LOC Minutes 27/01/2022

In attendance

Peter Bainbridge (Chair) PB

Peter Hampson (Secretary) PH

Louise Sarjeant (Treasurer) LS

Divya Sudera (Vice Chair) DS

Inderpal Bansal IB Jaspinderpal Bansal JB

Saima Naroo SN Iram Noreen IN

Wasim Sarwar WS Paul Sidhu PS

David Wright DW Abrar Zaman AZ

Apologies – nil

Conflicts of Interest

LS still missing 5 declarations.

Minutes of previous meeting – Proposed as correct by SN, seconded by IB

Matters arising - nil

Chair’s Business

PB – conversation with CoO about document regarding post op cataract scheme. Spoke to clinical advisor who justified everything in document. Lack of post op cataract not based on published data, just came from Royal College Ophth. Suggested the CoO should oppose proposal if they disagree with it. Not good for either the profession or the public.

BMEC asked for letter to be sent around saying they were low on staff and were overwhelmed, but would still see emergencies.

Secretary’s Business

PH little LOC activity. IB new face mask guidance? PH guidance for healthcare hasn’t changed, formal communication due. Patients should be encouraged to wear masks. Optics more complicated as we’re exempt from guidance, so down to practice policy. Can mandate mask wear as long as policy doesn’t discriminate on grounds that would breach equalities legislation.

PB assume most people will continue to follow College guidelines as standard to be judged by. PH College due to transition to green, don’t know when or what new normal is.

IB so not mandatory for opticians to wear mask in practice? PH the law that said face masks were compulsory never applied to us apply to us, always been exempt. Public perception is that now it will change. As long as don’t discriminate, need to consider if can make reasonable adjustments, that’s up to you. AOP website has guidance and template policy. PS can we ask why they don’t want to wear a mask? PH no, should take it at face value. DS can you ask if they’d mind wearing one? PH as long as you don’t force them.

IB has anyone seen any increase in viral conjunctivitis. WS trying to gather info to see if linked to covid. PH feasible. Omicron more of an upper respiratory infection, so potential for increased viral conjunctivitis.

Regional confederation

PB document sent round. Any questions? IB lots of overlap between Regional Confederation and LOCSU? PB LOCSU advise and help LOCs and ROC represents in a similar manner to LOCs, not doing the same pieces of work.

PH LOCs are statutory bodies written into legislation so have a statutory footing to interact with ICS and PCNs etc. Because of the footprint of ICSs an individual LOC will not realistically be able to interact as too small, but the regional confederation would give us that footprint. It would function as the individual statutory bodies but working collaboratively. LOCSU not a statutory body so not mandated to have any discussions with ICS or CCGs. Commissioner’s may be forced to talk to LOCs whereas LOCSU might not allowed to attend.

PB proposal to accept in principle the confederation of BSOL and BC LOCs to forward to the AGM? Unanimous – all in favour.

Primary Eyecare Services

WS - Wolverhampton had post op cataract launch 2 weeks ago. In discussion with BMEC about post op cataract and GERS a few weeks ago, but no update since. BMEC won’t contract based on CCG, any patient seen at BMEC can be discharged to any practice and be paid. All guidelines in place, just waiting to start.

PH outstanding payments for early CUES still. Dharmesh Patel says still catching up with back log. WS payment issues starting to be resolved.

WS BSOL CCG asked if any practices interested in piloting paediatric referrals. Liaising with consultants about quality of referrals. PB email says looking for willing volunteers to look at app for better comms between optoms and Children’s Hospital. Aims are to improve clarity for referrers, avoiding duplication of referral, ability to send high quality images and videos, zero percent lost referrals, access to leaflets for parents and referrals, two-way communication process, and more accurate triage.

Would be good if worked for all referrals, but such a small number of patients referred to Children’s Hospital. PH how does the data get out of the PMS to the app? PB no further info. WS they want feedback for it to go forwards. PB will reply and report back.

Local Workforce Development

PB resubmitted application for funding in the hope that it goes through and we will receive some money.

CPD Officer Update

WS CET event postponed until November. Could have CPD talk at AGM. PB how will CPD differ from CET. WS not much from our point of view, for the attendees it’s more involved. PB CPD supposed to be more varied, do we need to approach it differently? WS don’t think so, no real difference. Can have a half point now, eg 30 minute talk.

AGM

Thursday 31st March at 7pm virtually. PB CPD at AGM?

ICS/PCN engagement

PB due to write to them, still having difficulties finding contacts.

Treasurers Business

LS we have one year’s worth of reserves, which is staying steady. Need treasurer’s and chair’s report for AGM, documents due to go out in a few weeks.

AOB

DW – who runs diabetic screening, need to contact them as local practice ‘poaching’ patients? PS still HEFT, Paul Galsworthy.

Date of Next Meeting

Thursday 19th May 2022 @7pm (in person)

AGM 31st March 2022 @ 7pm (virtually)

Actions

LOC members to complete conflicts of interest form