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July/August 2016 Newsletter

Mowat picks up primary care brief

THE political upheaval from the Brexit vote eventually reached the Department of Health with Primary Care minister Alistair Burt, leaving the front bench.

Following the reshuffle, David Mowat (right) is the new Parliamentary Secretary for Community Health and Care at Richmond House.



The primary care brief – including responsibility for the optical sector, community services and learning disabilities – will be in the ministerial portfolio of Mr Mowat who has been MP for Warrington South since 2010.

LOCSU and the Optical Confederation have written to the new minister urging him to continue the growing relationship that the optical sector had been developing with Mr Burt.

We have also asked David Mowat to fulfill his predecessor's commitment to give a keynote presentation at the NOC.

Bookings are now open for the NOC and LOCs receive one free place. The Conference will include leading speakers from the NHS, ophthalmology and the optical sector as well as support for first-time delegates.

The NOC takes place at the Hilton Birmingham Metropole from 10–11 November 2016. [Bookings are open via this link.](#)

Sector geared up to deliver – Commissioning Forum hears

THE optical sector is geared up to deliver the Breakthrough Strategy, the third LOCSU Commissioning Forum has heard.



Managing Director, Katrina Venerus said there was “genuine cross-sector commitment” to deliver the challenging targets set out in the blueprint.

“The enthusiasm and support to deliver was palpable throughout the room and across the agenda,” Venerus said.

“Everyone, from multiples to independents, optometrists to opticians, contractors to performers and all the representative bodies, has a distinct desire to secure the numbers achieving accreditation and to deliver services where they are commissioned. Everyone is on board, it would appear.”

The 30-plus delegates included LOCSU's new expanded 12-strong commissioning team, who are supporting LOCs to negotiate with CCGs and mobilise

services to reach targets to double the number of MEC services by April 2017 and increase levels of step-down care in practices.

The Forum also heard about plans to support domiciliary providers to be involved in services and work going on with ABDO to involve contact lens opticians in MEC services.

Delegates were also involved in a series of discussion sessions as part of the Forum held in London on 29 June.

Among the topics were proposals to streamline the process for frontline subcontractors, ways to achieve closer working with practice staff delivering community services and approaches for better engagement between practitioners and practice staff and the LOC.

From the LOCSU Commissioning Team

■ **New Assistant Director, Commissioning, Richard Whittington, explains why LOCs need to contact CCGs ahead of their September finance planning meetings to make the case for more community eye health services and how LOCSU's new commissioning team can help with this.**

IT is widely recognised that the NHS needs to make significant savings. Increasingly, this will require the delivery of services traditionally seen as hospital services in the community, closer to people's homes.

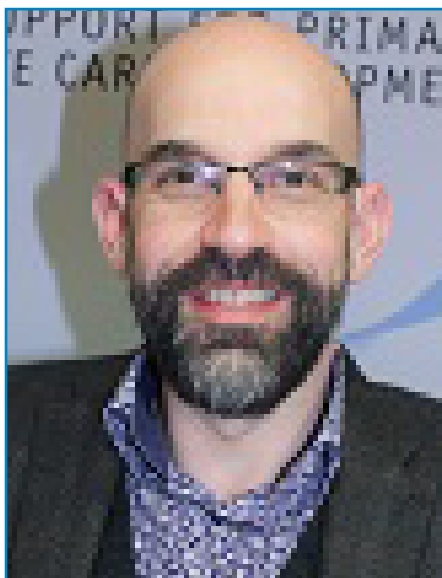
Ophthalmology is ideally positioned to deliver these aims with a large, qualified, workforce in the community already.

Traditionally, ophthalmic care has been delivered in acute hospital departments. These departments are now coming under pressure. In many cases people are taking full days out of their lives for simple outpatient appointments. The situation is not tenable for the future.

Acute trusts themselves report that they are seeing patients referred to them who do not need to be seen in hospital, for example, high numbers of patient referred for potential glaucoma who do not have glaucoma and this can be easily established via simple referral refinement schemes.

In many cases the trusts are struggling in the face of a commissioning programme that under-utilises primary care and, therefore, GPs and optometrists have no choice but to refer patients with simple conditions to hospital care that can easily be treated in primary care.

Primary care is in a pole position to take the pressure off of the acute trusts. There is a large, qualified, workforce that from a clinical perspective is under-utilised. This workforce is already embedded in the community and is easily accessible to patients at



times that are more suitable than traditional outpatient clinics.

Through the commissioning of MECS, Glaucoma Refinement schemes and Cataract pre-assessment schemes, primary care can help to ensure that patients who can be treated immediately are treated and that only those patients who need hospital input are onward referred.

From a patient perspective they can be seen, normally between 24–48 hours of an issue developing, as opposed to waiting anywhere between 8–16 weeks for a hospital first appointment.

Hospitals will see a reduction in the number of inappropriate referrals to their clinics, immediately reducing pressure. Also, this facilitates the delivering of the 18-week constitutional standard. Reduced patient numbers mean that patients experience a higher-quality service overall and referring clinicians can be more assured that patients who are referred are

seen in a more timely manner.

From a CCG perspective by commissioning additional primary care services the overall end-to-end pathway is made more robust and significantly more flexible. From an efficiency perspective only patients who need to be seen in hospital are referred to hospital. And, financially fewer patients being seen in hospital with more being seen in primary care will, potentially, deliver a financial saving.

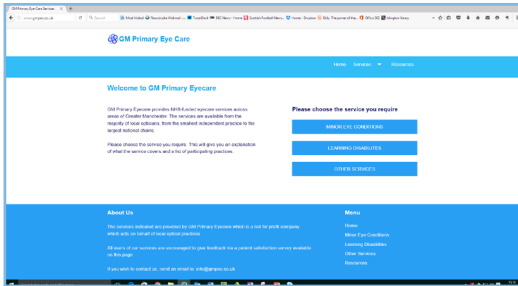
LOCs need to make contact with commissioners to understand intentions. LOCSU can help with this process and LOCs should contact their local LOCSU Commissioning Lead.

The annual commissioning cycle for CCGs commences in September with a letter of intention to acute trusts outlining the context for that acute commissioning round. It is very useful if a sentence relating to ophthalmic commissioning is included in that letter. The commissioning team are here to assist with this.

In some areas local primary care schemes may already exist but be under-utilised. In that situation LOCs should request review meetings with CCG commissioning leads to try to understand the reasons for the under-utilisation. Normally, the reasons are varied and multi-faceted but simple steps can be put in place to address issues. Again, LOCSU's newly appointed Commissioning Support Officers can support your LOC to push this forward.

New patient website for PECS has map of participating practices

LOCSU has developed a patient-facing website for GM Primary Eyecare to help launch the largest learning disabilities pilot in England and city-wide MECS.



A key attraction of the site is a location map which plots all the optical practices providing a specific service.

The map element is a free widget which can be updated by simply dragging a new Excel spreadsheet with



the postcode addresses of participating practices. The site will be used as a prototype for other Primary Eyecare Companies who wish to adapt it for services in their own local area or region. The site, has a responsive design and works on mobiles, tablets and desktops. To see the site in action, visit www.gmpec.co.uk.

First graduate from ILM coaching and mentoring

LOCs will soon be able to take advantage of qualified coaches and mentors as the expert-accredited Coaching and Mentoring course produced its first graduate.

Liz Greenwood (pictured right) has become the first person to gain the Certificate Level 5 in Coaching and Mentoring awarded by the Institute of Leadership and Management and introduced last year by LOCSU.



investment for LOCs."

Congratulating Liz on her achievement, LOCSU's Managing Director Katrina Venerus said: "I am delighted that Liz has become our first mentor in the sector. I am well aware of the amount of work and dedication required to make the grade.

"The skills gained to become an accredited coach and mentor will be particularly useful for LOCs to use around the issues of performance and leadership. Although LOCs will pay a flat fee for the services of an ILM-accredited coach, LOCSU believes, having introduced and funded the qualification, that this will be seen as a worthwhile

The widely-recognised, management qualification, aimed primarily at LOC Chairs and LOC Company Clinical Governance and Performance Leads, is designed to offer current leaders new skills and the opportunity for experienced leaders to pass on existing skills.

The coaching and mentoring programme ensures that the wealth of experience and skills built by individuals is inherited by the next generation of optical leaders. Prospective candidate should visit the [Learning and Development pages](#) of the website for more information.

See the benefits of an LOC website

BRENT & Harrow, Doncaster & Bassetlaw and Berkshire are among the LOCs who have recently signed up for an LOC website. The **LOCNET platform**, provided free by LOCSU, offers a free template and hosting. Check out some of the LOCs using it to keep in touch with performers and patients. Email cmcgachy@locs.co.uk for more.

LOCSU joins parliamentary call for urgent overhaul of LD eye services



■ L-R, David Scott-Ralphs SeeAbility, Katrina Venerus LOCSU and Lord Holmes of Richmond.

KATRINA Venerus helped launch a SeeAbility petition in Parliament last month demanding a national approach to sight testing for people with learning disabilities.

At the event, hosted by Lord Holmes of Richmond MBE and sponsored by SeeAbility and the Optical Confederation, MPs and peers heard personal testimonies from people with learning disabilities explaining the life-changing effects regular, tailored sight tests can have.

LOCSU, a long-time joint campaigner with SeeAbility for dedicated sight tests for people with learning

disabilities, helped launch a nationwide petition calling for an urgent overhaul of services. LOCs are being asked to sign and promote the petition, which can be found [here](#), locally.

More than 20 MPs and peers, including former Primary Care minister, Alistair Burt and Minister for Disabled People, Justin Tomlinson, attended the event on 5 July in the Houses of Parliament.

LOCSU welcomes Primary Eye Care Framework

NEW Assistant Director, Commissioning, Richard Whittington, has welcomed the publication of the Primary Eye Care Framework saying it's an obvious choice for CCGs.

"The current piecemeal approach isn't working. LOCSU congratulates the Clinical Council for Eye Health Commissioning for the timely and relevant publication of this much needed document and we urge all CCGs to fully implement its recommendations."

He said LOCSU, which has developed a set of accredited national pathways referred to in the Framework, believes that outcomes for patients will improve if there is a co-ordinated and multi-professional approach to tackle both urgent and routine activity.

[Read the full release](#) and link to the CCEHC Framework.

Eye health summit case studies available for download

KEYNOTE presentations from the recent NHS eye health summit in June are now available to download from the LOCSU website.

The Conference, *Immediate solutions to address demand and capacity pressures in the Hospital Eye Service*, showcased innovative and collaborative service models from around the country.

The event, aimed at commissioners, brought together leading eye specialists and partners responsible for delivering commissioning guidelines, to share pathways and best models of practice that deliver optimum cost-effective care for eye patients both in the community and in hospital eye services.

The full programme, biographies and presentations can be downloaded from the Eyecare Commissioning pages of the LOCSU website. Follow this [link](#) to access the PDF files.

Webstar Health launch regional OptoManager User Groups

Webstar Health is to host a series of regional OptoManager user group meetings. The feedback meetings will be held in Manchester (7 September) Durham (14 September) Birmingham (21

September) and London (5 October).

LOCSU is helping to facilitate the events and is in the process of contacting LOCs and Primary Eyecare Companies with full details.

RECENT MP practice visits – organised by the Optical Confederation's Public Affairs team along with LOCs – help spread the message about the benefits of community eye health services.



MP hears how more MECS could reduce GP appointments

PLYMOUTH MP, Oliver Colville, agrees that more MEC services could reduce the appointment pressures on GPs. Currently, GPs are estimated to see 4.5 million eye health cases a year.

Mr Colville, MP for Plymouth, Sutton and Devonport, visited Boots Opticians in July to meet Devon LOC.

Following his visit the MP said: "I heard how opticians and optometrists can be doing more for patients to take the workload off general practitioners.

If more practices can offer community services as well this in turn may take the pressure off GPs."

Devon LOC Chair and Optician Max Halford said: "It was great to meet with Oliver and hear that he is supportive of making greater use of opticians and optometrists in Devon, to deliver eye care beyond the sight test.

"This could include, for example, a Minor Eye Conditions Service. This would allow patients with minor but urgent eye problems to be seen in a local optical practice – freeing up capacity in GP practices and Hospital Eye Departments – and is already delivered safely and successfully in many other parts of the country."

Image: L-R: Max Halford Chair Devon LOC, Oliver Colville MP and Taymar Mote.

MP concerns over 'poor' IT



■ L-R, Kerrie Foley, Ruzina Khanam, Vince Roberts LOC Chair, Khalid Mahmood MP, Debbie Graham NHS England, Fatima Nawaz AOP and Ian Hadfield LOC Secretary/Treasurer.

BIRMINGHAM LOC has warned a local MP that eye services will suffer because optical practices are not connected to the NHS IT system which allows the secure transfer of clinical images and patient data.

MP for Birmingham Perry Barr, Khalid Mahmood, has heard that a decision by the NHS and GPs to turn off fax machines leaves poorly connected optical practices to send vital diagnosis and referral by email and post.

During a visit to a local optical practice in June, LOC Secretary, Ian Hadfield, warned Mr Mahmood of the problem the optical sector faces from lack of IT connectivity.

"It was good to meet with Khalid and let him know about the postcode lottery faced by his constituents as some – those with a GP associated with Sandwell and West Birmingham CCG – have full NHS-funded access to a range of additional eye care services provided by community optometrists, but others – with a GP associated with Birmingham Cross City or Birmingham South &

Central CCGs – do not.

"We were also able to discuss the impending communications nightmare that is about to seriously affect eye care services because the GPs and hospitals are about to switch off their fax machines leaving community optometrists with no means by which they can securely transmit referral information.

"Khalid was most concerned to hear about these problems and has offered to do anything he can to help to resolve them."

Following the visit to Hadfield Opticians, Mr Mahmood said: "People with sight loss issues rely on good community-based services. Currently, there is not the equality of high-care services across all parts of the city to encourage early detection and treatment. The people of Birmingham deserve better."

Venerus' View

AS I have explained in previous columns, the key focus for LOCSU in recent months has been the Breakthrough Strategy, and in particular getting the enhanced team in place. Last month I reported that the new LOCSU commissioning team had completed the induction period and were now being introduced to LOCs to discuss how they can support them in the months ahead. I look forward to talking about this in more detail in the coming months.

Beyond commissioning, the other most significant area that LOCSU has been working on is supporting contractors across many LOC areas to resolve the problems they have been facing with Primary Care Support England (PCSE). As you will know, Capita won the contract to deliver the PCSE service on behalf of NHS England from September 2015. Most readers will also be aware that contractors in several areas have suffered a serious and significant financial impact and reduction in service levels since the migration of the processing of GOS claims to the PCSE offices in Leeds and Preston started earlier this year.

It strikes me that what we may not have communicated widely enough is that the representatives of LOCSU and the Optical Confederation on the PCSE Stakeholder Forum have spent considerable time working with Capita and the NHS England Service Management Team to explain the issues and agree and monitor a recovery plan that was produced by Capita back in May. I have come to that conclusion because of suggestions in some quarters that the national bodies haven't done anything about the problems practices have been facing.

I can assure you that we have most definitely

been on the case. LOCSU has intervened on behalf of hundreds of individual contractors – from businesses large and small – to get urgent special payments agreed in order to avoid cashflow issues arising. This has taken considerable time and effort and perhaps in hindsight it is something we should have been doing more to publicise.

Due to the fact that problems with the service levels being delivered by PCSE are continuing, LOCSU and the Optical Confederation have written to Simon Stevens recently to bring to his attention that, despite our efforts to support Capita and NHS England to be able to address the issues, the service is still not fit for purpose.



It is a fairly bleak picture but there is a light at the end of the tunnel in all of this. The new approach to processing GOS claims that Capita are looking to adopt should make life easier for practices in the long run. For the time being though, our focus is on ensuring that the current operation gets to a place where it meets our expectations.

I would like to point out that every six months, PCSE has to circulate a Customer Service Survey to gather feedback from service users. It would seem to me judicious for all contractors who receive a request to complete the survey to do so and give an honest appraisal of the service they have experienced. The bodies representing GPs, dentists and pharmacists are encouraging their members to do the same. The phrase "warts and all" springs to mind!

Your comments and suggestions are always welcome: katrinavenerus@locsu.co.uk or [@katrinavenerus on Twitter](#).

Prescribing framework launched

A NEW, updated and restructured [Competency Framework for all Prescribers](#) has been published by the Royal Pharmaceutical Society (RPS) after collaboration between the College of Optometrists, all the prescribing professions and patients' groups.

The Competency Framework for Prescribers outlines a common set of key competencies that are considered central to effective performance needed by all prescribers, regardless of their professional background.

The Framework supports healthcare professionals to be safe, effective prescribers. It can be used by any prescriber to underpin professional responsibility for prescribing and also by regulators, education providers and professional organisations to inform guidance and advice.

The Framework sets out ten competencies, focussed on the consultation process and prescribing governance, within which are statements describing the activity or outcomes prescribers should be able to demonstrate.

GOC survey on challenges

THE GOC is seeking views from its registrants on its performance and the challenges faced by the optical professions.

The 2016 Registrant Survey – conducted online by independent research company Enventure Research – will enable the regulator to better understand registrants' experience of the 2013–15 Continuing Education and Training (CET) cycle, the implementation of new Standards of Practice and registrants' perceptions of the GOC as a regulator. The deadline is 5 August 2016.

MECS in the cities

A REMINDER for optometrists looking to undertake MECS accreditation that the Part II practical assessments will be hosted by the College of Optometrists with events in both

Manchester and London.

Bookings are now open for assessments on [Thursday 18 August at the General Medical Council in Manchester](#) and on [Wednesday 24 August at](#)

[the Royal College of General Practitioners in London.](#)

LOCSU is also working with LOCs and WOPEC to schedule a number of regional OSCE events for the autumn. Please visit the [WOPEC event pages](#) for more information.

Dates for your Diary

- Webstar Health Optomanager User Groups. 7 September Manchester, 14 September Durham, 21 September Birmingham and 5 October London.

- [National Optical Conference](#) 2016, 10–11 November 2016, Hilton Birmingham Metropole NEC.

- The College of Optometrists is hosting 25 [regional events](#) throughout the year.

- [Optometry Tomorrow Bitesize](#). Sunday 18 September, Holiday Inn Wembley. One-day conference and exhibition, offering the best sessions from their annual

conference.

- The Association of Optometrists (AOP) has launched its extensive programme of CET and CPD events throughout the country, offering over 200 CET points during the course of the year. [Download the guide.](#)

- Fight for Sight is making its research presentation roadshow available for LOCs. The presentations are aimed at both optometrists and dispensing opticians, and are CET certified in addition.

Find out more by emailing [Julian Jackson](#) or by telephone 07773 800073.

If you have an item of interest for *LOCSU News*, contact Editor **Chris McGachy**, Head of Communications. You are receiving this email from the Local Optical Committee Support Unit. If you would like to unsubscribe, please contact info@locsucol.co.uk.