LOCSU

Foundations for reform

Annual Report 2018-19

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Foreword from Chairman Mike Fegan

It is a pleasure to present my first LOCSU annual report. Since I became LOCSU Chairman, the optical sector and LOCSU have had to deal with events that could not have been foreseen a year ago.

This report is designed to cover the events of 2019 and the period covered by the last set of financial statements, and does not, strictly speaking, cover the period of the current pandemic. However, it is worth acknowledging LOCSU's leading role in responding to the crisis, and in particular the LOCSU initiative to develop and roll out the Covid-19 Urgent Eyecare Service (CUES). At time of writing, CUES is being commissioned via local CCGs. I hope that CUES can become the foundation for a growing set of extended services delivered by primary care. Clearly, all of this will be covered in much more detail in the next annual report when the outcomes from the crisis can be more comprehensively assessed.

Even before the pandemic LOCSU was working hard in its key role as the support organisation for LOCs. I have been particularly struck by how much is delivered by a small team and this year there has been an increased focus on LOC support, primarily through the recruitment of the new Optical Lead team.

LOCs across England have been engaging with a self-assessment Needs Analysis tool, which has been designed by LOCSU and which enables LOCs to understand their organisations and develop their plans. LOCs have also benefitted from the training and development opportunities offered by LOCSU.

Nationally, LOCSU has been engaged in a range of forums around the future of the NHS via the Long-Term Plan, identifying where optical practice and LOCs will have a role. This work has been led largely by the Chief Executive Officer along with our Interim Clinical Director, with support from the wider team. As a result of this work LOCSU is now seen by the NHS as a key stakeholder in the development of primary optical care.

LOCSU has also continued to support Primary Eyecare Companies (PECs) in their work, with a marked increase in the number of services being delivered against a backdrop of consolidation of the PECs. LOCSU has worked to improve governance arrangements for LOCs and PECs.

We are at a point of significant change across the NHS and it is vital that LOCs and PECs and the wider optical sector is well organised to meet the challenge. LOCSU is doing its part in bringing LOCs together and forming regional forums which will give LOCs more relevance, and the sector as a whole must develop the ability to speak with one voice.

Finally, there is no doubt that the rapid rise of virtual consultation and remote working driven by Covid-19 will continue as the service enters a recovery phase and a new normal is established. We must be ready to embrace the opportunities offered by technological change and ensure that LOCs are able to integrate technological advances into a sustainable, successful future for the sector.

LOCSU is committed to providing support and advice across a wide range of issues and I hope that all LOCs can engage in discussions and benefit from this support.

Introduction from CEO Richard Whittington

Welcome to a new look annual report. Normally annual reports are written to be a retrospective account of the past year. However, that approach does not seem appropriate as we grapple with the ongoing effects of the Covid-19 pandemic and try to understand what it means long term for the optical sector.

Therefore, whilst not specifically mentioned in this report I will draw attention to the response to the pandemic to date and in particular how LOCSU has led elements of this, for example the development of the Covid-19 Urgent Eyecare Service (CUES). CUES provides the basis of a new and inclusive extended service, bringing together the best of the current MECS with more use of Independent Prescribing, together with the adoption of virtual consultation and more collaboration between primary and secondary care.

Since the last annual report there has been significant change across the NHS, driven by the publication of the NHS Long Term Plan. The NHS view of service delivery and service integration sees a fundamental shift away from siloed, tariff-based service delivery towards a more integrated and collaborative approach. There is a clear opportunity to integrate primary care optical practice into NHS delivery, with practices and Primary Eyecare Companies forging new relationships with the wider NHS and other primary care providers to deliver new and different services. LOCs will need to be at the forefront of this development and delivery, and LOCSU will continue to support this process as well as innovating new processes to support integration.

Primary Care Networks (PCN) and Integrated Care Systems (ICS) will still be the vehicle of service delivery and innovation. They have been developing at different speeds across the country prior to and during the pandemic. The challenge for our sector is to engage with a significant number of new organisations at a local level whilst simultaneously engaging with ICS organisations at a regional level.

LOCSU took up this challenge through the appointment of the new Optical Lead team to replace the Commissioning Lead team. The focus of this team is to support LOCs with this task of dual engagement, whilst also helping LOCs to understand their own needs and how to progress. The LOC Needs Analysis tool has been instrumental in helping LOCs to identify needs and opportunities and early results have been incredibly enlightening.

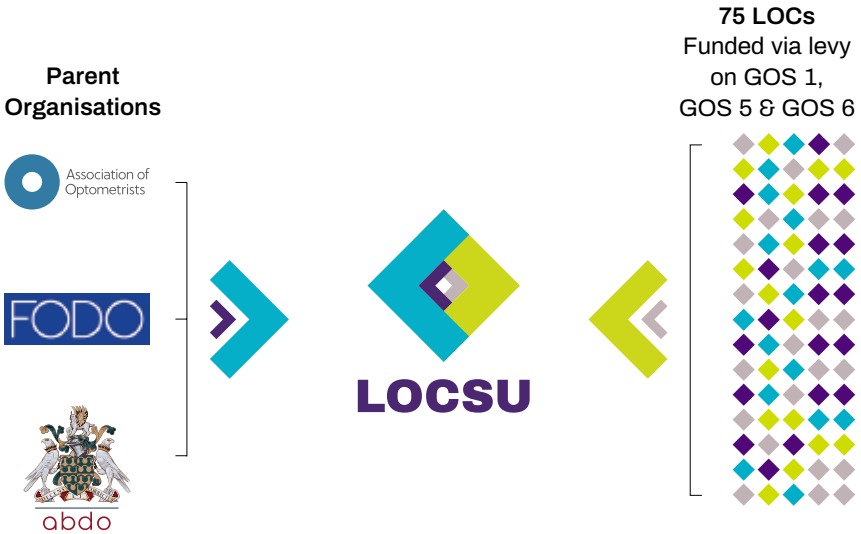
As the new NHS plan emerged, it was anticipated that LOCSU's plans might need to change in response. LOCSU had intended to rapidly implement revised plans using the financial reserve that had been built up over the last 18 months while NHS plans have been developing. This is still the aim and intention, although the financial position has changed significantly due to the pandemic. The financial statements within this report outline the financial position at the end of the 2018/19 year. However, some of the explanatory notes correctly address more up to date concerns as we move into the Covid recovery period. Some plans may need to be adjusted in light of the financial position, however the central aims will remain unchanged. Over the course of the next two years as we first begin to emerge from the pandemic, and then set about establishing a new normal, LOCSU is looking forward to continuing to support LOCs, Contractors and Performers in the ways detailed within this report, including areas identified from the wide consultation commenced at the 2019 NOC.

What we do

Rising to the challenges of change

LOCSU was established in 2007 to provide support for Local Optical Committees (LOCs) across a range of activities from commissioning guidance and policy development to governance and compliance support, education and communications. The fast-moving healthcare landscape means LOCSU must continuously adapt its strategy and activities to ensure that it meets the changing needs of LOCs.

Who influences LOCSU?



Today, the NHS along with the rest of society is facing the biggest challenge of our lifetime as we deal with the immediate effect of the Covid-19 pandemic whilst establishing services to support recovery and the formation of a new normal. This is against an existing backdrop that saw the NHS undergoing the most significant programme of reform in its 70-year history.

The situation presents very significant challenges which need to be dealt with through a unified approach; however it also presents opportunities for the optical sector and it is LOCSU's role to help LOCs engage with key stakeholders to drive an agenda that benefits patients, ensures the best use of public finances and underpins a strong future for the sector itself.

LOCSU does this through its work in the following key areas;

Policy work and lobbying

Policy development and lobbying are central to LOCSU's activities. We ensure that the sector presents a strong, informed and unified voice to influence key decision-makers and raise awareness of the enormous expertise in the optical sector and its potential to deliver extended primary eyecare services in community practice. We develop policies that meet the requirements of NHS Commissioning and practical processes in relation to these services.

We also work with the Optometric Fees Negotiating Committee (OFNC) routinely in order to feed information regarding the interface between GOS services and extended services and throughout the initial response to the Covid crisis worked within sector body agreed OFNC framework before leading the development of the Covid-19 Urgent Eyecare Service (CUES).

Commissioning support

LOCSU gathers and consolidates commissioning expertise and makes it available to LOCs to assist in engaging with NHS commissioners and other key stakeholders. We facilitate collaboration within the national LOC community, help to develop clinical pathways and enable LOCs to deliver innovative, high quality, cost-effective eyecare services.

Governance and compliance

Robust and effective governance is essential in reinforcing the credibility of the optical sector with stakeholders and the wider public sector. Through Quality in Optometry (QiO) LOCSU provides an up-to-date toolkit that enables contractors to demonstrate compliance with GOS/NHS standard contracts and data privacy requirements; providing assurance to NHS England and Primary Eyecare Companies that they are compliant with the relevant regulations. LOCSU offers guidance on effective structures, governance and succession planning to assist LOCs in discharging their statutory duty to represent the sector.

75

There are 75 LOCs

91%

91% of LOCs have established at least one community service

83%

83% of CCGs offer at least one community service

Communication

In a noisy and crowded public health landscape, strong communication is vital to ensure the sector's message resonates powerfully with stakeholders. We engage with national and regional media providing informed spokespeople on issues relevant to eye health and with health and optical trade press. We ensure that LOCs are kept informed of relevant news, issues and campaigns through our regular communications via newsletters, website and social channels. This Annual Report is a medium to share examples of best practice and innovation within the wider LOC community.

LOCSU acts as a link between national professional optic bodies such as the Association of British Dispensing Opticians (ABDO), the Association of Optometrists (AOP) and the Federation of Ophthalmic (and Dispensing) Opticians (FODO).

Training

Continued Education and Training (CET) is a vital component of ensuring that the optical sector is fit for the future with skills and knowledge needed to underline its expertise and intrinsic value to public health provision. LOCSU provides training to support LOCs and their members covering topics from induction into LOCs and developing leadership skills to coaching and mentoring. In association with the Wales Optometry Postgraduate Education Centre (WOPEC), LOCSU offers training courses for extended primary care services to support the implementation of LOCSU's clinical pathways.

We operate a national team that provides services to LOCs in conjunction with a network of regional leads who provide hands-on assistance and expertise. We are focused on working in partnership with LOCs to deliver timely, knowledgeable support and guidance to navigate the changing public health service environment and assure a strong future for the optical sector.

What LOCSU does for LOCs
Our core activity happens at local (LOCs), regional (regional forums) and national (national discussions) levels.

LOCSU is governed by its first principles, which inform our decision-making and strategic focus. These principles are that:

- LOCs are local experts in eye health and the eye health pathway must engage with LOCs to ensure this expertise is best put to use
- Far more patients can be seen in the community than is presently the case
- PECs are the best model for the delivery of extended primary eyecare
- Community practice must be better valued
- Collaboration across the optical sector is essential
- Optics must position itself for the future
- Good governance is vital

NOC 2019

NOC 2019 Workshops Summary and Action Plan

The theme of NOC 2019 was to understand and debate the changing NHS and how LOCs could engage with the reform agenda. Delegates heard keynote presentations from NHS speakers Matt Neligan, Director for Primary Care Commissioning and Transformation at NHS England and NHS Improvement and Professor James Kingsland, OBE describing the proposed changes.

The proposals have been interpreted for the optical sector as follows:

From (historical and existing NHS)	To (post-transformation NHS)
Trust dominance	Greater provider diversity
GP dominated primary care	Other primary care more prominent
Paper and fax	E-referrals
Treatment	Prevention
Sight testing	Sight testing, additional care delivery and monitoring
HES dominated	Community focused
Urban focused workforce	Diversified workforce across all sectors
Fragmented commissioning	National pathways
No IT	Integrated IT/Spine
Refraction/retail perception	Clinicians
Two-tier care	Closer integration
Siloed provision	Multi-disciplinary teams
Direct to practice extended care	Single contract via PECs
Monitoring in hospital	Monitoring in community
Little/no referral feedback	Better feedback
7m+ ophthalmology outpatients	30% outpatient reduction

Following the keynote presentations and an on-stage panel discussion, delegates participated in interactive breakout workshops covering 6 topics:

1. How can LOCs engage with the emerging Primary Care Networks (PCNs)?
2. Within a reformed NHS structure, what support do LOCs require from LOCSU?
3. What could LOCSU look like in the future?
4. How should clinical pathways develop within the reformed NHS?
5. Would LOC regional forums be a useful development?
6. How can LOCs engage with Integrated Care Partnerships that are evolving out of the current Sustainable Transformation Partnerships (STPs)?

There was an excellent level of participation in the workshops, which generated a significant amount of ideas and suggestions. These have been summarised into a list of Suggested Activities and a resulting LOCSU Action Plan.

Prakash Rughani – Chair of Barnet, Enfield, Camden & Haringey LOC

Suggested activities

(The corresponding workshop number is shown after each activity, as some activities were suggested in more than one workshop).

- Operational support and advice to LOCs around PCN Engagement (1,2)
- PCN engagement toolkit, including information that can be communicated to PCNs about the primary care offer (1,2)
- Continued expansion, innovation and development of clinical pathways, especially those that take pressure from GP practices (1,3,4)
- Support LOCs in local pathway redesign and share best practice to support a standard model clinical pathway (4)
- Drive and own the development and delivery of healthy living services in Optical Practice (4)
- Look at all opportunities across the NHS with a view to understanding how optical practice can become involved (4)
- Comprehensive IT connectivity (1,6)
- Commissioning and negotiation support (2)
- Communication support and education (2)
- Specific committee structure and succession support (2)
- Strategy, support and guidance on how LOCs should engage with PCNs and the wider reformed NHS (3)
- Full transparency across all LOCSU activities (3)
- Retain local focus by supporting LOCs locally (3)
- Facilitate the coming together of LOCs through regional and national forums to foster a single voice (3)
- Ensure LOCSU and Regional Forums act as listening organisations (5)
- Regional Forums should build on regional experience (5)
- Regional Forums must foster local links and collaborations but without diminishing LOCs' local influence (5,6)
- Regional Forums to be democratic with equal status for all LOCs regardless of size, with a strong and clear constitution (5)
- Regional Forums must ensure that communication is central and works both outwards from the Regional Forum and inwards from LOCs (5)
- Regional Forums must have agreed programme of work that would not be influenced of affected by government or NHS changes (5)
- Regional Forums must be formed within a framework that has a National Structure above a Regional Structure (5)
- Regional Forums should not be dictated to by any organisation (5)
- Regional Forums must not isolate any LOCs (5)
- Recruit more Optical Leads and attend more meetings. Strike balance between facilitation and guidance as well as local and national approaches (3)
- Build on improved Comms by maintaining what is good whilst also engaging with new channels such as Instagram (3)
- Become the one coherent single voice of optometry nationwide (3)
- Undertake horizon scanning in order to prepare the sector for future developments (3)
- Maintain and develop Training and Resource support (3)
- LOCSU must drive the work to capitalise on the opportunities that are available but also be aware of and address the challenges with NHS Transformation (6)

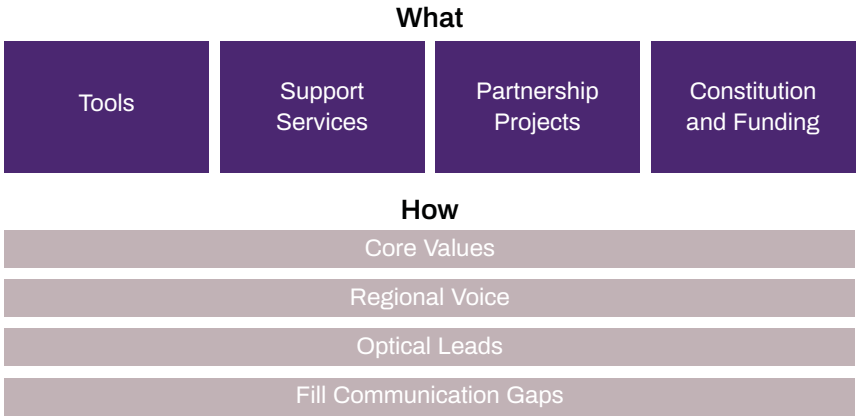
Action plan summary

The suggested activities which can be progressed under LOCSU's remit have been summarised into an action plan.

The action plan splits into two broad sets of activities – What and How:

- What – projects and activities will LOCSU engage in?
- How – will LOCSU go about these activities? What are the ways of working that will underpin the projects and activities?

Overview of Action Plan structure, including What and How activity groupings



Detailed Action Plan

What

1. Tools

A set of tools which LOCSU will develop and provide to LOCs. Some of these are existing tools which will be maintained/improved, others are new initiatives to be developed.

Engagement Toolkit

- Create a suite of materials to support LOCs to engage with PCNs/ICSs outlining strategic and operational support

Clinical Pathways

- Continued expansion, innovation and development of clinical pathways, including healthy living services within scope
- Ensure pathways are promoted and available to LOCs

Case Studies

- Create a series of Case Studies to share best practice

LOC Digital Capability

- Launch LOC online web design and hosting in 2020
- Funding support for LOC domain/email

Resource Library

- Develop a web-based resource library of LOCSU and best practice external guidance

LOC Needs Analysis Tool

- Support LOCs to act on outcomes from use of tool to date
- Continue to develop the tool to ensure it encompasses emerging topics

2. Support Services

Support services available for LOCs:

Commissioning and Negotiation Support

- Hands-on resource support to be provided via Optical Leads

Review/develop Training provision

- Review existing resources, identity gaps and create further resources (online materials, courses etc) in line with LOC needs

3. Partnership Projects

Projects which LOCSU will endeavour to influence partner organisations to progress, offering supporting resource as required.

IT Connectivity

- Work with other sector representative organisations to engage with the NHS with the aim of facilitating full IT connectivity

Student Engagement

- Partner with other sector organisations to increase understanding of the NHS Reforms, and implications for optical professionals, to students

4. Constitution and Funding

Review LOC Constitution

- Review all LOC committee guidance to ensure it encompasses emerging topics and if required launch a constitution consultation during 2020

Review Funding Model

- Review LOCSU funding arrangements/model

How

5. Core Values

LOCSU to identify a set of core values to underpin our way of working. Initial inputs are:

- Transparent – maintaining transparency of activities
- Local – as the Support Unit for Local Optical Committees, ensure a local focus is retained
- Listening – LOCSU is a listening organisation which exists to serve LOCs

6. Regional Voice

- Facilitate LOCs to develop a regional voice to engage with NHS structure by testing regional forums to facilitate connections between regional LOCs, within context of core values
- Provide support as requested by participating LOCs – eg. facilitation, communication, performance structures

7. Optical Leads

- Optical Leads to be more overtly positioned as a resource for LOCs to call on as and when needed.
- Optical Leads team to be expanded so that sufficient resource is available
- Optical Leads to find a balance between facilitation and guidance as appropriate to each LOC and the particular situation

8. Fill Communication Gaps

- Create ‘Introducing LOCSU’ presentation for 2020 AGMs covering LOCSU background and governance
- Increase visibility of LOCSU Board via ‘Meet the Board’ communications throughout 2020
- Evaluate existing/new communication channels eg. Instagram

What

Tools
- Commissioning Toolkit
- Clinical Pathways
- Case Studies
- LOC Digital Capability
- Resource Library
- LOC Needs Analysis Tool

Support Services
- OL Commissioning and Negotiation Support
- Review/develop training offer

Partnership Projects
- IT connectivity
- Student Engagement

Constitution and Funding
- Review LOC constitution
- Review funding model

Detailed Action Plan structure

How

Core Values
- Develop and work to a set of core values including transparent, local and listening

Regional Voice
- Facilitate regional connections to engage with NHS structure
- Provide support as requested

Optical Leads
- Position more overtly as a resource for LOCs
- Increase size of team

Fill Communication Gaps
- Improve understanding of LOCSU structure, role and Board
- Review/develop communication channels

Next steps

LOCSU is currently putting a project plan in place to track delivery of this action plan. LOCSU will report back to LOCs on progress via regular communication channels including monthly newsletters and AGMs.

Training and development

Inspiring talent for the benefit of the sector

Delivering Training and Development opportunities is a core focus for LOCSU, with the strategic aim to inspire, identify and develop the talent of today for the benefit of the optical sector tomorrow, something that has always been vital but is critical post pandemic.

LOCSU offers a wide range of courses for LOCs and their members, including facilitated induction courses aimed at newer LOC members, an annual Leadership Skills Programme and a range of training courses for extended primary care services to support the implementation of LOCSU's pathways. Both the Leadership Skills Programme and training in extended primary care services are delivered in partnership with the Wales Optometry Postgraduate Education Centre (WOPEC), while the Induction Course is facilitated by LOCSU Digital Learning Support Officer Simone Mason. LOCSU also offers several standalone online training modules including LOC Treasurers' Training and PEC Clinical Governance and Performance Leads (CGPL) training.

Facilitated Induction Course proves valuable for 2018-19 attendees

During the last year the facilitated induction course ran in June 2018 and March 2019, introducing 31 participants to the work of LOCs and helping them make connections with peers.The in-house distance learning course offers the opportunity to participate in online group discussions with other new LOC members as well as experienced LOC officers, group webinars focused on specific LOC topics and activities designed to support delegates to become effective LOC members quickly.

Although the course is primarily aimed at new LOC members, experienced LOC members who would like to refresh their knowledge are also welcome to participate. Topics include 'LOC functions and governance' and 'Communications', though the course content is flexible to allow current topics and issues to be explored. Attendees on this year's course found it useful and informative, with the practical exercises delivering tangible results for the immediate benefit of their LOCs.

"One of the great things about the LOC Induction Course is that the core content remains the same but as with the NHS and the optical world, it is constantly changing and evolving. The content of the course reflects the current news stories of the moment. For example, GDPR was introduced just before the course started on 25th May 2018, so during the hour-long webinar, expert members of the LOCSU team were able to answer questions, in particular surrounding whether optical practices require a Data Protection Officer. Then on the March 2019 course, we had a LOC who was struggling with numbers to its AGM, so we had a discussion on the webinar and set an activity to produce a LOC Engagement Plan, one of which worked so well that it generated their best ever turn-out of 38 attendees."

Simone Mason, LOCSU Digital Learning Support Officer

100%

Felt more informed about LOCs and the NHS landscape*

*Source: post course survey of June 2018/Mar 2019 participants

Twelve candidates complete leadership skills programme

This successful programme is part of WOPEC's MSc programme at Cardiff University. It is designed to enable the practising optical professional to become an effective leader at local and national level within the optical sector through the support and development of LOCs and LEHNs, building effective strategic networks, influencing policy makers and enhancing eye health services for patients.

The training is unique and tailored to the optical sector and in particular to LOCs. The course includes practical days incorporating a range of team-building activities as well as insightful and thought-provoking topic work. It provides an understanding of current leadership models and theoretical approaches and gives delegates the background knowledge and practical skills that will equip them to provide leadership in the optical sector.

The course is led by Leadership and Coaching experts Gill Brabner and Jane Gray and the output includes coursework blogs as well as an essay assignment. The programme has produced many successful candidates who are now leading the development of primary eyecare services in PECs and LOCs, as LOC Officers, Clinical Governance and Performance Leads, LOCSU Optical Leads and in Local Eye Health Networks.

The course increases personal confidence, creating leaders that inspire the profession and the skills developed on the course directly benefit the optical sector as well as the graduates' own career progression. Course alumni are encouraged to join the online 'Optical Leader Network' as a forum for support and to share successes and news stories. Following the course, which has been completed by 80 students since its inception in 2012, many alumni have taken on leadership roles within LOCs and PECs as well as LEHN Chairs and Board Directors. During the last year, the 2018 cohort of 12 students completed their studies, and the 2019 cohort of 8 students started the programme.

Helen Haslett, the Chair of Dorset LOC, who is also a MECS assessor and shareholder of a Boots Opticians franchise, was one of the 2018 cohort of students. Helen said "I decided to apply for the leadership course as Optometrists do not often have access to management training, and as a new LOC Chair I felt I had a lot to learn. It was fascinating to learn about different styles of management and the course allows a lot of self-reflection, especially through the blog-style assignments. It also provided a fantastic networking opportunity, my cohort still has a WhatsApp group where we provide encouragement and help to each other".

Helen continues "I chose Self-Care as a subject for my final essay because of the increased pressures that leaders in Optics are under, as they are often juggling several roles, alongside their "day jobs". I found that people use a variety of methods to manage stress levels, but there was an openness to newer techniques such as mindfulness. I learned some useful strategies for dealing with stress myself through researching for the assignment and I wonder if specific "training" in Self-Care is something that should be considered for leaders in the sector."

> "It was fascinating to learn about different styles of management and the course allows a lot of self-reflection."
>
> Helen Haslett, Chair of Dorset LOC

80

80 students have completed the leadership skills programme

Training in extended Primary Care services

Delivered in partnership with WOPEC, these modules are designed to support professional development for practitioners and the effective implementation of LOCSU pathways. All modules are CET accredited and require access codes to be provided by the relevant LOC.

Course topics include Pre- and Post- Operative Cataract, Children's Vision (Paediatrics), Glaucoma, Low Vision, Minor Eye Conditions Services (MECS)/Primary Eyecare Acute Referral Scheme (PEARS) and People with Learning Disabilities. In the past year, the LOCSU MECS/PEARS course has proved the most popular, with 1252 CET certificates and 1025 course certificates awarded. In total, across all courses, 3085 CET certificates and 1477 WOPEC course certificates were awarded.

3085

3085 CET certifications

1477

1477 WOPEC course certifications

Commenting on training and development progress in 2018-2019, Richard Whittington, LOCSU CEO said "We have seen good take-up of training opportunities this year, testament to the work of LOCs in promoting opportunities to members and our continuing focus on supporting professional development in the sector, including leadership and sector education as well as clinical development."

Governance and compliance

Governance and compliance hit the headlines

Over the last 18 months the topic of governance and compliance has entered the wider public consciousness on a much greater scale than previously. The introduction of the General Data Protection Regulation (GDPR) in May 2018 and the unprecedented public information campaign that accompanied it raised awareness of the importance of data privacy and the safe management of data to previously unseen levels. We have yet to see how the ICO will address reported breaches in the public sector, but there have already been eye-watering fines proposed for Facebook and the Marriott Hotels groups.

It has ushered in an era in which the general public is more critical of the duty of organisations to act with integrity and ensure that they have appropriate governance in place. This is particularly true of data privacy regulations, but it has also underlined the general importance of governance and compliance when establishing public trust.

One of LOCSU's core roles is supporting optical sector organisations to establish and maintain robust governance – promoting strong governance in the sector is one of LOCSU's first principles.

The complexities and volume of regulation today mean that it is logical to consolidate research and share expertise to avoid duplication of effort and to assist with the administrative compliance burden faced by individual contractors. The focus on GDPR over the past two years has put the spotlight on LOCSU's data protection compliance support and encouraged us to examine how we deliver it. We have also concentrated on working with NHS England and NHS Digital to develop sound yet straightforward processes for compliance checking through Quality in Optometry (QiO).

Simplifying and streamlining

QiO is the optical sector's platform for supporting compliance and is managed and run on behalf of the whole sector by LOCSU. QiO checklists are condensed from the contract requirements and revised regularly to reflect the latest developments. By completing the checklists, contractors demonstrate up-to-date compliance with NHS England GOS Contracts and NHS Standard Contracts. When the NHS Digital Data Security and Protection Toolkit (DSPT) came into force in April 2018, we worked closely with NHS Digital to build a DSPT checklist into QiO itself that satisfied the requirements and was implemented through the familiar QiO environment, making it simpler for contractors.

The advantage of QiO is that it represents a central repository for compliance recording – a single source of truth that offers an at-a-glance picture of compliance. NHS England and NHS Digital now have direct access to the QiO database of completed checklists. This is a core benefit as it means that contractors no longer have to send their data to the relevant authority. Instead NHS England and NHS Digital can carry out compliance assurance checks independently, without any action needed by the contractor. The risk of errors, version control issues, incomplete information and the general uncertainty that is the enemy of an effective compliance programme is much reduced.

Digital governance

NHS Digital have received more than 1500 DSPTs through QiO. There were 1800 GOS checklists completed from 1 April 2018 – 31 March 2019.

Policy and procedure drafting

As any good compliance professional will tell you, meeting regulations is about more than just putting a tick in a box: it must be backed up by evidence of adherence to policies that govern the organisation's activities. Many of the checklist questions in QiO request information on the policies that are in place to ensure compliance. To make creating and implementing these policies easier, we have developed policy templates, guidance documents, and general templates that align with best-practice requirements. Contractors can customise these to their own organisation and use to benchmark their performance against national standards.

During 2018-2019 we have produced policy templates and guidance for areas as diverse as safeguarding, data management, service user engagement and many more.

LOCSU will continue to work hard to assist LOCs, PECs and contractors with their compliance burdens in the interests of safe and effective service delivery.

Lobbying and influencing

In addition to helping optical sector organisations comply with published regulations, LOCSU also works to influence the development of future regulations and policies to ensure that they are proportionate, appropriate to the optical sector and that compliance is achievable. A list of the consultations that LOCSU took part in on behalf of the sector is included in this report.

Two of the most important of these were in response to NHS England on the Standard Contract 2019/20 and to NHS England and Government on the NHS Long Term Plan.

On the horizon

2018-19 was an unprecedented year in regulatory terms as businesses and organisations within and beyond the optical sector engaged with the new shape of the data privacy compliance landscape. The signs indicate that the shift towards greater regulation will continue, so the importance of LOCSU's role in facilitating compliance and influencing regulatory bodies will grow.

It remains to be seen how the Long Term Plan and potential legislative changes will manifest but it is safe to assume this will add requirements across the wider optical sector.

Post-pandemic as the NHS and wider society concentrates on recovery and the construction of a post-pandemic society with a range of new norms, compliance and regulation will be key. As Covid-19 innovations such as virtual consultation become embedded across service delivery so too will a range of new regulatory and compliance issues. LOCSU is well placed to be able to lead and advise as to how these will evolve and affect a new range of extended services and support all LOCs and PECs in new, large scale delivery. Such changes are likely to continue to exert pressure on contractors to ensure that their compliance status is up to date.

Initiating organisation	Consultation document	Submitting organisation	Date submitted
College of Optometrists	Glaucoma qualifications	LOCSU and Optical Confederation	April 2018
Health Committee	Sustainable Transformation Plans and Accountable Care Organisations	LOCSU and Optical Confederation	June 2018
NHS England	Evidence based interventions	Optical Confederation and LOCSU	September 2018
NHS England	Integrated Care Providers	LOCSU and Optical Confederation	October 2018
Public Accounts Committee	Clinical Commissioning Groups	LOCSU	December 2018
NHS England	NHS Standard Contract 2019/20 Consultation	LOCSU and Optical Confederation	January 2019
General Optical Council	Education Strategic Review	LOCSU	February 2019
NHS England	Implementing the NHS Long Term Plan – Proposals for Possible Changes to Legislation	LOCSU	March 2019

Case study

Specsavers
Opticians
Specsavers
NHS
Minor Eye Problems?
Sore or Red eyes?
Visual disturbances?
Book your NHS funded appointment HERE

Collaboration is crucial to Heart of West Midlands success

Changing times demand flexibility, openness and culture that prioritises engagement and good communication. Sharing expertise and a forward-thinking approach led to a successful launch of a region-wide Minor Eye Care Service covering the Midlands region.

History: Midlands momentum

The Midlands region has a solid history of teamwork among its Local Optical Committees. In 2011 the LOCs of Birmingham, Dudley, Sandwell, Solihull, Walsall and Wolverhampton formed a Regional Optical Committee (ROC) with the aim of sharing expertise and the learnings they had accumulated from dealing with PCTs and CCGs in order to create a stronger position to bid for services. Quarterly meetings attended by two representatives from each LOC, and by LOCSU, helped establish an effective working party.

The first area to launch a MEC service was Wolverhampton creating momentum across the region on which the ROC was able to capitalise to secure more services. Primary Eyecare Heart of West Midlands Company was formed to facilitate bids and delivery, with Solihull, Walsall and Sandwell & West Birmingham CCGs services coming on board soon after.

In spring 2018 the result of many years of work came to fruition when Primary Eyecare Heart of West Midlands successfully won a major procurement bid to provide Minor Eye Conditions (MEC) Services in Dudley. Subsequently, Primary Eyecare Heart of West Midlands in collaboration with Primary Eyecare Services won a competitive tender to provide a MEC Service across Birmingham. These came on-stream in September last year with the result that now a population of 2.65 million across the region has access to consistent, community-based eye health services.

This achievement maps effectively onto the population-based health outcomes approach adopted by the NHS that saw the evolution of Sustainable Transformation Partnerships (STPs) which are now evolving again to become Integrated Care Systems (ICSs). In this case the service covers the two STP areas of Birmingham & Solihull and the Black Country.

2.65m

There are 2.65 million patients across the region

200

More than 200 practices providing MECS

85%

85% of patients diverted from GP or A&E

Successful outcomes and drive for more services

There are more than 200 practices in the region engaged in delivering the MECS, under the auspices of Primary Eyecare Services Ltd, formed through the merger of Primary Eyecare Heart of West Midlands and Primary Eyecare North in order to achieve the scale needed to win the contract. All the participating practices can see patients from any of the CCG areas, creating a true region-wide service.

A key objective of MEC services is to ease the pressure on GPs and A&E departments. To date this is proving successful, with more than 80% presenting to the MEC Service on the basis of self-referral. When asked "Where would you have gone if the service wasn't available", responses across the regions were that over 85% of patients would have gone to their GP or A&E.

Continuing the momentum, there are new cataract post-operative services rolling out in stages across the region and a Glaucoma referral service is scheduled for launch in Wolverhampton later in the year, with a view to extending out to other areas. In addition to the MEC service there is also a repeat pressures service and a cataract pre-operative screening service in place region-wide.

There is a region-wide cataract screening service

Communication and making connections

Charles Barlow, formerly a Director of Primary Eyecare Heart of West Midlands and a longstanding member of the Dudley LOC, has been heavily involved in the development of services. He explains the importance of making connections and regular communications: "The key was cohesion and the foundation of that was achieved by the creation of the Regional Optical Committee. This gave us a regular forum to share expertise and develop consensus which – given that there are many different approaches and ideas – did take some time to achieve, but with patience we succeeded. This cross-working between LOCs enabled a consistent and measured approach to service development."

The team also developed excellent relationships with other stakeholder groups, for example the Local Eye Health Network (LEHN). "It's impossible to underestimate the benefits of having an optometrist on the LEHN committee, as was the case here," Charles notes. "The LEHN brought together all of the commissioners and is enormously beneficial to development on a regional basis. It's all about making connections and it creates a structure for working together that has certainly assisted in the development and rollout of the services we've succeeded in launching."

The Regional Optical Committee also worked closely with LOCSU, specifically LOCSU Commissioning Lead, now Optical Lead Richard Rawlinson. "Richard was a mine of information on the national picture and we were able to give him insight into how things were playing out in our region."

> "This cross-working between LOCs enabled a consistent and measured approach to service development."
>
> Charles Barlow, Dudley LOC

Changes and challenges

Part of the conditions for a successful bid was the merging of Primary Eyecare Heart of West Midlands with PEC North to form Primary Eyecare Services Ltd, a company large enough to satisfy NHS governance requirements and deliver consistency and management economies. This means that several of the former directors of Primary Eyecare Heart of West Midlands are no longer in post.

The transition period has been interesting, says Charles, adding: “It’s clear that there needs to be some structure when a major change takes place. In this instance it is around keeping the former directors engaged and finding new outlets for their knowledge and experience. Fortunately, several of the directors still have hands-on roles working closely with Primary Eyecare Services, which ensures impetus continues and that we keep working on further services. As we adapt to our new roles everyone is very conscious of the need to sustain momentum.”

65%

65% of LOCs have established a MECS pathway

Planning for the future

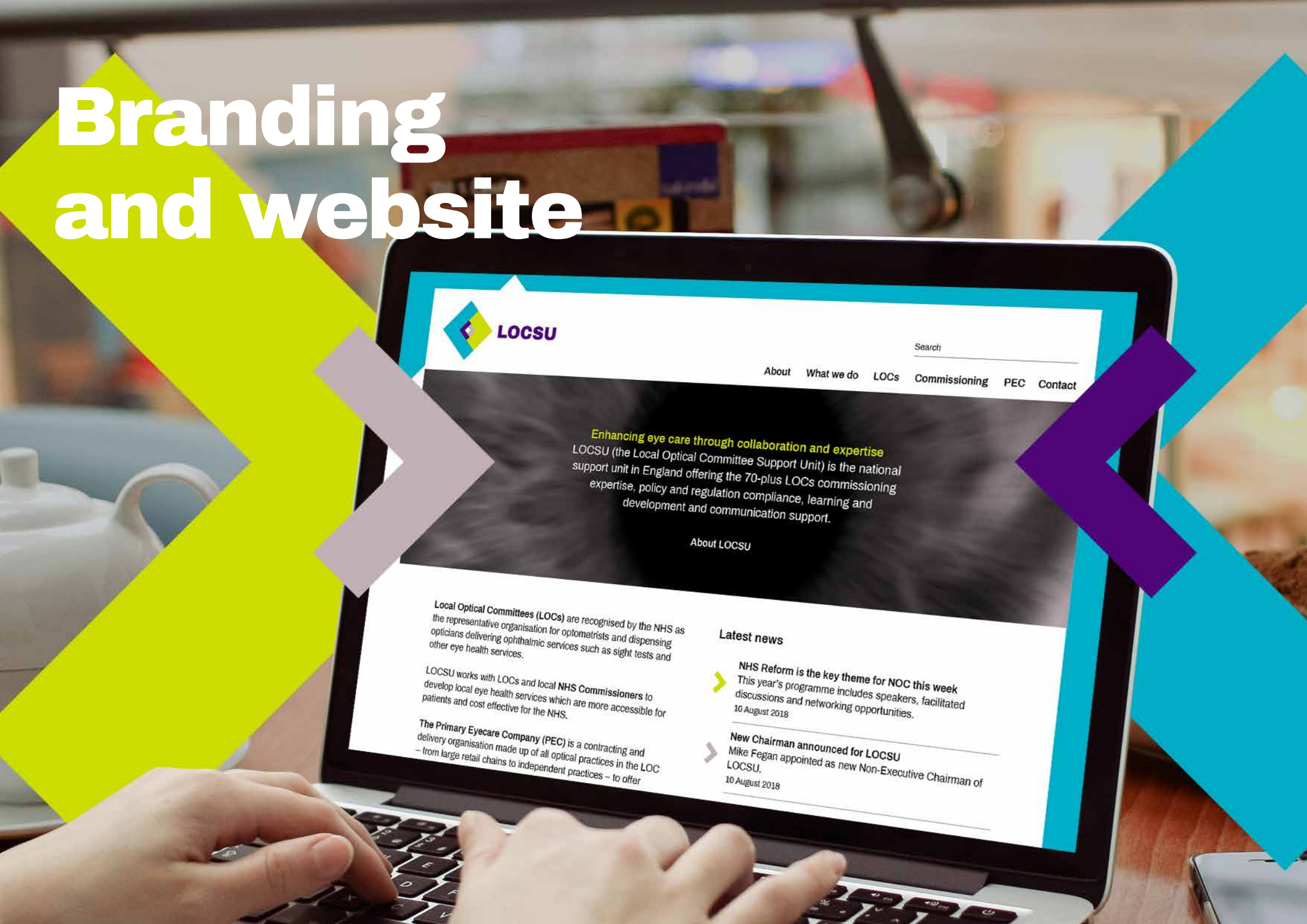
An essential part of keeping that momentum going is planning for the future. Charles believes the LOCs in the region and the ROC itself have been successful in paving the way for new committee members, encouraging and mentoring industry entrants to take on roles and gain experience early in their careers and ensuring that the committees represent the primary eyecare community.

“We’re seeing the new generation coming through in committees across the region,” says Charles. “The team is very proud of what we have achieved and whom we’re handing it on to.”

Another benefit that has resulted from the ROC meetings has been close collaboration on local optometrist training and educational events. Each of the regional LOCs has a Training/Education Lead and they work together to drive regional skills development. This includes running simultaneous events on the same topic, or combining to run joint events. As Charles notes: “The feedback we have as a group from local services enables us to co-operate to plan local training. This improves the quality of our service and gives confidence to commissioners and ophthalmologists that we are trained to a high standard to take on further work.”

Commenting on the outcomes achieved by the team, LOCSU’s Optical Lead Richard Rawlinson believes that they point to the shape of future LOC engagements: “The forward-thinking, collaborative approach of the LOCs and Regional Optical Committee has, over a period of years, created a strong platform from which to engage with NHS commissioners and build the case for providing eye health services in primary care. This has proved very successful.”

Branding and website



New look for LOCSU

In November 2018 at the annual National Optical Conference (NOC), LOCSU unveiled its rebrand. The new look, which includes a logo, colour palette, graphics, strapline and website, aims to strengthen the organisation's profile at a time of rapid change in the optical sector.

Following its launch in 2007, the LOCSU logo had not changed in 11 years and looked outdated compared with many other brands in the sector. Another issue was that the website was based on old technology, meaning the site could not easily be accessed on mobile or tablet devices. LOCSU appointed graphic design and marketing agency Cream Design to create a new contemporary and professional brand identity and a new website.

It was important to the organisation to retain a friendly and accessible feel whilst reflecting LOCSU's position as an authoritative source of information on the way the industry is changing.

Brand identity

The new LOCSU logo is composed of four arrows, to indicate the guidance the organisation gives to LOCs through a complex and dynamic industry. The colours are fresh and bold and the logo icon conveys the subtle suggestion of an eye, demonstrating linkage to the sector whilst avoiding the obvious 'eye' images which are incorporated into so many logos in the industry. The arrows are used standalone as icons on the new website and are particularly effective when animated.

The new brand identity has been rolled out to LOCSU stationery, presentation materials and social media channels so that the organisation is presented consistently across all touchpoints.

Strapline

New strapline options were developed to complement the logo. The new strapline 'Enhancing eye care through collaboration and expertise' communicates LOCSU's role in supporting and harnessing the expertise within LOCs to continually improve eye health services.

The new LOCSU branding

Our strapline

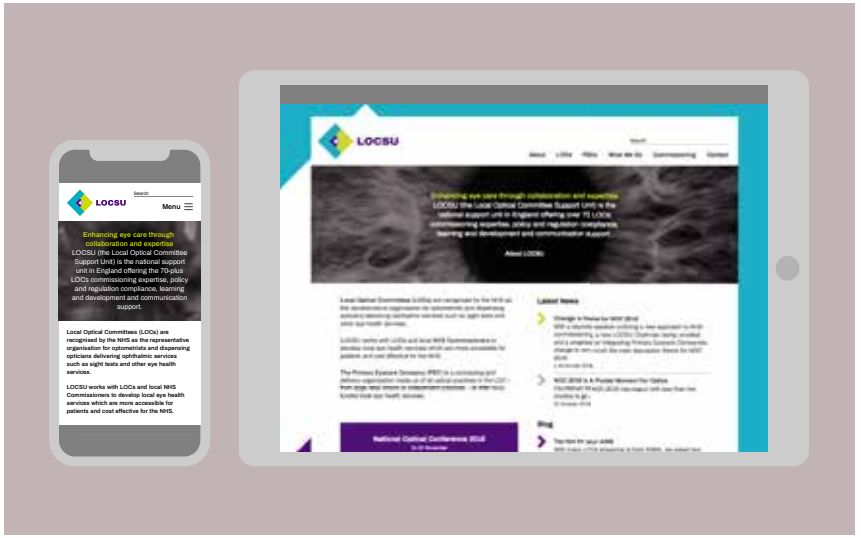
Website design and build

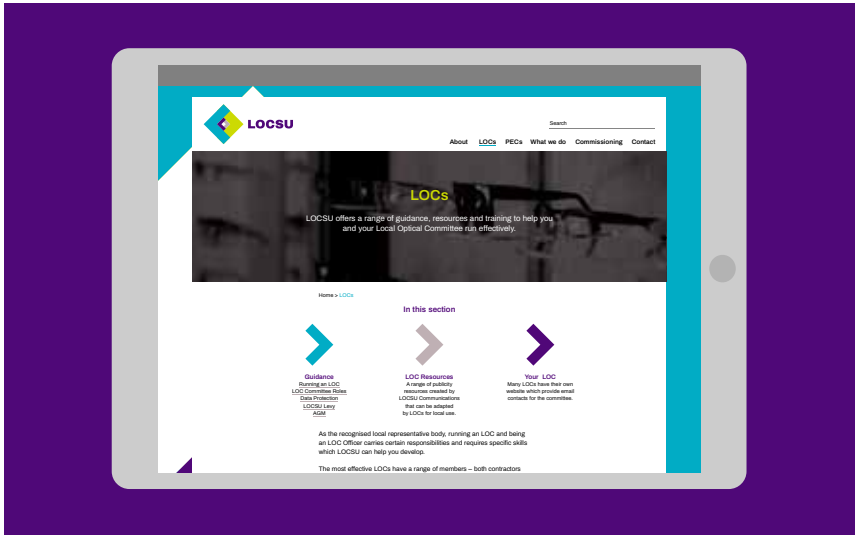
As well as showcasing the new brand's personality, the new LOCSU website needed to incorporate specific requirements including a login area for members to access confidential information and a national Services Directory.

Cream designed and built a WordPress website which is maintained on an ongoing basis with news stories, training and development information and pathway updates.

The new site is easier to navigate thanks to a new menu structure and more use of icons and imagery. Crucially, it is a responsive site which adapts to viewing on any device from a large desktop to a small mobile device.

> "We have received positive feedback across the board about the new branding and website. The new branding gives us a more progressive and up to date feel, and users have found the new website much easier to navigate to find the information they need."
>
> Richard Whittington, CEO LOCSU





The new LOCSU website

Finance review

The result for the year ending 31 st March 2019 is a surplus of £340,000 on a turnover of £1,510,000 (compared with a surplus of £202,000 on turnover of £1,420,000 in the prior year). Company reserves at the end of the financial year are £997,000.

A higher surplus than budgeted has been achieved ensuring that reserves are sufficient to deal with any issues arising from NHS re-organisation.

– LOCSU has been involved in discussions with various NHS organisations over the course of the year and it became clear that the re-organisation was going to be significant and may involve a change in plan mid-year.

– Some plans have been put on hold whilst the full impact of the NHS re-organisation is assessed and understood. Consequently, a range of projects that would have taken place during this financial year will now take place during the 2019/20 and 2020/21 years making use of an element of reserves in excess of the reserves policy. Examples of these projects are outlined below.

Turnover for the year includes £61,000 of other income relating to the recovery of fees for a seconded member of staff. This year saw the final unwinding of the implications of the Capita / PCSE issues, enabling a catch up of fees in year relating to previous financial periods.

As stated above some projects that would have been commenced in this year have been held over to the 2019/20 and 2020/21 years. This is in order to ensure that any work is in line with the NHS reorganisation and to ensure that LOCs and associated PECs are in the best position to benefit; projects include:

– The appointment of a regional project manager to ensure that LOCs are best supported to engage with the emerging Integrated Care Systems (ICS) at a regional level as well as ensuring that support continues locally to facilitate engagement with the emerging Primary Care Networks (PCN).

– LOC-online. This will replace the current LOC-net system and will be delivered in way to ensure that it is future proofed in line with NHS changes. In association the system will deliver the potential for regional LOCs hubs through a LOC-hub system that is under development

– The planned economic analysis of the extended services database has been delayed pending the outcome of a full understanding of the NHS reforms. Now that the NHS direction of travel is clear the process of analysis has kicked off. This will ensure that the project can be contextualised in a way in which the result, as yet unknown, will be most useful to the sector.

– As Primary Eyecare Companies have expanded, the governance requirements and level of board assurance, given LOCSU's role within a PEC, has also increased. As outlined more generally LOCSU has been monitoring the progress of the NHS restructure in order to assess the future of PECs within the new structures and there has always been an intention to undertake a full PEC governance review. Given that there appears to be a role for PECs going forward this work can now commence and will take place in late 2019/20 and early 2020/21.

– It was the intention to change the Commissioning Leads to Optical Leads in this year. As LOCSU became aware of the NHS restructure the timing of the change was delayed until the implication of the NHS changes became clear. The actual change was made in the 2019/20 year and additional one-year capacity for the south of England will be sought for the 2020/21 year to support development work across the south and London specifically.

The planned investments outlined above will reduce the retained earnings through 2019/20 and 2020/21. As in the current year, careful financial management will continue to ensure that LOCSU is able to react to any ongoing changes or developments in NHS planning and delivery.

Income and expenditure account

Summary audited statement of financial activities for the year ended 31st March 2019.

	2019	2018
Income		
Levy received	£1,449,006	£1,390,175
Other income	£61,560	£30,114
Total income	**£1,510,566**	**£1,420,289**
Expenditure		
Personnel costs		
Staff costs including directors and payments to consultants *	£418,594	£366,310
Advisor attendance and expenses **	£297,502	£358,482
AOP staff support	£88,722	£88,722
Board attendance expenses	£5,344	£3,715
Total personnel costs	**£810,162**	**£817,229**
NOC and conferences	**£34,155**	**£40,831**
Training (staff and for LOCs)	**£28,037**	**£37,418**
Office accomodation and office costs	**£71,941**	**£69,263**
Legal and professional costs including audit	**£14,303**	**£18,631**
Website and communications costs	**£6,525**	**£7,014**
General expenses including travel	**£25,525**	**£36,212**
Depreciation	**£3,989**	**£2,538**
Project costs		
IT development and Optomanager licences	£165,885	£142,976
National Data Repository	£9,735	£45,820
Total project costs	**£175,620**	**£188,796**
Total costs	**£1,170,257**	**£1,217,932**
Surplus for the financial year	**£340,309**	**£202,357**

* Reflects staff and director salaries/payments plus NI and pension, it also includes recruitment costs and staff (health) insurance. The consultants are external consultants and for this period includes Cream Design for their re-branding work, Shax for the work on QiO plus work linked to LOCSU education and training courses.

** Contains fees to both Advisors and Optical Leads (contract rate plus expenses).

Balance sheet

	Sunday, March 31, 2019		Saturday, March 31, 2018	
Fixed assets				
Tangible assets		£14,814		£7,989
Current assets				
Debtors	£280,850		£318,321	
Cash at bank and in hand	£932,392		£659,529	
Current assets total	£1,213,242		£977,850	
Creditors: Amounts falling due within one year	**(£231,057)**		**(£329,149)**	
Net current assets		**£982,185**		**£648,701**
Total assets less current liabilities		**£996,999**		**£656,690**
Reserves				
Income and expenditure account				
As previously stated		£425,383		£211,248
Change in accounting policy		£231,307		£243,085
At the beginning of year as restated		£656,690		£454,333
Surplus for the year		£340,309		£202,357
Members' funds		**£996,999**		**£656,690**

Note: These summarised financial statements are an extract from the statutory financial statements for the year ended 31st March 2019 which have been audited by Menzies LLP, who gave an unqualified audit report on 27 November 2019.

At the time of writing LOCs, PECs and LOCSU are dealing with the COVID-19 pandemic which will change delivery and financial plans for LOCs, PECs and LOCSU. Whilst the pandemic and the response is not covered in the timeframe of this report it can be reported that many of the objectives outlined above have been delivered in the timescales outlined. The reserves highlighted in this report have been utilised for two key objectives:

– A LOCSU levy pause for four months – April, May, June and July 2020.

– The maintenance of LOCSU support irrespective of the drop in LOCSU levy income.

This will mean that the reserve will be deployed in its entirety in delivering support throughout the pandemic; the consequences of which will be addressed in future reports.

Our people

Board

Mike Fegan
LOCSU Chairman

Henrietta Alderman
AOP Chief Executive

Debbie McGill
ABDO Head of Policy and Public Affairs

David Hewlett
Group Director for Leadership, Transformation and Strategic Partnerships

Trevor Warburton
AOP Representative

Mike Cody
ABDO Representative

Stephen McAndrew
FODO Representative

Matthew Jinkinson
LOC Representative

Emma Spofforth
LOC Representative

Abi Page
LOC Representative

Charles Bill
LOC Representative

Wendy Andrusco
Company Secretary

Jo Mullins/Sarah Cant
College of Optometrists

Advisers

Jane Bell
Clinical Adviser

Bruce Gilson
Clinical Adviser

Peter Hampson
Clinical Adviser

Trevor Warburton
Clinical Adviser

HQ Staff

Richard Whittington
CEO

Jacque Fooks
Office Manager

Richard Knight
Head of Policy

Zoe Richmond
Interim Clinical Director, also leading a team of locally based Optical Leads

Lisa Stonham
Information Officer

Nalini Patel
Project Manager

Dharmesh Patel
Interim Clinical Director

Contact

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LOCSU