



Chair's report

I started off by looking through last year's AGM - it is now almost three years to the day since the start of lockdown due to Covid. The restrictions imposed then seem almost unreal now; did we really only spend time in our own gardens, with our own household day after day? Were there really no traffic jams, was the M25 empty..? We have just met up with friends from Edinburgh this weekend in London, delayed due to Covid, and went by crowded tube to the packed theatre - it seemed impossible that these things ceased for so long!

However, as the College guidance now states, "all of the UK is currently in the green phase" which still means masks are recommended in all health care settings but it does feel as if life is almost back to normal.

Summary of this year 2022/2023

From an LOC perspective, we are still sending out frequent news emails but slightly fewer than in previous 3 years. It is surprising how many news items appear each week and we hope it makes it easier for all practitioners to have these updates. There have been nearly 40 Mailchimp newsletters sent out during this current year which would not have been possible without Steve's help, whether that is designing the layout, writing the details and, after a bit of back and forth for a few amendments, finally sending it out to you all. Our mailing list currently contains over 450 members, which has more than doubled since pre-covid. As people do move out of the area or even the industry, it will be useful to do some extra analysis and maintenance on the list once the hectic period of our AGM and recent CPD has passed.

We do receive regular queries both from practices and individual optometrists which we try to advise on or offer guidance. Examples are needing clarification of the emergency referral pathway, more details on the CHEC post cataract pathway, a query about a GP practice that appeared to not be referring patients for NHS cataract surgery and so on.

The LOC has also played a role in the recent safety alert about EyeCee IOLs. Luckily, after numerous emails to the Trusts and independent providers such as SpaMedica, it does not appear that these lenses have been used in our area.

As you may be aware, since September 2021, there has been a team of people working on an Electronic eyecare Referral System (EeRS), but this reached a standstill during December 2022. It is an extremely disappointing situation especially considering not only all the work that has gone into it but also the amount of time it has taken. The system was designed for eye referrals to be electronically transferred directly into the hospital for triaging. The first area selected for this was East & North

Herts because referrals were, and still are, mainly via the GPs. One main problem seemed to lie with not having an open API for accurate recording of something known as 'referral to treatment time' RTT. The digital section of NHSE is looking at this currently with the hope of finding a solution. We are not the only area to have come to a standstill and are now awaiting further details from NHSE as to whether if this will cease or continue.

Other meetings which have taken place this year are as follows:

- LOCSU - East of England regional forum

This comprises of Norfolk, Suffolk, Essex, Hertfordshire, Cambridgeshire and Peterborough and Bedfordshire LOCs with a LOCSU optical lead present too. We meet 4 x year and it is a useful way of sharing knowledge especially as some ICBs fall across two areas such as us - Herts with west Essex and Suffolk with north Essex, etc. These areas need to collaborate even though they may be using different hospital Trusts. Each LOC also discusses what services are being provided in their area and the discussions they had at ICB level in order to proceed.

- LEHN - Local Eye Health Network - we are now part of the East of England group which is led by Rupal Lovell-Patel. We used to be invited to attend as we had no LEHN for Herts but now we are included in this group. The east of England LOCs are all here together with voluntary groups such as RNIB and Support for Sight from PAH. At the most recent meeting, we also discussed a local Herts Homeless vision project and provision of eyecare for refugees and asylum seekers. With respect to ECLOs, there is variable provision across the eastern area with Luton & Dunstable providing funding for the next three years, whereas in Ipswich, it is currently funded by the Trust itself but now needs renewing. The aim should be to make ECLO services equal across the whole region, not dependent on postcode. The RNIB is also trying to design a pathway for Optoms to refer directly to an ECLO too.
- Herts & West Essex (HWE) ICB - we have had numerous meetings up to the end of last year - all called 'task and finish' but so far, a lot of tasks and no finish... yet! The various groups are called the Steering, Cataract, Urgent Eye, East & North Herts (ENH) Hydroxychloroquine, ENH Ophthalmology EOG (Executive Oversight Group). Initially, the meetings were designed to find out our current position with the aim of improving the services in the future. For example, with HCQ, there is no HCQ clinic for ENH patients who should be screened at certain intervals with an Ophthalmologist's oversight. However, in Watford, they do have a HCQ clinic into which any patient is now being assigned. The ICB HCQ investigation was because of the Royal College of Ophthalmologists recommendation that all patients be referred for annual monitoring after 5 years of therapy and be reviewed annually thereafter whilst on therapy.
- National Optical Conference (NOC) - this is an annual event to which all the LOCs are invited. One 'free' place is paid for by LOCSU and each LOC

normally funds one other member of the Committee to attend. Anita and I went this year and it was a very informative two days, meeting with other LOCs, sharing problems, finding solutions and learning how to be effective.

- I did a presentation to Lister Hospital Trust at the end of last year about our LOC and following this, there were numerous emails with Lister about the new emergency referral email address and a form which could be used. I explained that optometrists need to be allowed to refer patients using any means whether it is via their practice management system, a typed letter or even a handwritten referral and that no information can be mandated. This has now been active for almost two months, and, to date, no concerns have been received. I have asked for an update from the Trust but nothing has been forthcoming - is no news, good news? If anyone does have any comments to make, please let me hear them.

As we approach April 2023, the reissued GOS contracts should now be assigned to each Integrated Care Board - ours is Herts and west Essex. We have been involved since October 2022 when NHSE Optometry East reached out to us for help. They had only managed to get about 200 contracts signed (across the east region) and still had about 300 who have not responded to their information request. We, as an LOC, were asked if we could remind practices that this needs to be completed. It transpired that in some cases they were emailing practices by placing the ODS code in the middle of the email address which was then not received by practices. The situation has improved but there are still some practices who have not responded.

Finally, I'd like to put on record an acknowledgement of Dawn's hard work for the past six years she worked as our admin support. She could be relied on to deal promptly with the queries coming to our admin email, forwarding on anything she could not answer, allocation of WOPEC codes, accurately typing up the Minutes from our meetings and 'being there' when needed at our F2F events in the past even organising the pizzas and drinks. We will miss her and wish her well for the future. Her various roles have been taken over by Eileen and Steve, so many thanks to you both.

Thank you all for your continued support and wish you good health and success for the coming year

Jane

A few abbreviations which may help with the above:

ECLO - Eye Clinic Liaison Officer

ICS - Integrated care systems are partnerships of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area.

ICB - Integrated Care Board is a statutory NHS organisation responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in the ICS area.

IOL - Intraocular lens

LEHN - Local Eye Health Network

RNIB - Royal National Institute for Blind People

WOPEC - Wales Optometry Postgraduate Education Centre

API - Application Programming Interface. This is a program which allows different computer systems and apps to “talk” to each other.