

Optometry Driving NENC Primary Care Collaboration



Background

The NENC Primary Care Collaborative (PCC) is a combined voice for dentistry, general practice, optometry, and pharmacy, working together to improve people's health across the North East and North Cumbria.

They work together to solve problems, influence decisions, and share good ideas for the primary care workforce, for patients, and for the local partners inside and outside the NHS.

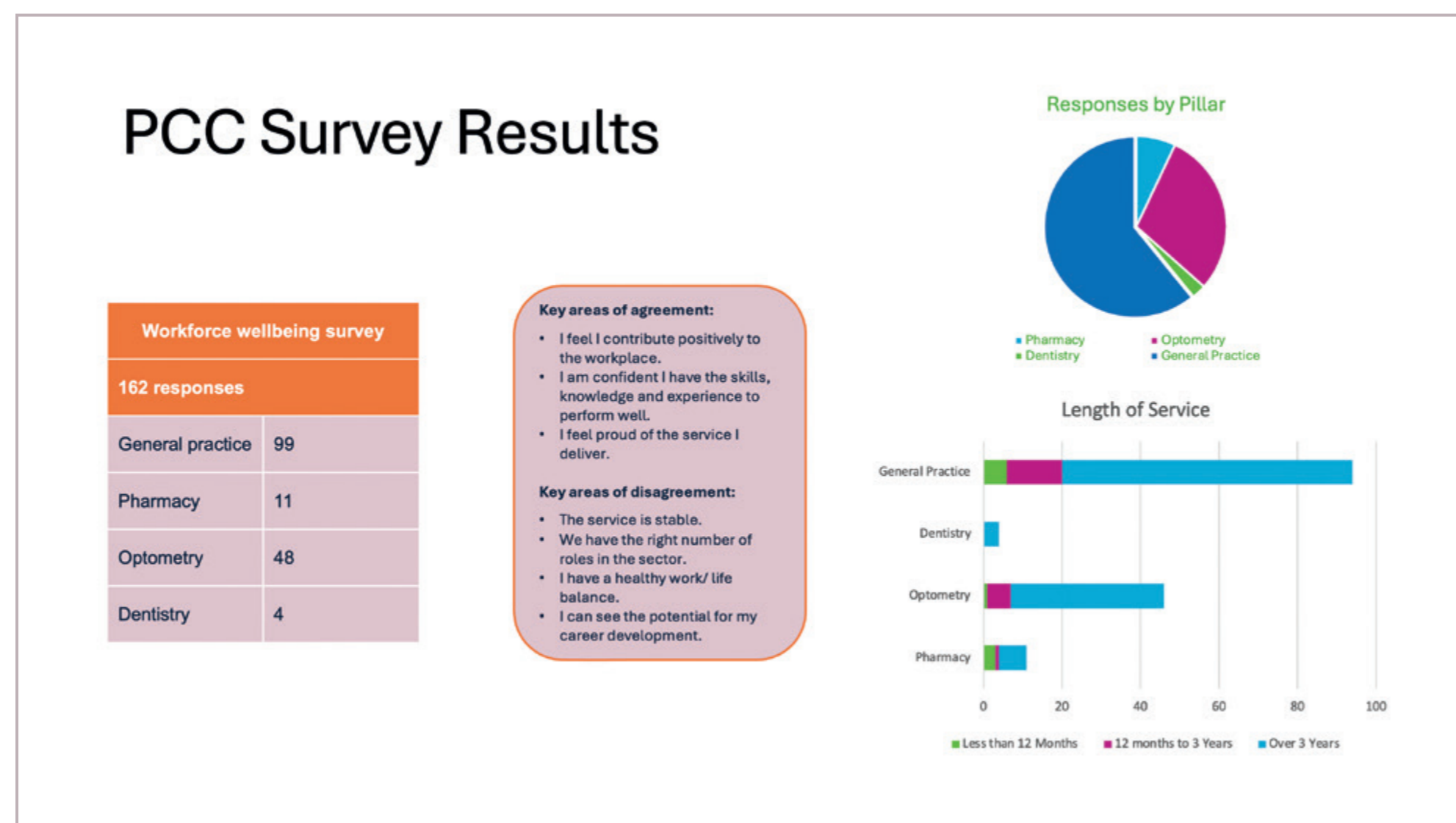
They are supported by the North East and North Cumbria Integrated Care Board (NENC ICB), the regional NHS organisation responsible for planning health services for the local population.

However, they are an independent collaborative working to ensure that the perspective of those working in primary care is considered and valued at every level of decision-making.

What We Did

LOC leaders have been involved in the PCC working development group since summer 2023, leading to the establishment of a NENC PCC Committee in April 2024. The Committee meets monthly, with various task and finish groups working on key projects. The collective LOC voice has helped shape priorities, making sure Optometry is fully represented within the workstreams. The Optometry reps have worked closely with the project management team (NECS) to ensure the outcomes are relatable to Optometry's challenges across the NENC.

Nominations for the two Optometry representative seats for NENC PCC were elected from LOC committee members. Each post is held for two years. Ideas and questions have been returned to the four NENC LOCs for comment. LOCs have helped drive workforce engagement for a Primary Care Workforce well-being survey (that supports a primary care workforce strategy proposal), a pilot to demonstrate that access to the Summary Care Record (for Optometry and Dentistry) is both possible and useful, along with introducing the LOCs to Population Health Management and how it can be used to support service development.



Outputs and Impacts

1. Primary Care Workforce Strategy Proposal. This has been a large project engaging with a wide range of stakeholders across primary care and the ICB to understand the current realities and challenges and put forward proposals to help support the development, resilience, and succession planning of Primary Care for the future. Despite having a significantly smaller workforce than the other three pillars, Optometry engagement for both the workforce wellbeing survey and the virtual workshops has been exceptional, and the key to this is the LOC involvement.

2. Access to the National Summary Care Record for Optometry (and Dentistry). We were told this was impossible, that Optometry didn't have the governance!

The Summary Care Record (SCR):

- SCRs are an electronic record of key information from the patient's GP practice
- All practices in England have uploaded their patients' SCRs to the Spine
- SCRs provide authorised healthcare professionals treating patients in different care settings with faster access to key clinical information

- SCRs are optional, a patient can choose to have one or not, and they can change their mind at any time by contacting their GP practice
- SCRs are only accessible with permission from the patient, except for exceptional circumstances (e.g. emergency access, if the patient is unconscious)
- The SCR is automatically updated in real time when the data items in the GP record are updated
- No other healthcare setting can update the SCR apart from the patient's GP practice

Current access to the SCR is limited to some commissioned Enhanced Optometry Service pathways at the point of referral upon the commissioned IT platform, aimed at supporting secondary care decision making and not consistently available across the whole NENC footprint.

During the pilot, access to the SCR has been available for ANY patient while taking 'history and symptoms' to support knowledge of confused or complex medical history.

The pilot has involved nine Optometry Contractors, including domiciliary, small independents, large independents, and multiples, to capture a wide range of insights into the accessibility and helpfulness of the information within the national SCR (six Emergency NHS Dentist Contractors are also participating in the pilot).

It started as a small project (three-month access) in the NENC but has led to larger conversations within NENC ICB and NHSE digital teams. National Optometry chains are also interested in the outcomes.

3. As part of a population health management project aimed at supporting PCNs understand their population health needs, using a Community of 1000 tool, it was identified that LOCs would benefit from a similar insight to help shape future discussions around neighbourhood working. This highlighted how little eye care data is available across the System, so it was concentrated on Eye Emergency data and GOS provision.

The outcomes so far:

- Introduction to Population Health Management Training for LOCs
- Initiated discussions on how to use this approach to develop a case for change that fits with the ICB priorities, including targeting inequalities and social deprivation

Acknowledgements

- NENC LOC Forum
- North Cumbria LOC
- Northumberland, Tyne and Wear LOC
- Durham LOC
- Tees LOC
- Wider Optometry workforce
- NENC Primary Care Collaborative has representatives from the regional LMC, PCN Clinical Directors Group, regional GP Federation Alliance, Dentistry and LPC
- NECS Consultancy provides project management support to the NENC Primary Care Collaborative

Further LOC case studies can be found here

