



REVISED GUIDANCE
Model LOC Constitution

from LOC Central Support Unit
on behalf of ABDO, AOP, FODO

Revised February 2017

This guidance from the LOC Central Support Unit (LOCSU), prepared on behalf of the national representative and negotiating bodies, the Association of British Dispensing Opticians (ABDO), the Association of Optometrists (AOP) and the Federation of Ophthalmic and Dispensing Opticians (FODO), is addressed to Local Optical Committees (LOCs).

It does not form part of the model constitution. It cannot, therefore, be relied upon as a definitive statement of the law.

OBJECTS OF COMMITTEE

The functions of LOCs, as prescribed by law, are simply stated as being to represent local contractors and local performers. On the basis of past experience such functions, if not currently undertaken, may include the following activities:

1. Informing, advising and negotiating with NHS England Regional Local Teams (RLTs) or Clinical Commissioning Groups (CCGs) on matters affecting, or liable to affect, local contractors and local performers, including, but not limited to:
 - 1.1 the efficient administration and payment of remuneration in relation to Primary Ophthalmic Services;
 - 1.2 the introduction and implementation of any local extended primary eye care services or community eye care services;
 - 1.3 the terms and conditions upon which any local extended primary eye care services or community eye care services are provided and performed;
 - 1.4 Hospital Eye Services, in so far as they affect Primary Ophthalmic Services;
 - 1.5 complaints against local contractors and local performers in respect of Primary Ophthalmic Services, local extended primary eye care services or community eye care services in the area for which the committee is formed.
2. Responding to consultations initiated by NHS England RLTs, CCGs or any other local body.
3. Facilitating and encouraging local contractors and local performers to formulate collective views on the performance and administration of Primary Ophthalmic Services and local extended primary eye care services or community eye care services. In particular; to make suggestions for their improvement within the scope of the regulations and to transmit them to the RLTs, CCGs or any other relevant body.

4. Disseminating information about Primary Ophthalmic Services, local extended primary eye care services and community eye care services among local contractors and local performers and to help them to understand and comply with their contractual and other obligations.
5. Conveying the views of local contractors and local performers on Primary Ophthalmic Services, local extended primary eye care services and community eye care services to the national representative bodies.
6. Contributing to the development of national policies on all levels of Primary Ophthalmic Services and related services by, *inter alia*, liaising with LOCSU and the national representative bodies, attending or making representations to the National Optical Conference, its successors or equivalent events.
7. Liaising with other LOCs and LOCSU to support the LOC in developing and achieving their objectives in respect of primary ophthalmic services, local extended primary eye care services and community eye care services.
8. Obtaining support, advice and training services from LOCSU and/or the national representative bodies to assist in the discharge of any of its functions and activities.
9. Carrying out such administrative activities as are necessary to perform the functions set out above.
10. The Committee may delegate any of its functions or activities, with or without restrictions or conditions, to such sub-committees as it may establish.

For short term assistance for individual contractors and practitioners and NHS England with performance issues please see the 'What is the Role of an LOC' document on the LOCSU website: <https://www.locsu.co.uk/locs/guidance/>

MEMBERSHIP OF COMMITTEE

The constitution stipulates that the members of the Committee must be local contractors (or their nominated representatives) or local performers. Since the implementation of the national performers list in April 2013, performers are eligible for election to whichever Committee they choose to represent them.

Note that, according to the constitution, contractors and performers are to be elected separately to the Committee.

STATUTORY LEVY

A Committee's expenses should be met by means of a statutory levy on the GOS sight test fees payable to local contractors. The Committee's proposed expenses, should be incorporated in the Committee's annual budget or business plan to be agreed at the Annual General Meeting. Note that the budget and levy must be agreed by the RLT on behalf of NHS England.

AMENDMENT OF CONSTITUTION

After adopting the revised model constitution (November 2016) , it is unlikely that an LOC will have to amend its constitution, unless there is a change in the law. Any changes in the law will be notified to LOCs by LOCSU and the national representative bodies. Alternatively, there may be a change in the circumstances of an LOC or the RLT(s).

The LOC is required to agree any proposed changes to its constitution with the RLTAT(s).

CONFLICTS OF INTEREST

All members of the committee must distinguish between their own private interests, and those of the contractors and performers in the area they represent. Consequently all activities of the committee must be fully transparent.

COMPLAINTS AGAINST COMMITTEE

In recent years, a number of complaints have arisen relating to the work of a few LOCs. Consequently, LOCSU and the national representative bodies make the following recommendations.

1. If a local contractor, local performer or member of the Committee of the area has a complaint against the Committee, the complaint should be directed in the first instance to the Chairman or Secretary or another officer of the Committee, as appropriate. The officer should consider whether the RLT should be informed of the complaint.
2. If the officer of the Committee, to whom the complaint has been directed, believes that it is not appropriate to deal with the complaint, the complaint should be directed to LOCSU or, if that is inappropriate, to the national representative bodies, which will investigate the complaint and make recommendations on the resolution of the complaint. LOCSU or the national representative bodies should notify the LOC and the complainant of the outcome of the investigation and the recommendations. The LOC must either follow the recommendations or refer the

matter to an Extraordinary General Meeting.

3. Nothing in this constitution should affect the legal rights of the Committee or a person making a complaint.

LOC SINGLE PROVIDER COMPANIES

If the committee proposes to establish an LOC single provider company it must submit its proposal to all local contractors and performers at the annual general meeting (AGM) or an extraordinary general meeting (EGM). This should include all proposals for the use of LOC funds to finance any of the LOC Company's activities.

The LOC Company must ensure transparency and equality of information and opportunity for all local contractors in matters relating to the commissioning and provision of local enhanced services or other community eye care services.

All activities of the LOC Company must be regularly reported back to the LOC and local contractors and performers.

CONFLICTS OF INTEREST

All directors of the LOC Company must distinguish between their own private interests, the interests of the company, and those of the contractors and performers in the area.

The interests of the LOC Company must align with the interests of the committee and the contractors and performers it represents.

DISPENSING OPTICIANS

As LOCs will know, dispensing opticians (DOs) play a significant role in the delivery of high quality eye health services to the public.

Under current legislation, Dispensing Opticians (DOs) – as contractors – are legally entitled to be members of LOCs (as are lay contractors). This is reflected in the model constitution. LOCSU and the national representative bodies also take the view that DOs who are not contractors should nevertheless participate in the work of an LOC. They are an integral part of the eye health professions. The national representative bodies believe it important that the professions speak with one united voice at both national and local level.

We would ask all LOCs, therefore, to ensure that at least one local DO who is not a contractor is properly included in their memberships by means of co-option.

OPTOMETRIC ADVISERS

Optometric advisers (OAs) may be employed by NHS England or CCGs; and, as such, it would not be appropriate for an OA who was a contractor or performer to be a Committee member of an LOC. On the other hand, OAs should be invited and encouraged to attend meetings of LOCs as observers, if only for part of the agenda.

For further information, contact:

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