



**Minutes of the Annual General Meeting of the Cheshire LOC
held remotely on 31st March 2022**

Present: Committee Members

Fionnuala Stott Chairperson
Phil Cooke Treasurer
Amy Thompson Secretary
Lyndon Thompson
Jane Smellie
Jill Umpleby
Harinder Notay
Andy Riley
Stephen Halpin
Cahir Mullan
Fionnuala Kidd
Chris Houghton

Sandie McBennett Administrator

1. Welcome by the Chair, Fionnuala Stott

The Chair welcomed all to the meeting.

2. Apologies for Absence

Apologies for absence were received from Philippa Longmore, Laura McCall, Cathy Tripp and Christine Boyd.

Resolved: that apologies for absence from the above named be accepted.

3. Minutes of the 2021 AGM

Proposer: Lyndon Taylor, Seconded: Amy Thompson.

Resolved: that the minutes of the 2021 Annual General Meeting be confirmed as a correct record and signed by the Chair.

4. Matters Arising

No matters arising were noted.

5. Chairman's Report

Fionnuala Stott, Chair, report received.

In the last year there were 3 CCGs merging in Cheshire, however, there was news that there would be an ICS covering the whole of Cheshire. The LOC continued to work on behalf of members to establish pathways and the relationship with the Trusts, although in the last year attention had turned to the ICS (Integrated Care Scheme). It was a long term plan that every part of the UK would be part of an ICS in an effort to bring health and care together and breaking down boundaries.

The Chair reported it was vital that all practices follow the pathways.

The committee had been working on the following throughout the year:

- Andy Riley had attended the Eers Meeting to move GOS 18 onto the electronic referral system.

- Amy Thompson had kept the website up to date to bring the latest news to members. Amy also worked alongside Rebecca Ireland to introduce a Post Cataract Pathway in Macclesfield.
- Stephen Halpin had worked on the CUEs support.
- Glaucoma – the NHS had awarded £0.5m to Cheshire and Merseyside to run pilot studies on Glaucoma. 1000 low risk glaucoma patients had been released into a pilot study. Thanks were noted to all practices who had been involved.
- Jane Smellie and Hari Notay both hold Glaucoma qualifications which had been very helpful to consolidate the service.
- Jill Umpleby had worked hard to bring CPD to the membership.
- Jane Smellie had continued to lead on the Learning Disability Pathway (PwLD).
- Fionnuala Kidd had brought LOCSU experience to combine a dual role.
- Lyndon Taylor continued to offer his breadth of knowledge.

Apologies were noted for the late decision to take the AGM on line instead of in person, this was due to a spike in Covid cases.

Thanks were noted to Rebecca Ireland in her role as CGPL; she had worked hard for members, especially regarding resolving the payment problems.

The Chair wished to thank the committee for all their work and time commitment during the year.

Amy Thompson gave an overview on the Macclesfield Post Cataract Pathway. In recent years, post cataract needed to be referred on GOS18 to GPs and then a call for the patient would inform the practice that the patient would need to be seen within 2 weeks before a return to Macclesfield at 6 weeks post op.

The LOC had tried for many years to engage with East Cheshire CCG and the Trust at Macclesfield which was finally bringing a result. It was hoped there would be a post cataract service within the next few months. It would be on Opera in the same way as other areas and pathways. Also pushing for the electronic discharge so patients would be discharged to practices on Opera.

Andy Riley reported on Eers. It was planned to bring Eers into practices in 2022 through Opera. One system for everything. It would include delivery receipts to show when the referral had reached the trust and the ability to book to particular clinics. The system would also have the potential for advice and guidance to obtain an opinion from an ophthalmologist in the future. There will be an API (Application Programme Interface) to allow practice management software to interact with Opera. The LOC had pushed from the start to have an feedback post referral as a feature.

Jane Smellie reported on the Learning Disability Pathway (PwLD). The pathway had been launched before the pandemic and therefore suffered a hiatus during that time. Post pandemic, the pathway was still open and had been expanded to include autism and was live on Opera. The fee was £56, proving it was very worthwhile for practices to become accredited to provide the service. The service had been launched in Lancashire and South Cumbria also, which completed the North West coverage. Practices who wished to become involved in the PwLD pathway should contact the LOC to obtain a WOPED code.

6. Secretary's Report

Amy Thompson, Secretary, report received.

The Secretary reported the committee had met 4 times; March, June, November and February. 1 CET event been provided. Further meetings held were on the topic of Atrial Fibrillation with NHS England; the AT pilot was running trying to lower the stroke risk throughout Cheshire, thanks to all Cheshire practices involved in the pilot. CLOC had assisted in the Glaucoma Enhanced Service Launch. A few practices had been involved in the Carbon Neutral Study; a report would be circulated shortly.

Thanks were noted to Mark Simpson who had resigned from the LOC; Mark had served on the committee for 7 years in various roles as CGPL, Website Officer and Secretary.

Welcome to Cahir Mullan on joining the committee.

7. Election Result

David Knowles acted as Returning Officer for the 2022 Election; in 2022 there were 2 Contractor seats elections and 2 Performer seat elections. The Contractor and Performer elections were uncontested; therefore, the following nominations for Cheshire LOC members were agreed: -

Contractors: Andy Riley and Cahir Mullan

Performers: Stephen Halpin and Lyndon Taylor

8. CET Officer's Report

Jill Umpleby reported it had been very difficult to get approval for the presentations, it had proved more difficult than under the old system. The planned presentation from Dan Nguyen would be postponed until a later date. The change in the CET/CPD system had begun in January 2022 with a 3 year cycle. The main points to note were that 36 points would need to be obtained as before, for OO, DO or CLO and 54 points for speciality prescribing optometrist. The points were awarded across 4 core domains: professionalism, communication, clinical practice, leadership and accountability. For those who hold a speciality registration, points from a 5th domain would be required. OO, DO, CLO would all be responsible for documenting their own CPD.

9. Treasurer's Report

Report received. The Treasurer, Phil Cooke gave an overview of the accounts; the levy fee had increased significantly in year due to the pandemic. Fees were slightly down, as were expenses due to remote meetings. LOCSU fees had increased. In anticipation of increased meetings with primary care stakeholders, at the September meeting the Committee voted to increase the levy from 1% to 1.25% to keep abreast of costs.

Thanks were noted to David Knowles for his oversight of the accounts.

10. Approval of 2021 Accounts

Proposer: Stephen Halpin, Seconded: Fionnuala Stott

Resolved: that the Cheshire LOC 2021 Accounts be agreed.

11. Vote on the Following Resolutions: -

Vote on the Following Resolutions: -

a) **Resolution 1-** to set the statutory levy on all NHS sight tests at 1.25%

b) **Resolution 2-** to give the Cheshire LOC a mandate to vary the statutory levy by no more than plus or minus 0.5%

Resolved: following the vote with those present, all in favour that the Resolutions 1 and 2 were agreed.

12. Adoption of the 0.5% contribution to the LOC Support Unit for 2022

Resolved: following the vote with those present, that the adoption of the 0.5% contribution to LOCSU was agreed.

13. Appointment of Account Inspector for 2022

The Chairman wished to note Cheshire LOC's thanks to David Knowles for his work and oversight during the past year.

Resolved: that David Knowles be appointed the Account Inspector for the Cheshire LOC for the year 2022.

14. Primary Eyecare Services Limited Report

Stephen Halpin gave background on the CUES reports. 40 practices across Cheshire participated in the service. In October 21 – December 21, 2366 episodes were recorded in those 3 months; 96% of patients would recommend the service; the service was well supported by GPs, Pharmacists and all primary and secondary

care colleagues. Of the 2366 episodes, 76% were managed in the practice; 14.2% were referred to the hospital as urgent; 5.3% were referred to GP, 95.2% were seen within 48 hours (on target). No serious incidents and no complaints.

The top 10 conditions presented were:

- PVD - 313 patients
- Dry eye – 172
- Subconj haemorrhage
- Migraine – 114
- No pathology identified – 110
- Bacterial conjunctivitis
- Meibomian cyst
- Corneal abrasion
- Floaters
- Foreign bodies

In addition, 45 retinal tears, holes or detachments were found.

The more practices to be involved, the better the network of practices offering CUES works.

15. LOCSU

Report received from Fionnuala Kidd.

The NHS had gone through significant change. As a result of the long term plan and the White Paper, there would be a greater driver for co-operation rather than competition. Previously, there had been a separation between the Commissioners and the Trusts/Providers; as a result the action would be to allow greater sharing of information. CCGs would be replaced by the ICS, for this area that would be all of Cheshire and Mersey (5 LOCs). The 5 LOCs work well and communicate effectively.

The GOS contract that is currently held nationally would be moved to ICS level.

The answer to the success of these plans would be Optometry First; the Royal College of Ophthalmologists conducted a study to look at the growing demand – a 40% increase was predicted. The solution to meet the demand would be Optometry First which would provide a first response care service in primary care and better continuity of care for existing conditions. Optometry First supports the long term plan and secondary care's idea to have care targets to improve patient care to put patients at the heart of the whole service.

16. Any other Business

The Chair asked for questions from those present:

Q: Debbie Blaney asked about diabetic screening; there seemed to be less and less practices doing screening. The funding was poor. What is the LOCs opinion on the service?

A: The Chair agreed the service was poorly funded for what was involved although the LOC were not involved in the service: it was run by Public Health England.

The Chair thanked all those who had attended the remote AGM and requested feedback on the subjects and actions the LOC had taken over the year.