

**AGM**

**12 May 2022**

**1930 hrs**

**Via Zoom**

Recorded by

Carolyn Hudd, Secretary

**Chair’s Welcome**

Colin, Gault, Chair of LOC began the AGM by welcoming the attendees to the meeting and thanked them for their attendance. Attendees were asked to leave their name and GOC number in the zoom call chat for the records.

**Minutes of the previous AGM**

Colin recapped the minutes of the last AGM, held on 18 May 2021. These were approved.

**Chairs Report**

* On Tuesday 10th May, The College of Optometrist moved us into the Green Phase in response to the Covid pandemic. This still requires optometrists to wear face masks during testing and continuing to do regular lateral flow tests. Also continuing higher standards of infection prevention and control procedures. With the general population more familiar with these procedures, hopefully the day will come that we no longer have to wear a face mask.
* CUES – Previously COVID Urgent Eyecare Service, has now migrated into Community Urgent Eyecare Service and has been running for nearly two years now. This has been so well received by BSW CCG that it has recently been given funding to run for at least another two years. Some improvements to the service have emerged in the last year, as follows: Triage telephone service activated in January to field calls and help to arrange appointments with CUES registered practices, Face to Face appointment timescales have been increased from 48 hours to ‘within the next 5 working days’ and it is now possible to book patients in face to face without telemed saving input time.

This extension to CUES is a great reason to get as many practices signed up to the service as possible and to provide the best coverage of service across BSW. There is a risk to not making a success of CUES and that is that the CCG are discussing setting up hospital hubs to support the hospitals in the region with the backlogs, but if we can show them practices are keen to get involved with CUES, we can show the how useful our clinical skills are and potentially take on more community work in the future; with the correct funding.

* The Chair attends Bi-Monthly online meetings with BSW Eyecare Network (consisting of Ophthalmologists from the RUH, SDH and GWH and key people from the CCG and trusts that have the authority to implement new services). NHS England is currently transitioning into a different care model. In the past year there are now 7 integrated care boards across the South west. BSW is one of those 7 and they are governed by NHS England Southwest Hub. It is planned that by April 2023, all ICBs will be delegated all responsibility for GP services, dental, general ophthalmic service and pharmaceutical service. That delegation of all 4 pillars of primary care provides opportunities to remove barriers to integrated care and create conditions for local partnerships to thrive, leading to better outcomes for patients and clinical staff.

By attending the Bi-monthly meetings we get to voice our concerns and offer advice on what we can and cannot do in practice to help the secondary care services in a primary care setting.

* The LOC are currently in discussion with the CCG concerning minimum data sets from glaucoma referrals. Glaucoma referral finding are not part of GOS testing. Glaucoma Filter finding is not part of GOS and as such, if this is required then a suitable pathway needs to be place. We are continuing to press the CCG on this issue.
* All onward referrals are to continue going via the BSW triage centre. Urgent emergency referrals can be sent directly to the departments for triaging
* The LOC will continue to meet quarterly. Colin encouraged anyone across the region, especially in the Salisbury and Swindon regions that has an interest in the development of community optometry to come forward. Anyone can request to come to a meeting as an observer. Please also get in touch if you have any queries or questions about the activities you are likely to be involved in. contact@wiltshireloc.org.uk
* The LOC is hoping to host an in-person CPD event later in the year

**Treasurers Report**

* Martin Bull, Treasurer, gave an insight to LOC expenditure in the last year.

Opening balance £22,450.16

Closing balance £21,445.83

LOCSU Levy (at 0.5%) collected - £17,969.10

Income: £4,096.83 (From the levy for the first half of the year and then the LOC levy was stopped)

Expenditure: £4,435 (Mainly spent on LOC meetings (£1,620), hospital meetings (£1,430) and honorariums (£1,300))

As the LOC still has over £20k in the bank and expenditure was only £4k last year, we will continue to **not** collect an LOC levy for the next year.  This was approved with a vote. However, should there become a need to reinstate this; an extraordinary meeting will be called. The LOCSU levy will continue as now, at 0.5%.

**Election of New Committee Members**

* Colin Gault was due for re-election this year and with 3 spaces on the committee, with the addition of a previous LOC member Angela Davey (Haine & Smith) application, both were elected unopposed.

**LOCSU Update**

* Unfortunately LOCSU Representative South west, Alvaro Borgess became unavailable due to another meeting.
* The Chair was able to read an update from Alvaro. The Health & Care bill as now received royal ascent making it The Health and Care Act 2022. NHS England will be the national body overseeing the NHS. Clinical Commissioning Groups will become Integrated Care Boards over the next year.
* Existing procurement regulations will be replaced with the new ‘Provider Selection Regime’ (PSR)
* The Health & Care Act 2022 sees the most significant change to the healthcare system in a decade. The department of health & social care and NHS England have confirmed that GOS will remain a national demand lead service and were nationally agreed with no local variation.
* LOCSU Support is at the Local LOC Regional Chair Forums of which the Chair takes part in every quarter, along with the other Chairs in the south west.
* National Treasurers Forum is attended by the treasurer and discusses engagement representation, case building etc
* Optometry First is a comprehensive first contact care offer continuity of care for existing conditions
* National Eyecare Recovery Transformation Program seeks to get more patients to be seen in a primary care setting rather than a hospital setting.
* No progress has been made on ERS.

**Primary Eyecare Services – Amy Hughes, Clinical Lead (South Team)**

* It has been an extremely busy year for Primary Eyecare Services. Across the country we have seen approx. 380,000 episodes of care across the services and we now have commissioned services in 29 of the 42 emerging ICB structure. All services have now gone live on Opera and they are all being revisited one by one for review and refresh. So if you have any feedback please use the blue bubble to report any issues/ideas where all the information will be collated for improvements.
* PES has seen a full restructure of the organisation and staffing. Amy is now part of the South team. There is now a contracts manager, Anna Buxton, looking after the contracts in the south and a new data analyst.
* You will now have all experienced the new financial package that has been fully integrated with Opera that should mean that invoicing as been much more straight forward and payment more punctual.
* BSW CUES – As summarised by Colin, the contract has been extended for another 2 years showing faith in the service. The new contract (as of 1st April 2022) comes with a small fee uplift which is £52 for a paw appointment and £77 for an enhanced appointment. Whilst this is a relatively small uplift, it is very difficult to secure funding at the moment and therefore reflects the CCGs faith in the service going forward.
* PES are nearly there with getting FP10 pads for the IP part of CUES. This will enable optometrists to prescribe using the pads. Another meeting is due to take place with the prescriptions officer for the CCG so hopefully will launch soon.
* An engagement event will be launched in June for new and interested parties of CUES 2.0
* Amy thanked those who stepped down from the LOC and were big participants in getting CUES up and running in their areas.
* At the triage hub, a call waiting system will be launched the first week of June so please advise patients to keep trying the number and hopefully a welcome message will be in place shortly. The triage lines are open 9-5pm Monday-Saturday, with their busiest period being between 9 & 11 am. Approximately, 15 calls a day are for BSW CUES. This is not the only calls they deal with. They are also doing about 1/3 of the areas telemed at the moment.

**AOB**

* None

**Next Committee Meeting Thursday 7th July 2022**

**Meeting end: 2015 hrs**