# STAFFORDSHIRE LOCAL OPTICAL COMMITTEE

**Developed by the LOC Central Support Unit (LOCSU) for NHS England and the Optical Confederation. Amended by Committee members.**

**11 September 2023**

DEFINITIONS

1. In this Constitution unless the context otherwise requires:
   1. “the Committee” means Staffordshire Local Optical Committee (SLOC) recognised by NHS England under the National Health Service Act 2006 section 125(1).
   2. “local contractor” means each person (including a body corporate) who, under a General Ophthalmic Services contract entered into by him, is providing Primary Ophthalmic Services in the area for which the committee is formed, as described in the National Health Service Act 2006 section 125(2); or their nominated representative.
   3. “local performer” means each optometrist who:
      1. is performing primary ophthalmic services in the area for which the committee is formed and
      2. has notified NHS England that he wishes to be represented by the committee, and has not notified it that he wishes to cease to be so represented

as described in section 125(3) of the National Health Service Act 2006.

* 1. “NHS England” means the NHS Commissioning Board established under section 9 of the Health and Social Care Act 2012.
  2. “LOC Central Support Unit” (LOCSU) means the national support organisation for LOCs.
  3. “Clinical Commissioning Group” (CCG) means NHS organisation established by the [Health and Social Care Act 2012](https://en.wikipedia.org/wiki/Health_and_Social_Care_Act_2012) to organise the delivery of [NHS](https://en.wikipedia.org/wiki/National_Health_Service_(England)) services in England.

TITLE

1. The Committee is to be known as the StaffordshireLocal Optical Committee.

FUNCTIONS

1. The functions of the Committee are those prescribed in the National Health Service Act 2006. The Committee may undertake such activities as are necessary to support the prescribed functions and to respond to requests from NHS England, CCGs and other relevant commissioning bodies.

On the basis of past experience such functions, if not currently undertaken, may include the following activities:

* + 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:
  + Hospital Eye Services, in so far as they affect Primary Ophthalmic Services;
  + 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.
  + Responding to consultations initiated by NHS England RLTs, CCGs or any other local body.
  + 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.
  + 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.
  + 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.
  + 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.
  + 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.
  + 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.
  + Carrying out such administrative activities as are necessary to perform the functions set out above.

MEMBERSHIP

* 1. The Committee shall consist of at least seven elected members but no more than FOURTEEN (including Secretary -either Lay Secretary or secretary appointed from the Committee). At least two members shall be an elected dispensing optician. Where practical two elected members shall be local contractors (or their appointed representative) elected by local contractors; and two shall be local performers elected by local performers and one shall be an elected Hospital Optometrist.
  2. All the local contractors shall be entitled to vote in the election of the members of the Committee who shall be local contractors. All the local performers who have elected to be represented by the LOC under Clause 1.3.2 shall be entitled to vote in the election of the members of the Committee who shall be local performers.
  3. The term of office of the members of the Committee is three years. On the expiry of his term of office, a member is eligible for re-election.
  4. Going forward from this Constitutional Revision (September 2020) an Election of half the committee will occur after 2 years and the other half after three. After which time elections will continue to be held in years 2 and 3 of a 3 year cycle

A Chairman, Treasurer and Secretary (where a lay secretary has not been appointed) shall be elected by the committee at the first meeting following the Annual General Meeting1. They shall serve for three years and then be eligible for re-election. 2 Vice- Chairman may also be elected on the same terms.

* 1. The Committee may co-opt up to three members who may or may not be local contractors or local performers. This may include at least one dispensing optician practicing locally who is not eligible to stand for election as a contractor or contractor’s representative, if there are not two elected Dispensing Opticians.
  2. Various subgroups will be appointed by the committee to support the Chair and Secretary by splitting up the responsibilities of the committee and creating a clear trail of accountability. Subgroups will share specific tasks, or investigate new areas of work, within the jurisdiction of the full committee. They will report to the Chair and Secretary and do not always have the final say in decisions. Subgroup members may seek expertise from outside the committee.

DISQUALIFICATION OR RESIGNATION OF MEMBERS

* 1. An elected member of the Committee, who ceases to be a local contractor, local performer or an appointed representative of a local contractor, shall vacate his place on the Committee with immediate effect. In such circumstances, a casual vacancy shall be declared.
  2. If a member of the Committee has been absent from three consecutive meetings of the Committee, the Committee shall declare that his seat on the Committee has been vacated, unless the Committee is satisfied that his absence was due to illness or other reasonable cause.
  3. A member of the Committee may at any time resign his place on the Committee or post as an officer in writing to the Secretary or lay secretary.

1 See also Clause 14.3

2 e.g. to make the LOC more representative of the local optical community or to fill skills gaps

METHOD OF FILLING CASUAL VACANCIES

1. If, by reason of the resignation, death or disqualification of a member of the Committee, a casual vacancy is declared, the Committee may elect a person to fill the vacancy. Where the outgoing member is an elected member, the person elected to fill the vacancy must be a local contractor or local performer, as the case may be. The member so elected shall hold office for the remainder of the term of office of the member of the Committee who has been replaced.

VALIDITY OF PROCEEDINGS

1. The proceedings of the Committee shall not be invalidated by a vacancy in its membership or by any defect in the appointment of any member of the Committee.

PROCEEDINGS OF COMMITTEE

* 1. The Committee shall meet at least three times a year, at such time and place as is generally agreed.
  2. The officers shall give at least 21 days’ notice of each meeting of the Committee to all local contractors and performers. In cases of urgency, this period of notice may be reduced to 5 days.
  3. One third of the number of the members of the Committee, shall form a quorum of the Committee. Where one third is not a whole number, the quorum shall be the next whole number above one third. Where one third is only two members, the quorum shall be three members.

OBSERVERS

* 1. Subject to rule 9.4, any local contractor or local performer may observe the meetings of the Committee.
  2. The Committee may also invite other persons to attend its meetings (in part or in whole) as observers. Such observers may include the Chair of the Local Eye Health Network, clinical advisors and other representatives of NHS England and CCGs and other stakeholders as appropriate.
  3. Observers shall normally be given meeting papers and invited to participate in the discussions; but they shall not be entitled to vote.
  4. The Committee may, at its discretion, go into private session and ask observers to leave.

METHODS OF COMMUNICATION

* 1. Communications within the Committee and between the Committee and the local contractors and local performers should be in writing by email fax or post, as appropriate. It is the duty of local contractors and performers to inform the secretary of their contact details.
  2. The LOC should have a website that contractors and performers can refer to for information.
  3. The Committee may also use Social Media (such as Facebook, WhatsApp, etc.) to communicate within the committee and to the wider local profession, when appropriate.

FINANCE

* 1. A majority of the elected members of the Committee shall, in respect of each year, determine the administrative expenses to be incurred in the performance of its functions and request NHS England to allot such sums as NHS England may determine for defraying such expenses by means of deductions from the remuneration of local contractors (Statutory Levy), pursuant to sections 125(9) to (11) of the National Health Service Act 2006.
  2. The administrative expenses in 11.1 may include membership of LOCSU.
  3. The Committee is also empowered to raise funds by voluntary levy for such other purposes as the Committee may approve.
  4. The Committee shall arrange for its annual accounts of income and expenditure to be independently inspected by suitable person or persons and reported to the Annual General Meeting and to NHS England.

RECORDS

12 Written minutes shall be kept of each meeting of the Committee and be made available for inspection to all local contractors and local performers.

GENERAL MEETINGS

* 1. The Committee shall arrange an Annual General Meeting of all local contractors and local performers within three months of the end of the Committee’s financial year.
  2. An Extraordinary General Meeting may be held at any time, if called either by the Committee or by at least twenty local contractors and/or local performers.
  3. The Secretary of the Committee shall give notice of the Annual General Meeting or an Extraordinary General Meeting at least 21 days in advance to all the local contractors and local performers, in writing or electronically. In the case of an Extraordinary General Meeting, the Secretary of the Committee shall notify the date, time, place and purpose of the meeting to all the local contractors and local performers, in writing or electronically.
  4. The business of the Annual General Meeting shall include:
     + the report of the Committee’s activities of the past year;
     + the presentation of the inspected accounts of the past year;
     + the appointment of accounts inspectors for the following year;
     + the election of one third of Committee members3.

ELECTION OF THE COMMITTEE

* 1. For the election of the Committee, the Committee shall appoint a Returning Officer to supervise the election. In the event of the person appointed as Returning Officer being unable to act, he must appoint a person, other than an elector, to act as deputy in his or her place. The Returning Officer shall not be a candidate for election to the Committee.
  2. The Committee may reimburse to the Returning Officer all expenses properly incurred by him in the conduct of the election.
  3. All local contractors and local performers shall be entitled to be present and to vote at the Annual General Meeting; or to appoint a proxy to cast their votes for them who shall be a local contractor or local performer; or to vote in advance in writing on the published resolutions and the election of the Committee.
  4. In an election, no individual shall vote twice, although he or she may also act as a proxy for one or more local contractors or local performers.
  5. The local contractors and local performers present at the Annual General Meeting may appoint a Chairman to preside over the meeting and appoint two scrutineers to assist the Returning Officer in the counting of votes.

GOVERNANCE

* 1. Members of the Committee shall declare any interests when standing for election and on appointment to the Committee, as well as at the start of each Committee meeting and on relevant items on the agenda.
  2. Members of the Committee, having an actual or potential conflict of interest in relation to an issue, shall not engage in discussion, or vote, on that issue.
  3. Members of the Committee as elected representatives of registered healthcare professions shall at all times behave in a professional manner and within the normal rules and expectations of commercial and professional confidentiality relating to the work of the Committee. They shall not divulge, act inappropriately upon, or use inappropriately any information obtained by virtue of their membership of the Committee or its work. They shall be demonstrably scrupulous in this regard at all times and, particularly, when they might have an actual or potential personal interest. They shall be reminded of this requirement at each meeting as appropriate. Any infringement of this requirement shall be dealt with, as the Committee judges fit and recorded in the minutes.
  4. In connection with their membership of the Committee and its work, members of the Committee shall ensure transparency and equal provision of information and opportunity for all local contractors in matters relating to the commissioning and provision of local optical services.

AMENDMENT OF THE CONSTITUTION

* 1. The Committee may make amendments to the Constitution with the approval of no less than three quarters of the members of the Committee.
  2. The Committee shall notify and provide details of any amendments to the constitution to NHS England. Such amendment(s) shall not come into force until NHS England indicates that it is content to continue to recognise the Committee after such amendment(s) come(s) into force, including by silence within a reasonable period4.

OPTOMETRIC ADVISERS

17.1 Optometric advisers (OAs) may be employed by NHS England; 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, except for any agenda items where there may be a conflict of interest.

COMPLAINTS AGAINST COMMITTEE

18.1. 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.

18.2. 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.

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

LOC PROVIDER COMPANY

19.1 A Company Limited by Guarantee has been recognised and formally appointed by the LOC to act on behalf of all local contractors in the LOC area who wish to participate when local Commissioners of community optical services wish to contract with a sole provider rather than directly with individual local contractors.

19.2 The following Memorandum of Understanding between the LOC and the Provider Company is in place (See Appendix 1)