**Lisa Baker – April Update**

ERYCCG –We have had a really busy month with East Riding of Yorkshire, the subcontracts have gone out to all providers for electronic signing, and the majority have been returned. (39 out of 45) This has enabled the contractors to be authorised on the Optomanager system and we already have a healthy number of patient episodes going through the system. Much of my time has been spend dealing with queries associated with this process, ensuring that the relevant quality assurances have been met and then authorising them on the system, and working through a number of teething problems which we have encountered. As always updates have been published on the website and a good number of performers viewing the website to see what has been happening. We now have a couple of demos of Optomanager on here so providers are able to see how the system works. <http://www.primary-eyecare-north-yorkshire-and-humber.org/>

The Minimum data set – a report which needs to go to the commissioners is a piece of work that I am working on with webstar at the moment. It would seem that this needs to be done in a “bespoke” way so that I can easily prepare a report on a monthly basis to go to the commissioners. I have been assured that this will be ready by 9th May 2014.

At last the QIO2 is ready for providers to complete, this has taken significantly longer than we had anticipated and to enable contractors to be able to work through this I compiled a “guide” and all the downloads of policies needed to comply. This was emailed to all ERY contractors as it is a necessary Quality assurance of the scheme but is also available on the website for others wanting to utilise it. LOCSU have also asked permission to use if for other contractors of LOC companies to which I agreed.

In East Riding of Yorkshire these need to be completed by the end of May and so I will inevitably need to chase practices to get this sorted. Unfortunately as this stage it will not be possible to upload QIO 2 reports directly via Optomanager and so I will need to collect these from each practice by means of a tracker.

The mobilisation of this contract has been real learning curve for me and webstar themselves, I have been liaising with Gian from webstar to ensure that any future mobilisations don’t stumble across the same hurdles as us.

Hull CCG –Despite the lack of success in the last tender for the CORRS service, Hull CCG decided that they would have a further bidder event to try and drum up extra contractors. The meeting was attending by Ean and Greg and no other interested parties so I think it is probably safe to say that there is no further take up. Ean has negotiated a meeting with the director of commissioning at Hull and will be asking LOCSU to attend to try to get them to understand the benefits of a single provider contract. Whilst many providers are feeling cross and disappointed with Hull, it really is important that should the occasion arise that we can overcome this to be able to provide an excellent service to the CCG.

North Lincs CCG –Despite my best efforts there has been no communication with the commissioner. I have, however had sight of a contract which was sent out to each current provider of the service.

This unfortunately had not been verified by the LOC or LEHN. A correspondence was sent from the LOC to advise contractors not to sign the contract until specific details and tariff of the scheme has been discussed further.

NE Lincs CCG – I have not had any update with regard to NE lincs CCGs intentions.

Hambleton and Richmondshire – Whilst we have been told that the current contract will roll over we have yet to be given the exact timescale. All back payments for this locality have been settled

Scarborough CCG – have had several meetings with them now regarding the continuation and development of Primary eyecare in the area, they are keen to work with us which is great news.

A meeting last week with the CCG and Acute trust explored other potential opportunities to look at developing the scheme further by including post cataract follow ups. I am working with their senior commissioning manager to work this up. I am awaiting a communication from Scarborough to discuss further developments. I suspect this will align with York Hospital Trusts intentions.

Harrogate CCG– Harrogate also intend to roll over the contract however once again we have been unable to verify the timescale. I have been in touch with contractors regarding outstanding payments owed and hopefully that the majority of these will be paid this month.

Vale of York CCG – Again I have had a successful meeting with the senior commissioning manager and procurement manager at York. They are keen to work with us as a single provider company and are working up the specifications to share with us. Having met with York their initial intention was to provider a waiver for tender and recommission the service via the company, however because the new service will not be “like for like” this can’t happen and so they have decided to roll over the contract as is for 6 months and then put an AQP out for interested parties to bid for.

Overdue payments in North Yorkshire every practice has been contacted to ensure that they are aware of the new process for submitting payments via the Choice office. I have had a number of calls with practices not being sure about this but I am hopeful that the majority of these will be paid by the end of June. A power point presentation given at the NYLOC was forwarded to practices and also published on the website with instructions so that practices can make the relevant claims.

LEHN – I attended a meeting with the LEHN and a really productive discussion was had about priorities across the patch. There was a representative from Vale of York CCG representing Urgent care who is looking to develop a pathway of care to somehow deflect some A&E activity.

I have also been approached by Sarah Anderson Consultant Ophthalmologist at York Hospital with a proposed plan for Cataract follow ups – I suspect if we can work this up in York that Scarborough will follow suit as they are now classed as the same trust. I am liaising with her closely as she seems keen to get things started as soon as possible.