

Kensington & Chelsea & Westminster Hammersmith & Fulham Local Optical Committee

Meeting Minutes - 24/06/2019

Time: 19:00-20:20

Date: Monday 24th June 2019

Venue: The Chapel, 48 Chapel Street, London, NW1 5DP

Present: Elisa De Rossi, Vesna Drazic, Sam Schweiki, Sheena Patel, Bozena Trylska, Shafquet Mohamed, Zahra Jessa, David Hall, Brian Johnson, Praful Shah, Kanti Fatani, Panos Nicolau, Zohra Salim, Mike Howkins

Apologies: Salvatore Camilleri, Fazlin Kanji Jetha, Sachin Patel, Daska, Jayshree Vasani, Nirmala Pankhania, Dhruve Patel, Viren Jani, Nizam Abdulla, Brian Collison

1. Welcome and Apologies

2. Chairmans report:

A. **Ophthalmology meeting update** - PN went to a meeting called by the Imperial Trust. Attendees were: ophthalmologists from the Imperial Hospital (Western Eye), another external Opthamologist, 2 CCG people (one administrative and one clinical - GP), Richard Whittington, David Parkins (optometrist) and another optometrist of NHS England as representative of optometry. The meeting was called to find out things that could be done in order to save some money. First topic discussed was cataract referral report, which includes visual acuity and has been already commonly accepted. It was suggested to remove the visual acuity from the report itself, which has caused disagreement.

B. **Primary Eyecare Ltd Update** - The primary Eye Care company was established because everything had to go out with a tender. Now the process will be different and the decision will be taken differently as they don't want to put things out to tendering anymore because it's too expensive. In regards to our area, Presentations of MECs are going well: 31 practices are now on board and 9 new ones in total. Action point for PN: how to get more engagement locally and more practise on board locally.

C. **AMD** (Age-related Macula Degeneration) - During the meeting, it was suggested that pathway should be direct referral into A&E. However, optometrists can't keep doing more and not getting paid for it (unlike pharmacists etc..). Two solutions discussed were: E-referral and [nhs.net](https://www.nhs.net). The consensus in the room was towards e-referrals. Richard Whittington pointed out that all is required are £750 for the NHS to spend nationwide to connect up all the opticians with the NHS.

D. **Diabetic Retinal Screening** - Referral should be just based on the photograph (and not OCT scan). With this change, the business plan should show the 66% of saving from what it is currently.

3. Vice Chairman's report

A. SS reminded everyone that last April the CCG ended its contract with the Imperial Trust. Now the main questions is about which direction the CCG is taking as he has

concerns on Clinical Government Performance Lead and what's the planned activity in the next 12 months. Committee wants to know numbers too, but most importantly how do they audit the service. Action point for PN: to ask the primary eye care company to give us the report that the CCG has every month.

- B. The committee suggested that some industry suppliers like Topcon should sponsor CET events. VD proposal was that we should look at CET events in addition to the other CET events organised at Western Eye Hospital. Everyone voted in favour.
4. Treasurers report - MH suggested a company card, everyone voted in favour. Zorha and Zahra attended the last 5 meetings, even if they were not part of the committee in the past. MH would like to pay them for their commitment and perseverance. Everyone voted in favour.
5. Secretary's report - EDR will resign from her secretarial position at the end of 2019. SS suggested that if there are any members of the committees that would like to take on her role, they should email Elisa in the next weeks.
6. AOB - Action point for EDR: to double check Boots Strand is on the list.
7. Thanks and Close