

Northumberland, Tyne and Wear Local Optical Committee
Committee Meeting, 8.3.2016, 6.30pm
Waterfront4, Newburn Riverside NE15 8NY

Members present:

Ian Hickson, Kaye Winship, Pauline Wellstead, Iain Armstrong Gary McMullen, Tony Marshall, Sylvia Bailey, Naomi Smith, Lesley Oglethorpe, Iain Armstrong, Andy McGregor, Stephanie Cairns, Carole Thorpe

Apologies:

Mike Offord, Lisa Gibson, (Kaye Winship for late arrival)

Minutes of previous meeting:

Had been distributed and were accepted prop Ian, sec Pauline.
Matters arising covered below.

Chair Report: Andy

Andy is impressed by how much work everyone is doing.

- Attended Performance Advisory Group as LOC rep
- Attended NT CCG with Sylvia:

Referral Management System problems: GOS 18 query outcome- there is **no** requirement to use GOS18 rather than referral letter to GP to progress referral. Sylvia spoke to Ruth Evans who cited poor wording within RMS procedures as the problem which has now been rectified.

: Sarah and others have experienced an issue

from one GP practice of refusal to progress cataract referral without visual field recording. Again Ruth Evans has spoken to the practice secretary as fields are **not** a requirement in cataract referral. Sylvia hopes the referral is not still blocked- if so Ruth will speak to the GP involved.

RMS is rolling out further but differs in different areas. - Northumberland is overseen by RVI. - NT has 'screeners' looking at referrals. Their cut off point for cataract is DVLA standard. If borderline the patient will get a phone call so best to brief patients on this.

Andy will send copy of RMS guidelines to contractors and also lace on website.

Secretary Report: Naomi

Sec report 08/03/2016

One new additional contract - ADS eyecare in Stockton

I have updated the email contact lists following the launch events. Still lots to do on contacting performers but other jobs have taken priority recently. It is on my agenda to sort over the next few months.

Lots of email contact re: RMS I have handed this to Sylvia and Andy who will report further.

Central LOC fund are looking for a North East director. Email sent out.

AGM date set for 17th May. Serious Incident talk to be presented at this event by NHS England.

Teeside LOC have 2 individuals interested in providing admin support. Both based in Teeside area. Do we want to approach them to take over some work? **Naomi will get further information**

I have cancelled the pre existing STW drug bin contract. This will terminate 16/05/2016. I will roll those practices still wanting provision onto the new NTW contract.

Invite to committee meetings extended to Sylvia and Barbara to try to make sure that those involved in CCG/eyecare groups are fully up to speed on LOC/LOCSU roles and pathways.

We have received 2 more complaints about Tynedale opticians at home. These have been forwarded to NHS England.

I have received 2 complaints about GOS payments. These have been forwarded to Janet Knox.

PCSE - online portal to go active this month. An email was sent to the committee about this.

I have had a request from pre-reg for help finding a position.

Mr Bearn has asked the LOC if we would like to sponsor a space in Eldon Square during Glaucoma awareness week. £700 for the week. **Naomi will look further into this.**

I have received a concern over the latest communication from CAS. This was circulated to the committee last night. They have assumed all contractors have access to NHS email.

We have received a complaint from a contractor in North Tyneside regarding another contractor performing "child screening" in schools. This has been handed to NHS England as it appears that this is a GOS related issue rather than one the LOC needs to resolve.

Helen Reynard is regularly updating me on the progress of the investigation.

Treasurer Report: Lesley:

-Balance approximately £30K

-Income bolstered by repayment of some of the loan from PENE £2K

-Reimbursement of set up fees for IOP launch 2015 £780 - CCG not interested in claiming money back!

-PENE have requested that we invoice them for work on behalf of PENE paid for by the LOC.

This amounts to approximately £13K although that does include estimates for Feb and March work so may change.

PENE have £11K to distribute proportionately between all LOC's so we will obviously not receive full refund.

-PAYMENTS! :

Janet Knox - head of Capita, has been looking into the issues we have with payment of levies.

Some payments we made using the wrong percentages - my view is to let that go - given the issues we have had I think asking them to recalculate these figures is just asking for more trouble.

We are owed £3823.06.

LOCSU have been overpaid £575.49

Some summary sheets have been received showing breakdown of levies.

Let's hope it continues!

Committee thanked Lesley for her perseverance with the payments issues.

LOCSU Levy: Alteration will have to be put to AGM, but committee happy to maintain 1% levy and split it 0.5% and 0.5% which would be enough for LOC at present, as no service launch in pipeline, and would mean no change for contractors.

Children's and IOPRR service:

Kaye is finding QiO arduous but there are no shortcuts!

Service has not started yet as it has been blocked by Paula Phillips of Public Health who was not aware of the service. Sarah is to meet her next week, and hopefully it will start from 1st April.

Webstar module does exist and has been tested- Gill has done exhaustive work on this.

Community Service Leads Reports: had been circulated prior to meeting:

Cataract: nil to report

ST: no report submitted

Sunderland: no report submitted

NT: see agenda for CCG item

MECS: Tony: Tony Brown, Alnwick GP has been very positive re MECS, thinks documents are straightforward so will ask questions of CCG.

Diabetes: nil to report

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PwLD:

Stephanie emailed report prior to meeting:

LD Update Feb 2016

-Seeability are interested in the results obtained from the survey to local Optoms I circulated - we had 43 responses. They have asked if they can use some of it in a presentation in parliament in July, I said I need to ask the LOC first. I've also explained I can't be sure how accurate it is as people will have filled it in from memory rather than going back through records. The main info coming out was the lack of audit and consistence in reasonable adjustments made between practices. Plus that some practices will see people for second unfunded appointments to help obtain better results and others will just put on 1 year recalls (with little hope that further info will be obtained next time). This seems practitioner dependent as we had responses from independents, multiples and Dom providers to both ways of conducting follow ups.

-There is now a Webstar module available for the LOCSU pathway so improved audit the pathway provides should be a big plus to the Commissioners. There's a push from LOCSU to promote this as a 'national' pathway and I've been involved with discussions regarding how this would be implemented.

- I have set up a meeting to present at the Gateshead learning disability partnership board in September/October to promote the need for eye examinations in general and why LVA are relevant to people with LD. (Though I'd feel happier promoting the more relaxed/ longer testing environment that the LOCSU pathway recommends, as one of the problems DDES have found is that carers don't understand that just because their clients been put on a 1 year recall it doesn't mean that much meaningful information has been gained at each visit. But equally I don't want them to go away thinking the optometrists are poor just the system.

-Based on knowledge gained from both investigation the LOCSU pathway and the Higher LV Certificate I'm working towards I am looking at the systems put in place within SS to assess PwLD and will be encouraging more optoms to refer people in for rehabilitation/ lighting/ contrast enhancement advise and possible LV aids.

-Tom H. presented at the Sunderland DIAG meeting and is also to looking at a link with People First and related patient / service users groups. The important link from our perspective is the Sunderland Council.

-There has been some progress in DDES again - this tends to come in waves. He has given two presentations to the CCG Practice Managers groups and had the usual patchy feedback from this.

-GP Lead for N/G and North Tyneside has revived the health conversation in both CCGs but there is so much on the LD agenda that commissioning intentions are distracted. The LD Network is as occupied as other bits of the system. They had a presentation from an audiologist and like optometry there's a real gap in services. (This may be the same talk I listened to at the DDES relaunch were Sunderland Audiology have improved adjusted their service to better serve people with LD. It is disappointing/frustrating that we have not spare resources at present - but not off agenda.

-I've just received the contact details for the head of the Transforming Care Board for LD in South Tyneside, though have not contacted him yet. Unfortunately Sara Golightly, who I had a heated meeting with in the summer now works for South Tyneside Council for LD so I'm not sure if we'll get much help there.

I've had no reply from Northumbria Trust despite Angela Henderson introducing me as the LD Lead in Nov.

-The following is the Summary outcomes following the discussions I've been involved in with others setting up the LOCSU pathway in Greater Manchester, DDESS, Zoe Richmond etc. To help improve the Webstar module.

- Support for a Single National module and database covering all Community Eye Care services for People with Learning Disability

- Support for a further outcome report to facilitate referrals, Simple format, similar to GOS 18
- Reason for referral collected in a free-text comments box and reported clearly
- Include a statement to clearly indicate the service user has a learning disability
- Module needs to remain flexible: allow partial clinical data input and remain “open” even after “discharge” and follow-up information added. But also needs to be able to begin a new episode of care, to trigger a further payment, when the next sight test is due.
- Question to be added to record whether a functional vision assessment has been completed and which method
- Make an amendment to the functionality so that the practitioner only records the reason for the assessment being done, beyond the 2 week window, once.
- If the full episode of care is completed in a domiciliary setting, ask the practitioner whether the service user would be able to be seen within a practice setting in the future.
- Simplify the way the module records the number of Appointments / Contacts with the service user.
- Ask the practitioner to complete a couple of simple questions to collect the relevant data.
- Mandatory to ensure complete dataset.
- At “discharge”, when the practitioner records the outcome and generates the reports. Brief summary of other useful points raised relating to the overall service development:
- Consider transition arrangements between services within special schools and the community service for “adults”
- The pathway should ideally encourage the service users to access the community service within a practice, in the usual way. Domiciliary care can be utilised for familiarisation visits and to build relationships in a familiar environment, where necessary. Only a small number of people with a more severe learning disability will need the full episode of care in their own home.
- Consider an Opt-out approach to service eligibility so that all People with Learning Disability have access to the improved pathway but could choose to be seen under GOS.

Reports from CCG leads:

LRC: Re LRC 14/01/2016 Rebecca:

There was no attendance for CCG or NHS England - the LMC is happy to email any issues to these bodies if required.

Under CCG issues 15/04/03 - the survey that the chair had received asking GPs what they would like optometrists to do and what their added value was(south tyneside) - this survey was conducted by Public Health England not the CCG so no results were available - do you know anything about this ??

Capita was discussed - the GPs are about to get blank forms with bar codes in the near future to practice with - they had heard that there would be a call centre in Leeds after the local offices were closed. (Then probably moved to India !!)

The LMC is happy to send an email about IOPRR and Childrens scheme (not very keen on meeting) out to local areas and can also forward to any other areas (durham - tees - northumberland) via their LMC secretaries should you so wish . Just contact Maxine .

Just as an aside-it was mentioned (not minuted) by the doctors that to get any money out of the CCG for services just tell them how many visits to A&E it would save , just thought about Red Eye?

The Pharmacists were asking about LOCSU and how it worked - hope I explained satisfactorily - I think they are trying to set something similar up.

Northumberland CCG: Andy: no feedback but no problems

Sunderland and SoT: Kaye-commissioning intentions published end March, she will ask questions and keep optometry on the agenda.

NT: Tom Dunkerton is positive but optometry still not high on agenda.
Gateshead: Stephanie has spoken with the falls prevention coordinator in her role at Sight Service. She will keep dialogue going as there is money available and there may be a future in referrals between the falls team and optometrists in Gateshead which could then cross to Newcastle.

PENE: Sarah emailed activity reports for January and February 2016:

January...

Work as director for NT&W LOC, PENE e mail enquiries, Policy documents, Accounts, declarations etc.

Work communicating with Zoe Richmond, Jane Ranns, Steve Thomas and Eric Hagan.

Communication with John D/ Gill M CG & P Leads.

Work relating to subcontractor/performer declarations/QiO / Continued work on QiO subcontractor checklist upload, agreeing SOP.

Communications with subcontractors about QiO and Head Office Specsavers / Boots about group QiO upload.

E mails with GC (Webstar) updating documents IOPRR & CRS

Editing children service form for Sunderland / South Tyneside reporting/ confirming FTA protocol with GM.

Update e mails to NECS wrt progress with mobilization of services. New contract in place January 4th.

Requests to Webstar health - remove 'old' PDF's from IOPRR module, input CCG GP's onto Children module GHD & ST

Finalising Launch venues/ issues etc

Assisting GM in Developing presentation for the launch over paper based to Webstar Health module.

Ongoing discussions with GM on Children service development.

Reminder invitation letter for launch event (with LOC reps). Agenda for launch.

Chasing WH for 'video' for launch.

Information to Contractors about changes to services

Information to individual sub/contractors about QiO uploads for multiple practices.

Updating JD on process for authorization QiO subcontractor checklists.

Producing QiO checklist crib-sheet to circulate to subcontractors - due to several requests for how to upload.

Documents to Ian for NTWLOC website.

Communication to Mr Bearn at the RVI showing referral deflection of the IOPRR service.

Communicating with Sunderland CCG about request to have separate invoicing and reporting (ie not via NECS).

Request to WH to confirm this is possible and action this. Confirmed.

Follow up on query to LOCSU.

E mail to Registration Webstar Health - practice signing up to children service/ emails to subcontractors.

Overview of final contract service specification - queries outstanding to NECS.

Project board conference call.

Investigation into subcontractor protocol breach in Sunderland with GM - finalized

Investigation into invoices - unpaid by SBS. Identified outstanding payments and confirmed not received into PENE or LOCSU account.

Responding to queries from subcontractors about DBS, sign off questions, signed up questions, change of bank details, chasing payments, queries relating to requirements for the bid.

Subcontracts to sign.

Follow up on announcement about change of services to go on Webstar health front page.

Updating the current lists for Children and IOPRR service.

Quarterly reporting to NECS (combined with CG & P Lead reports).

Checking on service issues raised via Webstar health.

Work on boundary issue between Sunderland and Durham CCG's for children service.

Work around setting up a DOS profile for PENE - requirement of contract (DOS directory of Services - used by 111 etc). (Minimal so far).

Seek confirmation from NECS on service switch over following query from Kathryn smart RVI RE Gateshead area - confirmed.

Ongoing issue with South Tyneside switch over.

Communication around PO numbers NECS and Webstar Health

Updating lists from two launch events - identifying actions required for new sign ups/ additional service sign ups/ removal from list requests.

Report for February:

Work as director for NT&W LOC, PENE e mail enquiries, Policy documents, Accounts, declarations etc.

Work communicating with Zoe Richmond, Jane Ranns, Steve Thomas and Eric Hagan.

Communication with John D/ Gill M CG & P Leads.

Work relating to subcontractor/performer declarations/QiO / Continued work on QiO subcontractor checklist uploads.

Continued communications with subcontractors about QiO and Head Office Specsavers / Boots about group QiO upload.

Communications with Kathryn Smart on children service, roll out of Gateshead area/ FTA protocol and forms.

Testing of new childrens Webstar Health module.

Update e mails to NECS wrt progress with mobilization of services.

Follow up e mails to attendees post Launch.

Continued communications containing information to subcontractors about changes to services

Information to individual sub/contractors about QiO uploads for multiple practices.

New sign ups / chasing issues with sign ups. Removal from lists.

Document change requests to Ian for NTWLOC website.

Issue of final contract service specification - signed on behalf of PENE

E mail discussion started with NECS around March 31st deadline for PENE providing a list of all subcontractors signed up to the NEW contract by March 31st

Chasing unpaid invoices. NECS confirmed investigating.

Responding to queries from subcontractors about sign up. Chasing progress etc. (Mainly Specsavers practices)

Subcontracts to sign. QiO approvals. Chasing PD and RS for multiple practices - ongoing.

Ongoing updating the current lists for Children and IOPRR service - monthly whilst new practices are signing up.

Work around setting up a DOS profile for PENE - requirement of contract (DOS directory of Services - used by 111 etc). Still ongoing.

Ongoing issue with South Tyneside switch over.

Tracked down school screener's line manager who advised service currently blocked by Public health Team South Tyneside.

E mail drafted whilst sourcing contact details. (Meeting now arranged ZR/ST /PP/LR/JR Thursday 17th march).

Work on 'Requirements list' for PENE to submit documents and evidence of policies as per list to meet the contract requirements provided by NECS.

Chasing Webstar Health for MDS and invoices for January 2016 (invoicing monthly since new contract).

(Work on IG Toolkit submission work is being charged to PENE directly).

A lot of work has been done and Sarah could not cope with another service bid without help. She spends 1/3 more time than she charges for- emails are constant. She has put out a plea for help. We are very lucky with Zoe.

New contracts are ready and agreed by LOCSU. Webstar will send out for signing. These will not be with NECS by 31.3.16, but this is because they were late getting the contracts to us, so both sides are in breach which will hopefully be overlooked.

LOC Forum: See appendix 1.

CET Events: Jane Ranns is holding a meeting 23.3.16; Stephanie, Pauline and Lesley to attend. Andy said we need to be sure of support from practitioners before we commit to massive organisation of any big event. Past experience shows we need good quality

speakers, and evening events have seen the best attendances- support for social events has been poor.

Website: Ian: 100 registered

: there is an area to advertise vacancies etc.

: Andy suggests diary for meetings attended. This can be done.

: Ian had a request for their reception area to have access to secure website area. This can only be done by nominated person however forms can be downloaded for use in reception.

AOB: Naomi - Zoe has asked what we would like her to concentrate on, Naomi suggests cataract as there is already a LOCSU pathway.

:Naomi - ARMD fax at RVI is not currently working.

:Noami - HUGE congratulations to Lisa on the birth of a healthy William Nicholas Gibson on 24th February. The committee express their very best wishes to the whole family.

DONM: AGM 17th May with committee meeting following on.

The meeting closed at 8.30 pm.

Appendix 1.

North East LOC Forum

Bi-Annual joint meeting with PENE
18th January 2016 6pm – 8pm Ramside Hall Hotel, Durham

Agenda

Chair: Zoe Richmond

Note Taker: Naomi Smith

Welcome: Julie Breen, Zoe Richmond, Jane Ranns, Sarah Townsend, Lesley Oglethorpe, Naomi Smith, Eric Hagan, Dermot Thompson, Matthew Jinkinson, Robert Wattishead, Karen Aspey, Steve Thomas.

Apologies: Richard Naisbitt, Angela Henderson, Liz Hearn

Agree minutes of last Forum meeting : Agreed to be an accurate account

Matters arising / outstanding actions : All to be covered in agenda.

Optical Lead Report:

Northumberland Tyne and Wear IOP RR and Children's service contract. Awarded to PENE. Service commencement Jan 4th. Work on the OptoManager module for the Children's service is well progressed and should be available from 1st March. Areas for service development - IOP level 1C utilised fully
South & North Tyneside CRS service doesn't use Orthoptists but school nurses - PENE need to work with screening providers
Direct referrals in Durham. Still waiting for NECs to facilitate - slow progress. Meetings held with all local Trusts. JR and ZR to progress.

NHS England Vanguard sites - New models of Care Programme. Better Care Together programme in North Lancs and Cumbria is making good progress and appears to be the only Vanguard currently considering Ophthalmology services. All LOCSU Core pathways are being considered (IOP RR and Cataract are in phase 1; MECs phase 2; OHT monitoring, Childrens services & Low vision phase 3) All phases implemented by end of 2016
Contract likely to be between Morecombe Bay Trust and Primary Eyecare Lancashire.
Communications - LOCSU continue to promote community services and the wider role of community Optical practice. A number of articles have been published in both the eyehealth and commission press, both PENE and NE LOCs are well represented. Any local news stories or press releases should be shared with Chris McGachy - cmcgachy@locsu.co.uk

New Opportunity - North Tyneside CCG have asked for lots of information about all community services. I have been engaging with Steve Rundle, their commissioning manager, and will continue to progress and keep LOC leads copied in. It seems Pre and Post Op Cataract appear to be their priority.

LEHN work on Childrens vision presents an opportunity for a post screening community pathway across DDT. Zoe working to progress this but will soon require clinical leads from both Durham and Tees LOCs to support.

RVI and community Optometry - areas of opportunity I met with Mike Bearn of RVI to discuss areas of opportunity for joint working. NTW LOC to consider next steps.

- A contracting model where the Trust maintains ownership and subcontracts to PENE / Optical practices removes the commercial barriers and may open more doors. This could work for Glaucoma and Post-op cataract
- Joint working with the Trust to ensure all referrals for IOP alone have been through the community service.
- Pilot for post-op cataract patients in rural areas

- Support for audit to improve referral feedback (Although this is something I have also taken to the LEHN - an audit across Cumbria and the NE would be significant)

OA vacancy NHS England (Cumbria and the NE) - Jane Ranns has been appointed as OA for a short term contract to add much needed capacity. Angela Henderson remains in post.

Tees STORP project - Direct referrals from community Optometry to Neurosciences going well. 15 referrals to date. No progress on Direct referral to TIA clinics
Notes added at meeting: NTW IOPRR/Children's service some cross border issues with Durham. Being looked into.

Durham - direct referrals. ZR had a meeting with CCG to look into this.

MECS would be prioritised higher than cataracts in North Tyneside

RVI opportunities - proposal to work with LOC to look into referral feedback. Mike Bearn at RVI is looking to do a piece of work on this. This has gone to the LEHN as this sits across the patch. MB taken that to RVI student doctors to see if anyone will take this one. If this happens - LOCs will need to support.

Action from LLI group for the LOC to remind that QiO protocols should be updated periodically. **OA Report** - none provided.

NS presented a report from the LLG meeting.

Local Liaison Meeting - Optometry. LOC report (LOCs actions in red)

Update from Janet Knox - Regional Liaison Manager (North East)

Primary Care Support England (Capita) Capita have introduced regional and training managers, their job is to liaise with required bodies and support through all the changes. Janet holds this post and has been in post 11 days. Current focus on GPs due to service implications.

First impact on optoms is for ordering stock and supplies. Capita have an online portal which will deal with supplies. City sprint will deliver these and tracking will be available. Full details will be given to contractors once the portal is set up and live (April 16).

Local training managers will be ID checking newly listed performers from mid feb. Exact date will be given. Managers will visit NHS sites so will be arrange locally to the performer.

This will avoid trips to Preston for performers. Local training managers John Burdon and Angela XXX. Their role is to give training and support to access services in the future.

NS highlighted the major issues NTW is having with levy payments. John Wilson has been dealing with this since the merger in Feb 2015 but there has been no progress on NTWLOC receiving accurate payments. NS asked who we should contact at a higher level to deal with this. JK will take this on herself.

janet.knox@nhs.net - payments issue email.

JK and Ken Youngman asked that NS flag this information that at the forum for any other issues on LOC payments. LOCs to contact Janet if there are more outstanding issues.

Notes from last meeting.

a) Forensic audit - no comments on longevity. NHS England to look into this again and share the info. Two cases with implications. These contractors are being looked into at present. Contractors are aware.

b) Serious Incidents - Yasmin to do a presentation to individual LOCs. LOC's to give an appropriate date for this to be done.

Action LOC - to email Linda Boshier with dates of these meetings. Schedule a training session with LOC AGM. LOCs to get a date to LB within 2 weeks please. Linda.boshier@nhs.net

NHS England (CNE) update: Craig Melrose interim medical director. Nichola Smith is leaving NHS England to go to New/Gateshead CCG. Helen Raynard is new contract manager for optom/pharmacy.

Jane Ranns is new OA. She will sit on the decision making group to give distance between the examiner (Angela) and the action/decision side of things.

GOS assurance: Next national self assessment will kick off April 2016. Local assessments are on going. No major issues. Compliance generally very good. Contractors been very co-operative.

Themes relating to concerns - NHS England / LOCs

NHS England hold a log of concerns about contractors and look at appropriate interventions.

Activity within care homes is causing some concerns to NHS England and they are actively looking at this at present. Concerns regard

Preventing other optoms testing within home.

Patient has no choice of care provider.

Also looking at if money has changed hands "inducement". NHS are monitoring 2 contractors at present.

Angela and Helen are currently drafting a letter to go out all care homes about GOS services and the provision that should be provided for residents etc.

Use of NHS logo is currently being looked at very seriously. Major concern that certain contractors are targeting vulnerable people.

LOC local issues - none

Business continuity / IG (risks related to weather) - commitment in principal for continuity planning. All contractors need an emergency contact from NHS England who they can contact if service provision is affected. Most contractors will have a business continuity plan as part of the PENE Subcontract. Main issue is that Patient Records are at risk etc.

Next meeting: Friday 15 April 2016; MR 3, Old Exchange, Darlington

Future meeting times: 13:00 – 14:00 ZR to report to KY on dates/meeting venue

LEHN report

LEHN membership and constitution

- The LEHN has vacancies on the core group. 1 GP, 1 CCG / NECS, 1 Optometrist and 1 Ophthalmologist. Angela Henderson will seek to find replacements by writing out for expressions of interest via the Primary Care Quality and Performance Team and LOC's
- Dr Barbara Gallwey, North Durham CCG, has withdrawn from the Network creating the GP vacancy
- Janet English, Principal Optometrist South Tees FT, has expressed an interest and attended the meeting to learn more about the role of the Network.

Chairs Report

- The education event (Dementia) took place on 30th November. Although there was lower attendance than anticipated it was a very productive and emotive event. Angela Henderson will be working with the Dementia Hub and Newcastle University to develop training going forward.
- **England Vision Strategy Update**
Visionary NE have formed the North East Visual Impairment Network and have agreed to focus on creating a directory of services, a volunteer bank to share volunteer resource across the region for support such as IT mentoring. The group will also share areas of good practice across the region. In conjunction with the LEHN we have approached EVS for support in work around ECLO provision and improved certification rates. Angela Henderson has been asked to join the next meeting on 9th March.
- **National Optical Conference**

Angela Henderson attended the NOC in Birmingham in November. There was a range of speakers including Professor Carrie Macewen, President of RCOphth who spoke on Collaborative leadership for the sector. LEHN's are an excellent example of how working together across the disciplines of eye health can create innovation and improved patient pathways and care. Angela was invited to speak as part of a workshop on developing an inclusion strategy to help meet the needs of local communities. Angela spoke in EHNA's and some of the findings we have had from DDT and initial outcomes of the Sunderland and South Tyneside work.

➤ **Redcar and Cleveland Council**

Angela Henderson met with the Council regarding the Childrens Vision Screening recommendations last week but as a result of this, they had a discussion around raising the profile of eye health in general within the area. They have asked for a piece to go in their residents Newsletter in June and also any other eye health information which could be shared via social media.

➤ **Healthy Living Opticians**

At the National Optical Conference Michelle Dyos and Shamina Asif presented on Healthy Living Opticians and following this Michelle joined the LEHN to present to the group.

➤ **Task and Finish Groups**

Take Up of Eye Tests; Angela Henderson suggested that the report should use the GOS data to identify areas of low data and should include Health Watch comments and local data.

The group should then work with NHS England and Local Authorities to implement recommendations.

Cumbria Child vision screening report

Trudie Metcalfe and Angela Henderson are meeting with Cumbria CCG on 21 January to discuss. Zoe Richmond recently met with Harry Harrison, Children's Commissioning Manager Cumbria, who is keen on taking up LEHN recommendations regarding community service post vision screening. Zoe has spoken to the South Cumbria Better Care Together Programme Lead to work in conjunction to agree a standardised pathway across Cumbria by September 2016.

Cumbria Low Vision Services Review

Low vision reports have been produced, Angela Henderson and Trudie Metcalfe have agreed to meet with the CCG on 4 February to discuss further.

DDT Child Vision Screening Report

No updates since the last report due to a slowdown in progress. A gap has been highlighted in the service provision in Special Schools. The next step will be to look at the pathway for children that fail their school screening. Aiming to have a fully commissioned equitable service across DDT by September 2016

DDT Low Vision Services Review

The review is on hold due to capacity issues. Angela Henderson suggested to Sue Taylor that Visionary North East pick this up.

Learning Disabilities and Dementia

The report is ongoing; Angela Henderson will pick up any recommendations around vulnerable groups through the Eye Health Needs Assessments.

Amendment to GOS Registration Special Facial Characteristics

The amendments have been approved by the Department Of Health, but they are yet to make an official announcement. Angela Henderson is hoping the amendments will be implemented in the April review.

Improvement of Referral and Feedback Pathways

Mike Nearn continues to look at the Glaucoma pathway. He noted that the first week in

June is Glaucoma awareness week - Angela Henderson will ask NHS England Comms team to produce something regionally.

Feedback pathways - Zoe Richmond suggested a retrospective audit across the region. Mike Bearn agreed to take this forward and find someone to facilitate this work.

EHNA

The South Tyneside & Sunderland drafts will be going out ASAP - anticipating publication of the final documents in early spring 2016. North Tyneside has stalled. Further update at the April LEHN meeting.

Health Watch Updates

Angela Henderson will work with Danielle Davison to format responses to each area based on the "You said, we did" template.

Any other business

- Specsavers / Boots Screening for Schools Campaign - a letter will be sent from NHS England to the schools to outline the Children's Vision Screening Service.
- Cumbria Local Optical Committee (LOC) contacted Angela Henderson regarding the number of flashes and floaters being referred. Angela will discuss this with the CCG.
- A complaint has been received regarding the Referral Triage service being offered by RVI to Northumberland CCG. The details will be passed to CCG for investigation and we shall ask that we are informed of the outcome of this.

PENE update

Chairs report - NTWLOC and ZR won IoP/Childrens. Roll out now.

Durham IOPRR service term finishes dec - should be a year extension

Cumbria iop to finish march 2016. Underused

South Cumbria - van guard site which will include eye services. Will be run through Lancashire CCG. This should kick start activity for Cumbria area. PENE activity will reduce. Cumbria may split N/S. No PENE director will be put in position to replace Eric due to low activity.

JR, Steve, Sarah and Jane will stand one more year. JB can now formally resign. JB stayed on in name due to active bid.

Tees are working to sign post PENE for contracts.

Finance - £36,000 in account. But this includes the LD service (£17,000) ring fenced.

LOC loans can be repaid now. **NS to look into £780 funds.** **Action NS**

There is significant funding in the PENE account (£11k)which needs to be re distributed across the LOCs. LOC to send PENE an order for how much PENE owe for directors time etc. JR will look into the amounts an apportion the funds as required. **LOCs to do.** This will be done before the end of the tax year.

Please send any CET events to Eric - **LOC**

ZR to report to KY on dates/meeting venue etc

Action ZR

LOC Update - reports attached as appendix

NTW -NS reported that Andy McG now chair.

Durham - ZR keen to work on childrens service in this area. Due to new national screening service. This needs to be moved quickly to be run into new school years. JR has an MP visit which will be mentioned.

Tees - concerns over lack of communication with local optoms. JR then discussed the regional CET event. Use this to raise the LOC profile locally.

Regional CET event: Looking at 10-12 months time. All LOCs to get CET reps: Sarah West, Stephanie Cairns, Angela Henderson, Keith Armstrong, Pauline Wellstead, Vera Wilton, Tom Hedley, Lesley Oglethorpe Tony Gibson. **JR to action/facilitate this.**

Admin - practice level activity suggested. Admin support fee was agreed.

Cumbria - most likely to have north/south split of region. Eric standing down at AGM despite no current chair.

NS discussed RMS issues across NTW. The newly implemented referral management system has caused several concerns from contractors as little information has been given about this and referral being bounced back from "monitoring under Optometrist". NTWLOC will contact the CCG clinical leads.

LOCSU Board : LOC representative for the North Region - Matt Jkinson

MJ is chair of Stockport LOC, independent practitioner and also sits on confederation of Manchester LOC, also Director of regional LOC company. MJ sits on LOCSU board also.

MJ sits on the board as a rep of the North of England. He is our contact for any comments or concerns regarding LOCSU work. One area they are looking at is the training and development of LOC officers. Also looking into succession planning and promotion of the LOC.

Workshop - LOC officers, Role specifications and Skill sets

A short workshop was held discussing the roles and skills required for the LOC officers. Discussions will be sent separately to minutes.

Action JR/MJ

AOB

Glaucoma awareness week - national glaucoma awareness week in June 16. Want community optometry linking in with this. LOCs to encourage practices to participate. IGA are leading on this so leaflets should be available.

LEHN - need an LOC representative. There was only one candidate presented so LOCs need to promote others to this role. Lisa Gibson has volunteered to stand. All in agreement. ZR will nominate her from LOC forum. Action ZR and all LOCs to write out for any other volunteers to sit on LEHN core team or lower level teams. Action All

JR - wants all LOC "orders" for PENE work. Must be in tax year 15/16.

ZR - discussion about annual/bi-annual meetings. A decision was made on annual meeting. Next meeting Jan 2017

Close 8.37pm

Next meeting - aligned to Liaison meeting April 15th

Next joint meeting Jan 2017

