

Post circulation amendment – Amanda Kelly apologies – ref email from Lucy Corner 28/9/23

MINUTES OF COMMUNITY PHARMACY DERBYSHIRE COMMITTEE MEETING

held on

Thursday 21st September 2023

Holiday Inn, South Normanton

| MEMBER | CATEGORY | 21.9.23 |
|--|-----------------|----------------|
| Andrea Smith, Chair | AIMp | ✓ |
| Darryl Dethick Treasurer | AIMp | ✓ |
| David Evans Vice Chair | AIMp | ✓ |
| Ben Eaton | AIMp | ✓ |
| Nitin Lakhani | Independent | A |
| Matthew Hind | Independent | ✓ |
| Lindsey Fairbrother | Independent | A |
| Yasir Pirmohamed | Independent | ✓ |
| David Holmes | CCA | ✓ |
| Bethan Chamberlain | CCA | ✓ |
| Amanda Kelly | CCA | A |
| Khuram Ahmad | CCA | A |
| Nick Hunter Chief Officer | Officer | ✓ |
| Katherine Newman Support Officer | Officer | A |
| Amanda Alamanos Engagement Lead | Officer | ✓ |
| Chris Kerry GPCPCS lead | Officer | ✓ |

✓ Present / A Apologies for absence / Absent X / R Resigned/ S sick/ N/A Not applicable * Member unable to attend all or part of meeting due to attendance at a meeting elsewhere on behalf of the LPC on the same day.

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| 1. | | Welcome/Apologies/Introductions/Announcements |
| | <u>1.1</u> | Andrea welcomed everyone to the meeting |
| | <u>1.2</u> | Apologies received from Lindsey Fairbrother, Khuram Ahmad, Nitin Lakhani and Amanda Kelly. Alison Ellis was in attendance to take minutes due to Katherine Newman absence. Shazia Patel, JUDC CPCL joined the meeting from item 6.4. |
| 2. | | Declaration of Interests (DoI) |
| | <u>2.1</u> | No additional declarations were received. All members have completed the declarations and were reminded to update when needed. Nothing further to note regarding items on the agenda. |
| 3. | | Approval of minutes from previous meeting |
| | <u>3.1</u> | The minutes of the meeting held on Tuesday 18 th July 2023 were agreed as a true and accurate record. AS reported that they had also been checked with regards to competition law. |
| 4. | | Matters arising from previous meeting |
| | <u>4.1</u> | Nothing raised |
| 5. | | Review of action points (By exception) |
| | <u>5.1</u> | Action points from the minutes included on the agenda. |
| 6. | | Reports |
| | <u>6.1</u> | Chair report Nothing more to add other than already included in the agenda. |
| | <u>6.2</u> | Finance and Audit Finance subcommittee met on the 5 th Sept – minutes sent out previously. Signed off accounts from accountant – these need to be formally signed off by the committee and contractors. Once this has been approved then will share with NHSE and annotated as such on the LPC website. Have 6 months to submit the accounts from year end – 30 th Sept is the last date but will be slightly delayed this year. DD suggested that the AGM maybe be moved earlier (July) so have more time to formalise especially if there are queries on the accounts. AGM is a formal constitutional event but sometimes it is linked to a contractor event with training. Should this be separate? Should hold the AGM separately during the LPC meeting and be able to send in votes and also have virtual attendance? Made decision this year that the AGM would be held on the evening of the September LPC meeting and invite contractors to attend. Unfortunately, the notice and accounts were not sent out to CCA contacts with 30 days notice and therefore exec are asking committee members if they agree to the accounts being voted on at the AGM by those present and then sending out the accounts to CCA / AIM contacts giving 30 days notice. Once have full agreement then send through to CPE and NHSE. |

Contractors were made aware of the AGM and received the accounts via Mailchimp.

All members agreed

Action: AE will send out the postal votes to the CCA and AIMp pharmacies contact list as per CPE guidelines – need a contractor list from NHSE. NH will ask Di Wells to send through. An AGM page will be set up on the LPC website to facilitate.

Levy holiday

DD sent through notification to NHSBSA for levy holiday and this has been set for November and December 2023.

10 months reserves – 6 month levy to CPE - £35,000 - will be taken out on 1st October 2023 and then reduce the amount in the bank.

Annual spend £170,000.

Money held in trust

£175,000 – in the NHS trust account.

Some of the projects that are not active at the moment are:

Osteoarthritis project - £24,500

£10,000 additional services – tie in with engagement event in new year. Discuss this in the November meeting for January 2024 event to hopefully link with the launch of the common conditions service.

Suggestions from the Finance and Audit committee for using the money in trust

- 1) Carry on as we are – leave significant amount of money to fund future work.
- 2) Distribute to all contractors – buy bp kits, recalibrate equipment, resources for services – develop incentive scheme and claim process.
- 3) Pull together a business case for alternative suggestion to use the money.

Could be some work that Shazia, CPCL, is looking at with the expressions of interest received for the IP pathfinder that are unsuccessful.

Claims for this meeting

Members to send any claims through to DD for today's meeting attendance.

Action: Discuss engagement event in January 2024 at the November LPC meeting

• Governance

6.3

Few governance issues have arisen recently.

Staff Contracts:

Wishing to set some performance objectives and look at how manage employed members of the team – part of the strategy part of the meeting.

Support officer

KN is currently not at work as quite poorly and AS would like to lighten the workload. No official notification of being off sick received yet and so not sure how long will be off work. AS will speak with KN over the next few days to see what she feels she is able to do. Need to have a short term and long-term plan in place.

All agreed that should send flowers and card to KN – AS will organise.

May need to have an occupational health referral to help with knowing what the LPC should be expecting to complete.

HR advice:

Have access to Clyde and Co documentation – receive basic support through CPE. AS has access to documents and have a contact person to speak to. AS will ask the questions around how the LPC should be supporting KN. ACAS website also has useful information – they have specific information on process for sickness and DE advised on some local HR companies.

Action: AS will contact KN to do an employer health check and ascertain the amount of time that KN will need to be absent from work.

Action: AS to contact Clyde & Co for advice on what the LPC should be doing to support KN

GP-CPCS lead

CK has a contract until 30th September 2023.

Committee spoke previously about extending the contract by 6 months – AS has discussed the contract with other LPC colleagues and as CK's contract started on 13th December 2021 this means that she will have been under fixed term contracts for over 2 years and therefore this means that will have employment rights. Discussed the risk to the committee and only liable for redundancy payment of a couple of weeks and the need to demonstrate the role is no longer required.

Agreed to extend 6 months at the last meeting but does this change with the 2 years – extending would automatically mean CK is treated as an employee – the funding currently comes from the MOU from NHSE but this is not recurrent.

Need to determine what CK role is from the strategy as the landscape has changed. Maybe could extend the role to look at different areas and make more use of CK's skills.

UEC referrals – will be working on this imminently and link with the common conditions / extended care service – when receive the information can ask CK to focus on this and link with GPCPCS.

GPCPCS:

Numbers have dropped off for referrals and this is consistent across Midlands and Nationally. Reliant on GP's and then the ICB didn't give any targets to practices.

Members all agreed that will extend CK contract (permanent contract). AA, as Line Manager, will look at the Clyde & Co information regarding risks and contract.

Action: Amanda Alamanos agreed to look at the contract and risks for the committee with Clyde & Co as she is CK's line manager.

Peter Cattee – LPC member

Peter Cattee left the committee in July 2023. Served on the LPC for 40 years approximately.

Card and gift to be presented – DD will sort out voucher and send through to Peter. DD will send invoice/ order to AS for approval.

Action: DD to organise for card and gift to be sent to Peter Cattee as leaving present for long service on Derbyshire LPC.

6.4

- Communications – AA and NH

Met with Arch and challenged the amount the LPC spend for public facing communications. Landscape has changed as they are advising patients to come to pharmacy but creating activity which is unfunded as have now services that need referrals from gp practices.

Need to have a greater focus on contractor comms covering the services available and current issues they need to be aware of.

Currently pay nearly £1000 a month to Arch and feel that this is not value for money for contractors.

Other LPCs have had success with using marketing consultants for their internal and external comms plans.

Members who are also on CP Notts stated that a survey of Nottinghamshire Contractors showed that they use LinkedIn and therefore the LPC have created videos and shared via LinkedIn and Twitter which have been well received.

Arch were resistant to changing how they work for the LPC. They are not aware of the activity that their work generates for Derbyshire contractors.

Newspaper is a shrinking audience and social media is the way forward.

Shazia – Healthwatch are currently asking questions on what pharmacists actually do and if there are differences between supermarket and independent pharmacists.

TikTok and Instagram are the platforms that young people are using.

Look at this further in the strategy session to see what actions are agreed and then how to achieve targets.

6.5

- Chief officers report

Number of System meetings is increasing - NH will copy in the exec team to emails when needed.

NH has asked why there are still separate APC meetings for City and County, especially as they discuss similar issues - there is a lot of duplication of meetings in the NHS at the moment.

Shazia reported that there is currently a review regarding the number of ICB meetings and who needs to attend.

Strategy review – need to look at what meetings NH and AA attend and what focusing on. Need to maximise the time employees have.

NH and AA have agreed that NH will attend any clinical meetings and AA will attend the operational meetings and then deputise for each other.

Shortages protocol

- Been asked to sign up to the protocol around terms of service – not fit for purpose anymore. Discussed with Shazia – looking at an East Midlands approach as Notts are also working on this. Need to consider pharmacy and practice working and price concessions etc.
- MH reported problems when offer alternatives with delays from practices sending through another prescription and then the alternative is then not available.
- when first saw this protocol the LPC said the agreement was that the practice would do ERD but this has not happened.
- Concern that GP could direct to certain pharmacies – not allowed to direct.
- Not prescribing branded medications.

ICB are still working on the protocol and NH will send through comments raised.

- Engagement Lead report - AA

6.6

UEC referrals

Met with hospital trust with Shazia - looking at IT, they did not realise that would need to do electronic referral - CK will lead on this.
Standardised approach – LPC are supportive.

Flu service

Jerry Sanderson – Derbyshire Council.

Service delivering flu vaccine to front line staff – previously given a voucher from their employer and then present to their local pharmacy.

Derbyshire County do not have an occupational health department so most staff covered by NHS service provision.

Now only doing business critical staff.

Resource needed for setting up PharmOutcomes and need to look at if this is viable now given the smaller numbers.

Doing during 2nd cohort so not be seeing any now and so the flu vaccine rush will have calmed down.

Private consultation – need to set a fee – should be at least the same as the national service fee.

Derby City – have a rolling contract from last year - £12 **including** vaccine – pharmacies signed up received a message through PharmOutcomes. AS reported that she had sent through a message stating that her pharmacy would not be taking on this service due to the fee. Members all agreed that this is too low and should be at the national cost level.

AA and NH do not have access to the CPD PharmOutcomes license area – only LPC dashboard viewer so currently can't access the service set up.

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| | <p>KN raised a ticket through PharmOutcomes but not sure if this has been actioned.</p> <p>AA is meeting with Tania Cork next week so will ask if she still has access and can create a user account.</p> <div style="border: 1px solid black; padding: 2px;"> <p>Action: AA will meet with Tania Cork and ask if still has access to PharmOutcomes and able to create a user account.</p> </div> <div style="border: 1px solid black; padding: 2px;"> <p>Action: Once have access to PharmOutcomes then look at the service set up and discuss fees with council</p> </div> <p><u>LMC</u> AA also met with Andrew Mott, Medical Director from the Derbyshire GP Provider Board, and Ian Potter from ICB</p> <ul style="list-style-type: none"> - Working with GPs - Useful meeting and some opportunities for joint working - Asked Ben Milton, Derby and Derbyshire LMC medical director for a meeting - Wishing to have attendance from LPC on ICB meetings and at LMC - There isn't a Local Rep Committees joint meeting in Derbyshire at the moment <p><u>Sexual Health Alliance</u></p> <ul style="list-style-type: none"> - AA will circulate the partnership charter - Asking for volunteers for task and finish group for sexual health strategy – AA volunteered - Funding allocated to all – women health hub – school nursing team, pharmacy, sexual health clinic and mapping where the services are. Have good engagement from all areas – very interested in the services that pharmacy can do – i.e. EHC and contraception service – and why are they asking others to do – need to join up. Big area and opportunity to make changes. - Survey – AA will send through the link to members and this needs to be included in the newsletter / website. <div style="border: 1px solid black; padding: 2px;"> <p>Action: Survey link to be sent to contractors by newsletter / website.</p> </div> <p><u>Attendance at meetings</u> Lindsey Fairbrother not present at the meeting.</p> <ul style="list-style-type: none"> - Not attended the last 3 meetings but it is only 1 in the new committee – NH will chat with LF and remind that needs to attend the next meeting. Apologies were received due to covering Covid clinic. <div style="border: 1px solid black; padding: 2px;"> <p>Action: NH to speak with LF re attendance at the next LPC meeting</p> </div> |
| | <p>National and regional updates</p> |
| 7.1 | <p><u>NHSE.</u> Already covered in other parts of the agenda.</p> |
| 7.2 | <p><u>IPMO</u> Not discussed – move to November 2023.</p> |
| 7.3 | <p><u>CPCL update</u></p> |

IP pathfinder deadline was 18.09.23 – 10 applications for 4 sites – quality is really high and will come down to priorities and access, deprivation etc.
Scoring at the moment and East Midlands meeting tomorrow for moderating.

Final selection going to ICB panel. Final decision next week / early week after

Shazia is working on the Derbyshire specific service spec at the moment.

Digital

- 14th Sept webinar from NHSE.
- Only assured system is Cleo but not sure how this is going to be used – no one uses at the moment.
- GP Connect interface – available for read only – not developed full functionality yet – think it is being worked on for common conditions service.

National team is asking for how patient data is being recorded and how works with GP Connect. Accurx is used in GP practices already.

Each ICB System has been given funding for project management.

Needs approval through the ICB as they have a current freeze on recruitment, even though this is additional money.

Target go live date is 30th November 2023. Main barrier is IT and pathways, governance etc.

UEC / ED CPCS referrals

- Been to strategic meetings with Derby Royal hospital.
- Derby Community health service have been in contact.

GP-CPCS

- reached out to PCN pharmacists and support CK
- lack of knowledge of what pharmacies do

Workforce

- linked to the Derby Workforce faculty.
- what can Shazia do to help with the workforce – lacking voice from the frontline – need to understand how to bring into the System. Protected learning time – how do get pharmacy to be able to have this?

Primary Care strategy

- embedding pharmacy strategy into the ICB Primary Care Strategy – needs engagement with NH and AA.

7.4

• CPE

LF sent through presentation and NH talked members through.

Full committee last week.

Now have stakeholder and contractor communication channels re polls – heard from ½ contractors through this route.

Governance docs being worked on by CPE.

Subcommittees of CPE

Funding and contract

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| | | <p>Comms and public affairs</p> <ul style="list-style-type: none"> - Save pharmacies campaign. - MPs <p>LPC and contractor support</p> <ul style="list-style-type: none"> - A lot more webinars and support documents being created. <p>Negotiations</p> <ul style="list-style-type: none"> - No further news. - Includes digital infrastructure. - Need the common conditions service asap to help with problems now. - Being able to promote the contraception service would be helpful. - hypertension service – causing LPCs more work and problems. <p><u>CPCF</u></p> <ul style="list-style-type: none"> - Not sure what is happening for the next year. - Asking for increase in retained margin. - Additional funding. <p><u>Price concessions</u> NH advised members to watch the CPE price concessions webinar – available on demand.</p> <p><u>Vision</u> Summary 4-page document. Reflective piece of work – so no surprise it feels that it doesn't tell us anything we didn't already know. It pitches pressure and action on national NHSE and ICBs – commissioning targets and highlights how pharmacy are funded re prescriptions and needing to have additional funding for services. Apprehension around the potential model. Systems have to go through governance processes and then delays the start of services and adds pressure to contractors.</p> <table border="1" style="width: 100%;"> <tr> <td>Action: Members to watch the CPE price concessions webinar</td> </tr> <tr> <td>Action : Members to read the CPE vision document</td> </tr> </table> | Action: Members to watch the CPE price concessions webinar | Action : Members to read the CPE vision document |
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| Action : Members to read the CPE vision document | | | | |
| 8. | 8.1 | <p><u>CCA Questions</u></p> <p>CCA members reported that all questions had been covered and had not received any updated questions this month.</p> | | |
| 9. | 9.1 | <p><u>Pharmacy Services updates and figures</u></p> <ol style="list-style-type: none"> a. <u>CPCS – national update, local update, UEC Streamer tool.</u> Covered in other agenda sections. b. <u>Extended care</u> No further update. c. <u>DMS</u> Working with Shazia. Highlighted border issues due to catchment of Trusts beyond ICB / LA boundaries. d. <u>Oral Contraception Pharmacy Service</u> | | |

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| | | <p>No further update.</p> <p>e. <u>OEC / EHC service</u> No update</p> <p>f. <u>Hypertension case finding service / local funding</u> Running pop ups with Live Well – September / October. Predict 400 patients being referred to CP – using findapharmacy tool. AA will provide some comms to contractors to keep the findapharmacy up to date. Asked to ask patient to contact the pharmacy before attending the pharmacy. They are producing a briefing document to go out to pharmacies</p> <p>g. <u>NMS</u> No update</p> <p>h. <u>Smoking Cessation from Secondary Care</u> No update</p> <p>i. <u>Flu / Covid vaccines (national and city/county service)</u> Discussed earlier in the meeting.</p> <p>j. <u>Supervised consumption / Needle Exchange / Naloxone</u> No update.</p> | | |
| 10. | | Strategy update 2023-2027 | | |
| | <u>10.1</u> | <p>Members present went through the strategy aims discussed last meeting and agreed the actions and the objectives for each section - Protect, Develop, Communicate and Integrate . Four main areas covered were:</p> <ul style="list-style-type: none"> a. Agree quadrants b. Agree responsibility c. Agree timescale d. What does success look like? <p>AS will update the strategic plan with the additional information from the discussion and send round to the exec and then all members – will come to November 2023 meeting for final discussion and sign off.</p> <table border="1" data-bbox="287 1720 1372 1854"> <tr> <td>Action: AS to update the strategy plan and send to the exec and then all members for comments</td> </tr> <tr> <td>Action: Strategy plan to be added to the November 2023 meeting for discussion and sign off.</td> </tr> </table> | Action: AS to update the strategy plan and send to the exec and then all members for comments | Action: Strategy plan to be added to the November 2023 meeting for discussion and sign off. |
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| 11. | | Other items for discussion | | |
| | <u>11.1</u> | <p>Discuss if we need Liam (facilitator) for future work? This was not discussed – forward to November 2023 meeting.</p> | | |
| | <u>11.2</u> | <p>Future for ARCH communications?</p> | | |

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| | <p>ARCH were asked by the exec team to put together a comms plan for information going out to contractors – they produced a plan and quote for work which still included a newsletter article each month along with additional work on Facebook etc It was felt that Arch were not completely onboard with the changes the committee was wishing to make and the costs were quite high compared to what other LPCs are paying for comms support. Members unanimously agreed to not carry on with ARCH and AA will contact and give notice.</p> <p>Action: AA to contact Arch and give 3 months' notice for the termination of contract.</p> |
| 11.3 | <p><u>AGM tonight - format / papers</u> Nothing further to discuss.</p> |
| 11.4 | <p><u>Future LPC meetings – when / where / format?</u> Next meeting has been pencilled in for 21st November 2023 am All agreed that Tuesday is the best day of the week. 3rd Tuesday of the odd number months – July may be a problem due to school holidays but will check this nearer the time of the meeting and move if need to.</p> <p>Action: Meeting invites for 2024 to be sent to all members so can add to calendar and book cover in pharmacy - KN</p> <p>Venue: offer from Peak to use head office as venue and have a buffet provided – Junction 29a M1 Cost of the Holiday Inn is £700 per meeting. Agreed that next meeting to be held at Peak Head Office and discuss / make a decision at the meeting for future meetings. DD will book the room and organise the buffet etc.</p> <p>Times: am usually 9am – 1.30pm. if needed to have a longer meeting then can be planned – i.e. strategy or development session</p> <p>Discussed if items that are just for information could be sent via email rather than be on the agenda. Also suggested was to have different folders for information and one for discussion when sending out the meeting documents. Include a key on the agenda too against the agenda points.</p> <p>Action: Different folders in the meeting documents - one for information and one for discussion. Include a key on the agenda too against the agenda points</p> |
| 11.5 | <p><u>Open invite for contractors / guests at LPC meetings</u> Did not discuss – move to November 2023 meeting</p> |
| 11.6 | <p><u>LPC conference confirm who is attending.</u> David Hind – checking if has cover, AA cannot attend now. NH attending. AA to send a message on WhatsApp to members asking if anyone wishes to attend the conference.</p> |
| 11.7 | <p><u>Branding – and domain change</u> Did not discuss – cover in exec and via email.</p> |

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| <p>11.8</p> <p>11.9</p> <p>11.10</p> <p>11.11</p> <p>11.12</p> <p>11.13</p> | <p><u>PQS – do we need a section on our website?</u> Did not discuss</p> <p><u>CPE member day – YP attended</u></p> <ul style="list-style-type: none"> - It was a long meeting and virtual so felt longer - A lot of returning members attended too - Discussed the role of members and the LPC - Developing LPC pathway – reducing down to 48 next year – still TAPR – not affect Derbyshire as have enough contractors and aligned with ICB. - Covered market entry, competition law and worked through some scenarios <p><u>Market Entry – feedback on process / progress</u> Closures are a notifiable application and cannot send through to LPC until actually closed. Unplanned closure – need to remind pharmacies that they need to send any prescriptions back to the spine. Newsletter item.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>Action: Unplanned closures – remind pharmacies that they need to send any prescriptions back to the spine – newsletter item</p> </div> <p><u>£3100 LPN funding for launch / engagement event for Common Ailments</u> Did not discuss - November meeting discussion</p> <p><u>Implication of patient data from services being visible to patients when online GP records access is implemented.</u> Did not discuss - November 2023 meeting</p> <p><u>Opioid prescribing group feedback</u> Did not discuss – November 2023 meeting</p> |
| <p>12.</p> | <p><u>Pharmacy applications</u></p> |
| <p>12.1</p> <p>12.2</p> <p>12.3</p> <p>12.4</p> <p>12.5</p> | <p><u>NHS contract matters</u></p> <ul style="list-style-type: none"> ▪ <u>New contracts-routine</u> Nothing received ▪ <u>New contracts - accepted</u> Nothing received ▪ <u>Contract applications received from other areas</u> ▪ <u>Litigation</u> Change of ownership – Appeal SHA / 26063 By: Aston Chemists Ltd At: 5 Pennine Road, Simmondley, Glossop, SK13 6NN No observations received – commencing to appeals committee ▪ <u>Decisions</u> Change of ownership From: Lloyds Pharmacy |

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| | | To: LP SD One Hundred Twenty One Ltd At: 5 Vernon Street, Derby, DE1 1FR Approved |
| | <u>12.6</u> | <ul style="list-style-type: none"> ▪ <u>Amendments to the contractor list</u> Nothing received |
| 13. | | AOB Nothing raised |
| 14. | | <u>Date of next meeting.</u> <i>Tuesday 21st November 2023 – 9am to 1pm – Peak Pharmacy head office</i> |

These minutes are signed as being a true record of the meeting, subject to any necessary amendments being made, which will, if any, is recorded in the following meeting's minutes.

Signed: Position:.....CHAIR.....
Date:.....21.09.23

Signed: Position:.....CEO.....Date:.....

During this meeting, along with these minutes, there was a constant check to ensure no discussions could constitute to breaking competition law.

Signed.....position.....Date