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***Minutes for the Dudley LOC Committee Meeting held at 6.30p.m. on Tuesday 10th October 2023***

**Held as a Zoom Meeting**

**Committee in Attendance**

Shamina Asif (Chair) Paul Sidhu (Secretary), Mark Tuffin (Treasurer), Charles Barlow, Shazad Mahmood, Ameerah Riaz Ahmed, Qadar Baz, Rosie Birhah, Sonia Tyrell, Nicky Ferguson, Hussnan Ejaz, Gurdeep, Amir Afzal

**1. Apologies**

Sheena Mangat, David Wright

**2. Declarations of Interest**

Hussnan informed the Committee that he no longer performs Diabetic Screening.

**3. Minutes of the Previous Meeting**

ST proposed and RB seconded as a true and accurate record.

**4. Matters Arising from the Minutes**

* CB received a report from Sonia about Diabetic Screening issues – more contained in CB’s report
* NF still chasing an answer re VR at Russells Hall
* PS discussed various solutions with CB – covered in Secretary’s Business.

**5. Correspondence**

PS received correspondence from Mary Bairstow at Jigsaw who are interested in supporting corporate links with Optometry. Looking to speak at a forthcoming Committee meeting if possible. Amir (Low Vision lead to follow this up. PS to forward details to Amir for him to follow up.

ACTION: PS/Amir Afzal

CB informed the Committee that there is a Tender out for Childrens Vision Screening in the local area. Dismissed due to lack of funding.

**6. CUES Update**

Covered in CB’s report (no meetings held since last LOC Meeting)

NF commented on the late payments of some CCGs. It was suggested that Nicky pick this up with Wasim.

**7. NHS Update**

PS to change this Agenda item to GOS Updates in the future as he feels NHS Update is too wide ranging.

ACTION: PS

All other relevant information is covered in CB’s report.

**8. Chairs Business**

8.1 Extended Primary Care Services

Ophthalmology meetings – there was a discussion around BMEC and referrals which has been bought to the attention of the managers and Wasim. They are looking at ways to manage waiting times and PES to look at ways of promoting CUES so less people turning up to BMEC for emergency appointments.

ICB introductions meeting the Chief executive Mark Axcell said he was keen on coming around to optical practices and shadow, SA emailed out to all other LOC Chairs to see who would like to have him, no response yet. If no one volunteers SA will have him shadow at Moores.

Meetings planned – Clinical summit and Away day for ICB and chief medical officers – will update at next meeting

Eers – I have started phoning around practices and chasing up those practices that have not completed the DSP toolkit and asking how we can support them. Charles is leading on this and getting practices ready for when we go live.

Grand Rounds has been organised by the workforce development committee. The date is Sunday 27th November, email will be sent out for bookings please book as limited spaces. Other areas we are looking at are FB workshops as well. Grand rounds will be happening at Newmedica and consists of different cases of pathology with consultants for the delegates to assess.

8.2 Local Meetings

HLOP – finally had a meeting where dates for alcohol training and health champion training will be set for the New Year.

**9. Regional Update – CB report**

## CB Report to Dudley LOC 10th October 2023

## Item 6. CUES update We have not been invited to any contract meetings with the ICB & Primary Eyecare since the last meeting. The next quarterly reports be available shortly.

## Item 7. NHS Updates The LOC constitution is under review and feedback will be sought from LOCs by LOCSU – how that will be done is to be decided.

## Item 8.1 Extended Primary care Services The LOC has supported PES at contract meetings with the ICB, reassurances continue to be made by the commissioners, that leveling up of services is a priority. There have been no discussions that suggest that existing services are at risk of decommissioning, but this has been occurring in some parts of the region.

## Item 8.2 Local Meetings Black Country ICS Ophthalmology Network Board • Update on progress with HVLC cataract services – progress slow • Single Point of Access (SPoA) presentation by Primary Eyecare. Due to the restrictions on finances, there remains little progress from this group at the moment. The same problems are being discussed, with us presenting the same answers, but no action. We are well engaged with the Primary care Provider Collaborative and the newly appointed commissioners, so are hopeful that when the next round of funding decisions are made we will be able to expand our services. Midlands Optometry Workforce Transformation Project Update This is an NHS England Midlands regional pilot to support funded training development opportunities for community optometrists from any of the Midlands ICB footprints to support eyecare pathway transformation. A regional NHS Primary Care Training Hub will be responsible for the commissioning of the training courses from GOC approved providers. The costs of the training course, examination fees and clinical placement (including supervision), will be covered by this project. placements will be arranged in partnership with the Primary Care Training Hubs and it is expected that ICBs will also support and encourage access to clinical placements. We have been supporting the ICB in applying to be part of this project and have requested places for higher qualifications in Glaucoma to support the role out of GERS and also IP to support further CUES and medical retina services. We have been short listed and meet later this month for a final interview to see if we can secure places. Welcome and Introductions to the ICB meeting 27th September for Pharmacy, Optometry & Dentistry All four LOCs, together with LDCs & LPCs were invited to meet with the ICB CEO and chair and other senior officers. POD were asked to present about our work, our aspirations and future engagement intentions. We were provided with meaningless speeches around us being important and they want to talk and engage with us, however there were no offers of any proper representation. Instead, they fobbed us off by offering to visit our practices. This is not to say that we shouldn’t do it, however its simply delays more meaningful engagement.

## Item 9 Regional update The Midlands LOC forum met on the 12th September. Updates were provided on: • The NOC • LOCSU template letters for use when managing decommissioning of services • LOCSU ICB comms in Bulletin 20 (which I have not seen – have we received it?) • NHS BSA EMAIL CHANGES - Email addresses for ophthalmic providers to use have changed with immediate effect: pao-cm@nhsbsa.nhs.uk – For GOS contract new applications, variations, and terminations. paoppv@nhsbsa.nhs.uk – For Post Payment Verification account queries. pao-support@nhsbsa.nhs.uk – For Egress accounts and NHSMail set-up codes. pao@nhsbsa.nhs.uk – For GOS 4 pre-authorisation for adults and any other PAO enquiries. For further information, go to NHSBSA Provider Assurance Ophthalmic. • Free access to HLOP leadership training • LEHN progress raised – still no progress on the Black Country • CB submitted a report of the accomplishments, challenges, opportunities learned and best practices from the region that he would raise at the national forum.

## Item 9.1 Workforce Development Since the last LOC Meeting: • Hospital placements for IPs have been organised. • Peer Discussions continue to be written and provided. • Alternative courses and workshops are being designed (hopefully including DOs and CLOs) and include FB workshops and VR training (just awaiting sign off) OCT events and Paediatrics workshops. • Further grants are to be offered, with revised criteria being drawn up to ensure local need is met, this may include the grant applications window being permanently open, but offers being based on very specific current/future need. For Information

## Item 9.2 EeRS Update Your LOC has been exceedingly busy engaging with the ICB, Hospital Trusts and Optical Practices as the Black Country EeRS is planned to go-live on 23rd October 2023. • Stage 1 is for 5 local practices to be early adopters for a week, when a review of the system is conducted with a nominated lead from each Trust and optometry lead giving feedback to the BC project lead. • Should the feedback be positive, and the referral pathways be successful in week 1, move to: • Stage 2 - 50% of optometry practices per place to go live for a further week. This is to continue to test the pathways for clinical safety and the same process of review is to occur. If all OK go to: • Stage 3 – all Optometry practices go live. Please Note. The LOC are constantly advising the commissioners, Trusts and Ophthalmologists that EeRs is not a mechanism to get free work from us. Requests for information above and beyond that required from a GOS sight test should be reported to the LOC. (E.g. requests for OCT scans, fundus images) Action for LOC to identify Early adopters for stage 1

## Item 9.3 HWMROC – met 14th September DESP – John Grayland the Head of the DESP provider IHI attended to answer questions regarding the performance of the program and to receive the feedback from the LOCs of its survey of practices. Progress is being made with the program and whilst patient uptake was initially slow it is now higher than when Heartlands provided the program. New booking systems and additional staff have onboarded recently so capacity is increasing. Issues raised were discussed and it was agreed that IHI had provided reasonable assurances to the LOCs and that a follow up with IHI was agreed and a repeat survey would be done in 6 months time to gauge the progress.

## EeRS - Dominic Markham from Cinapsis attended and provided an update and demonstration of the EeRS system.

## Paul Sidhu has continued to update the regional website loc-online.co.uk/heartofwestmidlandsoc/

## Work on shared referral guidelines is ongoing.

NF asked if there would be an ‘Advice & Guidance’ section on EeRS as per the demonstration video. CB answered there would not be but it would be offered as an option which would have to be commissioned. CB advised await further developments.

CB will send out some dates for drop in session on EeRS, for distribution,

ACTION: CB

CB also stated that they are looking for 5 local practices to be the first to go live. NF volunteered, along with MT. Hussnan was a maybe but would require some more details. Ameerah also asked for more information.

**10. Hospital Liaison Business**

NF requested an updated list of practices happy to see children and those with additional needs and if they can supply suitable frames. PS to send out the survey (send to Committee to check they are happy with the questions before circulating more widely).

ACTION: PS

ST volunteered to help any practice or practitioner who need advice on frame selection or fitting.

NF reported on a positive note they are seeing better quality referrals. NF stated her concern that certain practices are still sending routine referrals to the emergency email address rather than via their GP.

**11. Secretary’s Business**

**11.1 LOC Cloud File Storage**

PS looked at several solutions for storage most of which were very expensive and more than was actually required. Cheapest solution is to share a Drop Box folder on a personal account of an LOC Officer as a short term fix. CB/PS to investigate further.

ACTION: PS/CB

PS asked the Committee if they were happy with spending approx. £40 per month for this purpose. The Committee voted this was OK.

**12. CPD Officer’s Business**

The CET day which took place on 18th September had 83 attendees. RB reported it was a successful event with positive feedback. PS distributed a questionnaire on RB’s behalf regarding Myopia Management which received 40 responses and although not everyone responded it was very helpful to guage interest in different topics. PS said that it is OK to send out surveys as long as not too many are sent out from the LOC. The Committee thanked RB for organising this event.

**13. Treasurer’s Report**

Current Balance 127.5K. Current grant from NHS for EERS 85.5K ( at the end of September)

LOC Levy has not been paid since June 2023 so we owe approx 6-7K

We also owe HRMC approx £500 (paid one month in arrears)

September Payroll (payable in October) still to be paid including the 6 monthly Honorarium.

True Dudley LOC balance is approx 30K

Sponsorship from recent CPD day of £350.00 has been received from Kestrel Ophthalmic and other sponsorship is due ( question for Rosie ) - see below

All expenses need to be submitted as soon as possible after the end of each month as I need to submit the payroll by the 7th of the following month for payment.

MT to invoice Sandwell for half of the costs for the latest CPD day after all sponsorship monies have been received. RB to chase

ACTION: MT/RB

ST to send MT an expenses claim for work helping RB with the CPD.

ACTION: ST

**14. Authorisation to act and email conversations**

The motion from previous meetings was put to the committee (*the committee give continued permission and authority for officers to deal with and make decisions on matters that arise that need urgent attention. When this occurs, wherever possible a discussion by email with the Committee should take place before a decision is made. Whenever possible and reasonable officers should bring all matters that require decisions to the next committee meeting, and decisions will only be made outside meetings where waiting is not a realistic option.)*

Agreed unanimously

**15. Authorisation to act on ROC**

The motion from previous meetings was put to the committee (*The committee to agree to Charles Barlow and Paul Sidhu continuing to represent the LOC at HWMROC, with permission for them to use their judgement when deciding if individual decisions made there amount to minor decisions or major decisions. For decisions they consider minor they are authorised to act on the LOCs behalf. For all decisions they consider major they must seek to have those ratified by the LOC, and they must make this clear to the ROC.)*

Agreed unanimously

**16. A.O.B.**

Ameer attended some bite-sized training and PS shared his report on screen at the Committee which Ameer talked through. Sonia said she would be happy to contribute towards the paediatric workshop as part of the workforce development – this would include small frames for people with special needs and Down’s syndrome. Another suggestion was Marek to be used for dispensing workshops as well as Lisa – SA to take these suggestions back to workforce development meeting

**17. Date of Next Meeting**

The next LOC meeting will be held on Tuesday 16th January 2024 – 6.30pm via Zoom. The meeting closed at 8.00.pm

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| **Action** | **Action by** |
| Follow up with Mary Bairstow at Jigsaw | AA |
| Change Agenda item to GOS Updates in place of NHS Update | PS |
| Provide EeRS drop in sessions as appropriate with roll-out | CB |
| Send out survey regarding childrens vision | PS |
| Continue to look into cloud storage for the LOC | PS/CB |
| Monitor sponsorship payments from CPD day | MT/RB |
| Send claim form to work done for CPD day | ST |