



MINUTES of the LOC COMMITTEE MEETING

Held virtually on Wednesday 8th February 2023 at 6.30pm via Zoom

Attendees

Emma Spofforth (ES)
Kevin Lewis (KL)
Kennedy Rath (KR)
Maggie Glover (MG)
Katie Kingcott (KK)

Sheila Purser (SAP)
Chris Rushen (CR)
Mark Carhart (MC)
Bhups Battu (BB)
Sara Porter (SP)

David Dixon (D2)
Mike Daly (MD)
Hayley Moore (HM)
Nick Hagan (NH)
Reshma Patel (RP)

Max Halford (LOCSU)
Sana Asif (PES)

Minutes taken by KK

23/01 Welcome and apologies

Welcome from SAP. Apologies from Arun Balasegaram who is unable to attend this evening. Arun has emailed ES to tender his resignation to the LOC due to work and home commitments. On behalf of the committee, Chair thanked Arun for his input over the years and hopes he will still feedback informally wherever possible. Welcome to MAX from LOCSU and Sana from PES. From the beginning of April Max will no longer be the LOCSU lead and will instead be working full time for ABDO.

23/02 Health and safety

None as meeting via Zoom.

23/03 Conflict of interest statement

Nothing to add.

23/04 Minutes of last meeting.

Minutes from 9th November - no amendments to be made. Proposed as a true record by MG, seconded by CR. All agreed.

Minutes from 24th November where new Treasurer was voted – no amendments to be made. Proposed as a true record by MG, seconded by HM. All agreed.

SAP to electronically sign both and return to KK.

23/05 Action Log

Yearly review: training spreadsheet - KK to send out to all committee members to review and update, asking for any requests for specific training.

Yearly review: needs analysis – to be discussed later on the agenda.

Action 199 – remove.

Action 229 – remove.

Action 237 – email content agreed. List of names to target supplied by SAP and MG. Aim to send out ahead of April meeting. Due to go out on WhatsApp too.

Action 238 – limited response from practitioners. Suggest close action.

Action 240 – remove.

Action 241 – document updated and shared previously. Induction pack documents need completing. Change status to in progress.

Action 242 – remove.

Action 243 – close.

Actions 244, 245, 246, 247, 248 and 249 – remove.

Actions 250, 251 and 252 – close.

Action 253 – need to discuss how we deal with this in the future, for example a fee to attend for committee? Previously got CET points but now can't get CPD points. Add to next agenda to discuss.

Action 254 – ES to discuss in secretary's report.

Action 255 – close.

Action 256 – to be discussed at next officers meeting.

Action 258 – add to next committee meeting agenda.

23/06 LOC Chairman's report questions (sent out ahead of meeting)

Apologies for lateness of report from SAP.

SAP pleased with number of people who came forward with Prof Cert Glaucoma for the GERS pathway expansion,

KL questions OCT angle assessment as opposed to Gonio for the GERS?

ES – in the GERS pathway there needs to be some form of angle assessment, in fact van Herrick is acceptable, but this was rejected by the MSET glaucoma doctors in this pathway, they initially insisted on gonio only. Agreed to have OCT angles as part of an expansion, to be reviewed. We are only piloting this pathway.

23/07 LOC Secretary's report questions (sent out ahead of meeting)

Musings about green initiatives – KK produced document. Would be great to get some feedback. Can all members have a look at the document which has been sent out to them and see which points they feel are good/bad. Feedback before Easter.

EDI document sent out to committee which was produced from LOCSU. Lots of work from LOCSU and AOP now being done on EDI. Do we want to use resources to progress along this route, or happy to leave with LOCSU and AOP? Should we consider sharing resources when we get them? Run CPD events etc?

MG – if we share a link in documents with optoms to do it themselves they won't do it. If we offer CPD points, they are more likely to turn up.

ES – do we need an EDI "officer" to do this work?

SAP thinks we should do something.

BB thinks we shouldn't. Asks what are we trying to achieve?

ES - trying to decide whether we leave this up to LOCSU and AOP or do we as an LOC get involved.

RP agrees with SAP that we should do something. Thinks education event is a good way to go.

NH – what would the EDI officer be expected to do?

ES – would just be for someone to carry on with the EDI work, help organised CDP events, put documents together.

Discussions continue regarding EDI.

Max – reason the LOCSU document was put together was because LOCSU had feedback from LOC's asking for advice.

Max to share details of a contact with KK to speak to regarding having an EDI officer.

DD – not sure if it's the LOC's place to educate people on EDI.

ES asks if anyone would be willing to take on the role of the EDI officer. MG offers.

MD suggests a vote.

SAP asks if we as an LOC should promote EDI. 10 agreed yes. 5 no. Majority vote yes.

ES and MG to liaise regarding this.

Committee has been sent the job role of the LOC Secretary. Secretary's role comes with very specific jobs. Legal obligation for Secretary's workload. The main role includes providing good governance and a smooth running of the LOC.

ES is also a Clinical Lead which involves liaising with hospitals etc. These two roles often get intertwined.

ES would like all members to look at the document and see if anyone can take on the role. ES not sure how much longer she can take on both the roles as Secretary and Clinical Lead. ES thinking next year she would like to step down as Secretary.

Both roles need separating out – currently been done together.

CR – does it have to be an optom or DO?

ES – would need to check the constitution. Thinks may need to be a GOC registrant.

23/08 LOC Treasurer's report questions (sent out ahead of meeting)

KR done this as the outgoing treasurer.

CR – asks about the account being frozen since mid-Jan?

KR – his access was blocked. KR unsure why this happened. Happened at same time as access to Mike was trying to be sorted.

KR has been helping MD and doing transfers at MD instruction.

MD – new mandate filed out to get access to the bank account, which had to be posted to the bank. Bank told MD the welcome pack got sent to the old, registered address which was KR home address. Letter also sent saying there was a problem with the mandate. KR states he hasn't received this information in the post. Bank been advised of new address. MD waiting for access still – hopefully in the next week or two.

SAP – banking situation has been very difficult.

SAP will take legal advice if this isn't resolved this week. Will go to lawyer and get them to write to HSBC.

ES states need to look at how the bank account is run in the future – signatories and more than one person having access to online banking etc.

HM – suggests putting a message on social media @HSBC in order to get in contact with them.

KR suggests we have two accounts. One for the 'ring fenced' funds, and one for the current account.

23/09 PESL report questions (sent out ahead of meeting)

Sana asks if any questions.

MG – questions how many px's have been seen in NE Essex MECS? Gone down by about a third?

Sana – might be a typo – figures checked, and report needs updating. Sana to update and resend figures.

HM – can't see MSE GERS in the table?

SAP – says GERS activity currently in CES figures.

SAP reads out GRR's and CES figures.

Sana shares report on screen.

Sana discusses the financial update. Sana has contacted practices which have been affected by this directly.

PROMS – comments and feedback have been really positive. Have tried to provide positive feedback to individual practitioners where appropriate.

Still need to get more returns – reiterate the importance of the PROMS.

HM – when do schools do screening?

SAP - different throughout Essex.

Sana – In NEE – all services running well. Contracts out for procurement. Communication between trust and practices were not great when MG handed over to Sana. Communication now much better and Admin all up to date. Services on the whole running really well.

In West Essex – work and analysis around IP prescribing being done.

ES – asks for Sana to keep ES updated on the figures and any IP discussions.

SAP thanks Sana for her continuing hard work.

Sana leaves meeting 8.40pm.

NH – quite a lot of anxiety regarding tender. Eye department worried all opticians are going to pull out and they will be left with all the px's.



23/10 ICB reports questions (sent out ahead of meeting)

No questions.

ES - Issue with lens implant. Does not affect PAH, Spa Medica or Broomfield. Affects Southend, Colchester, Ipswich, Oaks, and possibly Nuffield in Ipswich. ES trying to gather more intel from other hospitals and will mailchimp all with information. Specifically, for MSET, need to contact SAP if px turns up at practice wanting pressure check who isn't on your list.

23/11 LEHN report questions

RP and SP attended meeting last week.

RP – 25 people who attended meeting. 95 people were invited! Felt like there were too many participants however Rupal navigated the meeting well.

Aspects of the meeting which weren't too relevant to us. Lot of confusion about the meeting from different LOC's and chairs of different bodies.

Discussed homeless eyecare pathway. Four sites where this is currently happening. One up and running in Colchester.

Discussed learning difficulties pathway.

Talk about funding within the NHS.

Heard ECLOs report from all different hospitals across the country. Didn't mention the ones in Essex – SP talked about this.

ES – we are one of the biggest LOC's in the country. Deal with huge trusts.

ES and SAP both agree we still need to attend these meetings going forward.

KL – what area does the LEHN cover?

SAP: LEHN now covers the whole of the East of England

23/12 CPD:

Anomaly for facilitators of peer review

Q - Did we want to set something up for people who facilitated at the peer review event last year and didn't get their peer review points? A - Nobody feels they need this.

Fees for presenters/writers

To discuss at the next officers meeting.

Piyus follow up event

Q - Health and Wellbeing event. Do we want to do a follow up session? A - No appetite.

Glaucoma for current ES providers

Southend Hospital Glaucoma CPD event - was advertised in February's newsletter. Plan to do another one in Mid Essex and expand further with local Glaucoma Consultants

Suggestions for general CPD this year

Feedback from last CPD – OCT what not to refer?

HM – is it worth asking Jigs? ES to contact Jigs about setting up a peer review.

SAP to organise (with HM) another MECS event. In order to get MECS really booked up – HM recommends at least two months' notice for practitioners.

23/13 Needs Analysis

MC – thanks committee for replies. 100% replies.

MC shares screen. MC will forward the report to committee.

ES – felt people may have answered 'in progress' thinking this meant 'ongoing'.

If someone has answered 'no' to any of these questions that we don't cover or confused by any of the questions, please contact ES.

Max – what other LOC's have done is to use the results of the needs analysis to run a strategy day. To sit down and look at some of the questions to help stimulate discussion, get people's opinions and to discuss where to move forward to in the future.

ES talks about some of the questions and answers:

Q16 – regarding PCN's. Don't have capacity to attend PCN meetings.

Q17 – ES discusses alliance group.

Q19 – To clarify the work we do within the other two ICB's – we have to work with the other LOC's.

Q20 – No capacity to start it up.

Q21 – We do explore 'cross border' opportunities. Lots of unclear answers.

Q26 and 27 – very similar questions.

Q28 and 29 – very similar questions. Hopes the answer would be yes.

Q34 – ES clarified. Memorandum of understanding with PES – we do have one in place.

Q39 – We get frequent communications/newsletters from LOCSU which are shared with the committee.

Q40 – Needs removing as no longer have passwords to LOCSU website.

Q41 – Committee members urged to have a look on LOCSU's website to get up to date with all available training currently available.

Q45, 46 and 47 – all relate to LOCSU pathways. ES suggests having a conversation about this at a later date. Information can be found on LOCSU website.

Q49 – Programme doesn't exist anymore.

Q53 – Satisfaction within the LOC – if committee members are not satisfied how can we improve this. And why are you still here?

ES suggests plucking various elements out and having a separate strategy meeting. To be discussed at the officers meeting.

23/14 NOC Discussion Points

To be added to next committee meeting agenda.

23/15 AOB

None

23/16 Date of next meeting

ES suggests having a focused meeting on certain points.

Next meeting pencilled in for 26th April - to be discussed at officers meeting.

Meeting finished 10.22pm.

Signed Electronically 7th May 2023

SAPurser

Sheila Purser
Chairman