**Lincolnshire LOC meeting – Thursday 31st March 2022 7.30pm** Via Teams - Virtually

**In attendance:**

Annabelle Magee (Chair)

Sab Bahl (Treasurer)

Stacey Griffiths (secretary)

Jason Rickaby (observer)

David Burghardt (Committee member)

Julie Corrigan (Committee member)

Tushar Majitha (Committee member)

Harshad Pincholi (observer)

Chaz Uppal (Committee member):

New participants:

Adrian Cobb – Optometrist, Specsavers Sleaford

Hayley Morrison – Dispensing optician, Asda Lincoln

Agg Stanley - Optics partner, Specsavers Skegness

Alex Haseldine – Optometrist, Specsavers Lincoln

Allan Connolley – Owner and Optometrist, Optique Lincoln and Notts.

Anish Mistry – Derby LOC contractor

Bijal Ladua – Optometrist, Specsavers Sleaford and Grantham, Domi

Carol Daulat – Optometrist, Horncastle Eyecare

Philip Drake – DO Specsavers

Laura Rawlinson – Optometrist, Rawlinsons Optometrists, Skegness

Laura Tope – Optometrist, Dixons, Lincoln

Neil Stradling – Optometrist, Specsavers, Holbeach + Bourne

Manjeet Burgess – Optometrist, Boots, Lincoln

Hetal Punja – Optometrist, Boots, Stamford

Samantha Oliver – Optometrist, Specsavers,Lincoln

Sinoli Aswala -

Philip Drake – Dispensing Optician, Specsavers, Skegness

Shizani Khanna -

Stanley Manwuka – Skegness Specavers

Yoon Kon -

Deepal Burgess-

(29)

Faciliated, by Nizz Sabir (Optical Lead, LOCSU)

**Apologies:**

James Coleman, Sleaford Specsavers

Stuart Furniss, Dixons

Martin Smith, Martin Smith Opticians

Nancy Gutteridge-Smith, Pirrie Optometrists

David Hilton, Pebbles and Hilton

Martin White

Amit Patel, Lincoln Specsavers

Clare Young, Greenwood Opticians

**Introduction:**

All attendees apart from Yoon Kon, ……..( Due to later attendance) were able to introduce themselves.

Nizz: Thankyou to committee members and welcome to everyone who has joined the meeting this evening.

**Questions/minutes of last meeting:**

Any questions about the last meeting? – None

**Expression of interest for new Lincolnshire LOC.**

**Roles required: Chair, Vice-chair, Treasurer, Secretary, Administrator, Optical Lead.**

Annabelle (AM): Introduced herself, advised current committee set up, highlighted reshuffle of committee members due to previous members no longer having a GOS contract so interim LOC officers are:

Annabelle Magee (Chair)

Sab Bahl (Treasurer)

Stacey Griffiths (secretary)

AM: would like more members, please apply (AM has sent out an email to those who expressed interest)

Manjeet (MB): Question: expectations of the roles

Nizz: replied in depth about the roles and expectations which have been emailed to those interested parties.

Please email: Annabelle.magee@nhs.net or mauricky@hotmail.co.uk (Stacey Griffiths) if you wish to receive this information.

Nizz: recommended Anish provide some insight, as he previously completed the LOCSU induction course.

Anish: advised working closely with CCG’s, all governances that include funding and mentioned Health and well-being as an important part of the roles now.

AM: wants to grow the commitee – Divide & Conquer – the roles to help alleviate pressure and time commitments required as a committee member.

Nizz: would like to provide email/contact for any volunteers: nizzsabir@locsu.co.uk

**Onboarding for OPERA/COTATS:**

Contact details for Angela: angela.henderson@primaryeyecare.co.uk

AM: There is an opportunity for practitioners interested to deliver the COTATS service through PES. Please contact Angela if you wish to do so.

Laura Rawlinson (LR): questioned acronyms

AM:

COTATS – Community Optometrists Triage and Treat Service. (Was PWSI – Practioners With Specialist Interests)

PES – Primary Eyecare Services.

Adrian Cobb (AC): Query: Minor Eye Condition Service (MECS)? Why do we/did we have PWSI (now COTATS) instead of?

Sab: Addressed: CCG did not want walk in patients (px) being claimed as emergencies or MECS/CUES before the px has been seen by an Optometrist to rule out the possibility of a non-issue. They are also against ‘in house’ referrals.

AC: Questioned the decision further, as MECS/Covid Urgent Eyecare Scheme (CUES) is used nationally by most other areas. Not all demographics can afford a private appointment for flashes and floaters for instance.

Nizz: agrees that the services mentioned are used all over the UK, however, advises that all areas a represented differently due to are size and coverage of community eye care services.

Tushar Majitha (TM): GPs are now able to write a referral for patients into COTATS

Sab: Clinical Commissioning Groups (CCG’s) are aware that a px who represents with Flashes and Floaters (F+F) are not covered by GOS. She expresses that she thinks it is something that should be, but it isn’t currently.

Deepal: Advises: MECS do not cover F+F either, as the condition is required immediate care, however the only requirement currently is CUES 28 days and MECS 3-4 days.

NIzz: CUES is based on a clinical decision, so if there is a requirement for a condition to be seen sooner, that decision can be made at the time.

Chaz Uppal (CU): commented - No CUES/MECS in Lincolnshire but is in Basset Law currently.

**B**ijal: Sleaford is part of this scheme. Would like a dual scheme, feels the area would benefit from MECS and CUES as well as the current set up. There is an issue and feels its unfair for px’s that are unable to afford urgent treatment, as they are likely to go untreated completely.

Nizz: Agrees

Julie: Query: How would MECS/CUES work for her practice? Unable to provide free slots/make room for emergency px’s presenting themselves on the day of a clinic.

Nizz: Can taylor the service to your practice, can offer this 1 or 2 days instead of everyday for instance.

Bijal: agrees can offer flexibility in a service like this.

Nizz: Can reach out to other practices in the area on the scheme, to offer patients an appointment that day etc. that’s with CUES and MECS, however not get ahead of ourselves as this isn’t currently in place.

AM: moving on to the current service running, did want to note there are payment issues. This is not a deterrent, however, please be aware that the practices currently doing COTATS have had missing payments and ongoing issues. Again, if you wish to provide the service, please contact Angela.

Sab: regards to payment issues, some payments have started to filter through. They have recently received a payment awaiting from 2016.

AM: any other questions? - None

**Website:**

AM: can we have an update on the website? Sab/Jason?

Jason Rickaby (JR): Not Live, however content creating and ready.

Sab: Has asked Laura Tope to help with keeping the website up to date.

AM: Laura to please keep in contact with Stacey in regards to this.

LR: back to F+F, what can we do for the meantime? How do we get the patient seen?

Niss: ask neighbouring practices for availability.

Sab: Cannot ring to get an appointment at HES/Ophthalmology without being seen by an Optometrist. Solution would be a written referral for the patient to take to A+E. Follow the current referral pathway for Lincolnshire.

Manjeet: She prioritises patients, in the past if there have been px’s booked in for a routine appointment she would contact them to see if they are happy moving their appointment to another day to prioritise a px requiring an appointment ASAP. Doesn’t happen too often.

David Burghardt (DB): agrees with this.

Chaz: This is still private. MECS/CUES would be NHS. Any reason again why we have not chosen to take on the service?

AM: Could not advise as was not part of the committee when service discussions occurred. Directed query to DB , SB, TM.

DB: Set up originally (PWSI) as a diversion scheme, to have patients seen by a community Optometrist rather than have the Hospital filled and backlogged with patients.

AM: The new committee could look into MECS/CUES going forward if the LOC felt this was what they want to pursue.

Aggripa Mwamuka (Stanley): How does OPERA work?

AM: Referral received via email from central booking team. Optom then has to upload each px onto Opera, then complete assessment on Opera.

Samantha Oliver (SO): Does Opera, autogenerate outcome and send to referrer?

DB: currently only GP, not to original referrer.

AM: Will raise this with Angela

**AOB**:

Stacey Griffiths (SG): last minute meetings advised of a meeting in June, as well as the AGM.

AM: Confirmed next meeting 9th June 2022 7:30.

AM: Thank you for attending

**DATES FOR NEXT MEETINGS:**

Next LOC MEETING DATES SET INCLUDING AGM:

Thursday 9th June at 7.30pm.

Thursday 7th July at 7.30pm (AGM)

ALL MEETINGS ARE TO BE VIRTUAL UNTIL FURTHER NOTICE.

END: 20:48