is needed.

**ACTION: Committee – Digest the proposal and feedback with suggestions.**

* Please can any committee member able to offer time to attend meetings regularly and able to develop relationships and commit to a cause let the officers know. The load needs to be shared and anyone able to attend will need to get up to speed quickly.
* John Hopcroft -Specsavers requested to meet the LOC as it is a flagged area that has very little commissioned services. John met with their lead, Richard Curtis, to discuss what we have been doing. He has offered to give the LOC data to help with those conversations particularly in terms of geography.

**Date of Next Meeting**

07 August 2023 – Newmedica, 630pm

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| **Name** | **Action** |
| **Carolyn** | **Upload LOC Minutes to Website & Teams** |
| **John/Amar** | **Contact Sarah Swift for an update on Glaucoma service** |
| **Andrew Pinn** | **To show Carolyn how to interpret ODS codes from levy for Tube Map** |
| **Committee** | **Digest Onecare Proposal and Feedback (On Teams under Committee folder)**  **https://locavon.sharepoint.com/:w:/s/Committee/ER6d2vjHHEhPt4-1gvNwqc4BV8O34Lh6cx44mEh6QpmrGw?e=973Nsd** |  |