Avon LOC

AGM

&

CPD Event

Monday 13 May 2024

Engineers House

Bristol

**Committee Attendance**

John Hopcroft, Amar Shah, Andrew Pinn, Amy Hughes, Lynne Fernandes, Carolyn Hudd, Andrew Edwards, Mark Humphrey-Ali

**Apologies**

Mona Thacker

**Minutes of the last AGM**

Agreed and approved (Proposed and seconded)

**Matters Arising**

None

**Chair’s Report**

As you know the LOC is the statutory body representing providers and contractors to the NHS system locally. As a small group we have a dedicated group of elected committee members striving to do this. I would like to thank all of the committee whose hard work has enabled some of the progress that we have recently seen in our area. I would also like to thank the committee previous chair Amar Shah for helping to navigate through post-COVID and also strengthening some of the key relationships we have today in the system. The recently formed ICB’s have also been establishing themselves and re-structuring in response to budgetary constraints. As you know Optometry as with other primary care services are a delegated function. We continue to represent you at ICB level through various forums including the primary care committee where all key decisions for GP’s, dentists, pharmacy and optometry are made.

The committee has had a number of focuses, including bringing more commissioned primary care services into the community. We are starting to see green shoots with the new macular referral pathway and we hope to build on this success over the next year. The macula pathway is as a result of the LOC working with the system and Bristol eye hospital (BEH) to establish new sustainable, funded pathways. The first pilot of this is the new proposed macula referral pathway enabling referrals form community, including full DICOM OCT data, directly using the Opera platform which connects to the hospitals chosen system. The aspiration is that this will allow more pathways to be added and save face to face appointments at the hospital itself. In addition, this could also allow us to develop two-way image sharing, allowing new services from the hospital into community as well as access for practitioners to see more information on their patients when making decisions for example about referral.

The committee continues to focus resources on events that we feel can make impact, including the jointly hosted CPD event with Bristol eye hospital, which had great turnout and feedback. Recently a committee member attended the UWE conference to be able to talk to undergraduates about the important role that the LOC plays locally. We will continue to listen to your feedback on these and plan accordingly.

Our LOC also covers Bath and North East Somerset locality which is the only part of our area that currently has a CUES service commissioned. The service has been running for a number of years successfully and is currently under review and tender by the ICB. We are concerned that this CUES system redesign had been undertaken without extensive involvement of the LOC and have expressed those concerns with the ICB itself. We will continue to work with the ICB on any planned changes and advocate for the vitally important role of primary care in the system.

Last year the ICB proposed to move to a single model for post-op care in BNSSG and started working with ISP providers to do this however with changes in the internal structures this did not come to fruition. Currently nearly all ISP providers in Bristol, North Somerset & South Gloucestershire (BNSSG) use the Opera platform to offer post op care in the community and we are working to enable these services in North Somerset. BNSSG ICB continues to manage the contract for BEH post-op through Medisoft and we continue to work across the system on this.

Finally as a committee we have started to reflect on this year’s priorities including further work on engagement and continuing pathway work. We value your feedback so please do let us know your thoughts and questions. If you would like to get more involved or attend any future committee meetings then please do reach out to us.

Treasurer’s Report

I continued the treasurer’s role from January 2023 to today. My remit was to manage the incomes and expenses of the Avon LOC. The figures in the accounts cover activity for the period 1st January 2023 to 31st December 2023. Avon LOC income for the period was £7,516.69; this was almost all from the statutory levy. The statutory levy is deducted by NHS England as a percentage from the NHS GOS sight test fee prior to payment to GOS contractors. The Avon LOC proportion of the statutory levy remained at 0.0% until 30/09/2023 then reinstated to 0.06% for the remainder of the period in line with my recommendation to the committee reported at the 2022 AGM. Avon LOC actively monitored its financial surplus and reintroduced its proportion of the statutory levy as the level of surplus was judged to be appropriate. The proportion of statutory levy paid to continue our membership of LOCSU (LOC Support Unit) remained at 0.5%. Expenditure by Avon LOC was £32,780.46 which was higher than previous years. Compared to last year: There was paid attendance at National Optometric Conference. Expenditure on our comms (website fees etc) was more as we adopted a more developed and inclusive way of working through Microsoft Teams. Expenditure on CET was more as we provided a Peer Review event at our AGM and the Wellbeing Workshops. The cost of CET was mostly offset by sponsorship. LOC work was carried out by individual committee members and our administration secretary Carolyn Hudd. Support from LOCSU (LOC Support Unit) was provided as part of our continued LOCSU membership. The hourly rate for committee work remained at £80.00 per hour. Committee member attendance at LOC committee meetings is funded which is in line with the practices of other LOCs in England. In my view the time costs paid to committee members in the last year were an accurate reflection of the work undertaken. I would like to thank Carl Becker Hughes for independently examining the LOC accounts. I am happy to answer any questions you have either now or at any time throughout the year. I can be contacted by email at [andrewp@avonloc.co.uk](mailto:andrewp@avonloc.co.uk)

In respect of the continued membership of LOCSU, there has been no attention, objections or issues raised by any local contractor or performers to indicate the community are unhappy to continue with their membership. So the levy will stay in place.

**Elections to Committee**

There were three committee members up for renewal. Their applications were unopposed and therefore were re-elected unopposed. There are still 3 remaining positions on the committee. Anyone is welcome to contact the committee if they have an interest in joining. Come and observe at a meeting, find out more about what’s involved and get access to free training from LOCSU about the role you would play on the committee.

**LOCSU Update**

Alvaro Borges, LOCSU Lead, led a presentation to increase awareness of how LOCSU support the LOC and retrospectively the contractor and performer.

**AOB**

Amy Hughes – Asked delegates to let the LOC know what they would like to see on the website and suggest anything they think would be helpful. Similarly, if there are useful platforms that they think could help with communication then please do let the LOC know.

A new provider has been appointed by BNSSG for all primary care practitioners and practice staff to access Health & Wellbeing services. Please keep an eye on our website for more information.

**Adam Ross – Retinal Disease and Imaging CPD event**

Adam Ross is a Consultant Ophthalmologist with a sub-specialty interest in cataract surgery, including micro-incision with premium bespoke intraocular lenses, complex cataract surgery,  retina and uveitis.

Mr Ross received training in New York and Washington, DC and has an extensive background in teaching, training and research.

His main clinical practice is based at the Nuffield Hospital in Clifton Bristol as well as at the Bath Clinic.

This lecture will focus on an update on retinal disease and imaging. We will explore the use of OCT and other imaging techniques in routine clinical practice and discuss the detection, assessment and further management of patients with retinal disease.